

NATIONAL INSTITUTE FOR HEALTH AND CARE EXCELLENCE

Public Health Advisory Committee F – Meeting 3

Sunlight Exposure: benefits and risk

Tuesday 22nd July 2014

NICE London Office, 10 Spring Gardens, London SW1A 2BU

Final Minutes

Attendees:	<p><i>PHAC Members</i> Catherine Law, Janis Baird, David McDaid, John Hawk, Eugene Healy, Gary Lipman Stuart Lines, John Macleod, Ann Nevinson, Lesley Rhodes</p> <p><i>NICE Team</i> Antony Morgan, Emma Doohan, Kim Jeong, Peter Shearn, Tracey Shield, Clare Wohlgemuth.</p> <p><i>Review Team York Health Economics Consortium (YHEC)</i> Anne Morgan, Rob Hodgson, Anita Fitzgerald (via TC 9.45am -1.15pm)</p> <p><i>Experts</i> John Marshall – afternoon only</p>
Apologies:	<p><i>PHAC Members</i> Melvyn Hillsdon, Shelley Mason, Jim McManus</p> <p><i>Co-optees</i> Rashmi Shukla</p>
Author	ED
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Version	Draft 1
Audience	PHAC members, NICE team, members of the public

Item		Action
<p>1. Welcome and objectives for the meeting</p>	<p>The Chair welcomed the Public Health Advisory Committee (PHAC), the review team and the observers to the third meeting on Sunlight Exposure: benefits and risks.</p> <p>Everyone introduced themselves.</p> <p>The Chair informed the PHAC that apologies had been received. These are noted above.</p> <p>The Chair reminded members that they were here on an individual basis rather than representing a particular organisation.</p> <p>The Chair welcomed the members of the public to the meeting. The members of the public had been briefed already, both verbally and in writing by the NICE team, and the Chair reminded them of the protocol for members of the public, i.e. their role is to observe and they may not speak or ask questions. Also, no filming or recording of the meeting is permitted.</p> <p>The Chair reminded all present that the PHAC is independent and advisory, and that its decisions and recommendations to NICE do not represent final NICE guidance; and they may be changed as a result of public consultation.</p> <p>The Chair outlined the objectives of the meeting which included to:</p> <ul style="list-style-type: none"> • Discuss the findings from the effectiveness and cost effectiveness of review on communicating the benefits and risks of sun exposure prepared by YHEC • Discuss the findings from the barriers and facilitators reviews prepared by YHEC • Discuss the overview of key messages across organisations • Hear an update on the work of the SACN vitamin D working group • Hear expert testimony on production of Vitamin D from sun exposure (PHAC members John Hawk and Lesley Rhodes) • Hear expert testimony on sun exposure and eye health (John Marshall) • Start the process of recommendation drafting 	
<p>2. Declarations of Interests</p>	<p>The Chair explained that verbal declarations of interest are a standing item on every agenda and are recorded in the minutes as a matter of public record.</p>	

	<p>The Chair asked the PHAC to declare any changes to their previously declared interests or to make any additional interests in this topic area.</p> <p>Additional interests declared were as follows:</p> <p>Non Personal Pecuniary Interest John Hawk – John is speaking at the World Congress on Cancers of the Skin in September. He will be giving a talk on ‘Field Cancerisation’ and ‘Adequate Vitamin D Production With Adequate Sunscreen Use’. He will be paid an honorarium for both of these talks.</p> <p>John MacLeod – John’s colleagues undertake research on vitamin D and sun exposure at the University of Bristol.</p> <p>Personal non pecuniary Eugene Healy is on the local organising committee for the World Congress on Cancers of the Skin and will be giving a talk. He won’t be paid for this.</p> <p>Action: All DOIs to be recorded in a single cumulative table in the future.</p> <p>It was agreed that the interests declared did not prevent the attendees at committee from fully participating in the meeting.</p>	<p>NICE</p>
<p>3. Minutes of the last meetings</p>	<p>Minutes of PHAC 1 held in April – some minor amendments were made to the recorded declarations of interest.</p> <p>Minutes of PHAC 2 held in June – these were approved as an accurate record with one small amendment.</p> <p>All of the actions from the June meeting had been completed except for the following actions which will roll forward:</p> <p>Action: NICE team to add the final published Vitamin D guidance to the October meeting of this committee</p> <p>Action: PH32 guidance on skin cancer to be added to the next PHAC Agenda</p> <p>Action: The April and June minutes should now be added to the NICE website here http://guidance.nice.org.uk/PHG/77</p>	<p>NICE</p> <p>NICE</p> <p>NICE</p>
<p>4. Developing the guideline</p>	<p>Antony Morgan (AM), Associate Director at NICE, reminded the committee of the guideline development process and confirmed with them the forward meeting plan. Key dates are as follows: PHAC 4 – 8th September PHAC 5&6 – 21st and 22nd October 2014</p>	

	<p>PHAC 7&8 – 17th and 18th March 2015</p> <p>Guideline consultation – December 2014 Publication - July 2015</p> <p>AM briefly updated the committee on the ongoing work of SACN.</p>	
<p>5. YHEC – sunlight exposure effectiveness and cost effectiveness review</p>	<p>Rob Hodgson (RH), analyst from York Health Economics Consortium (YHEC), gave a presentation to the PHAC, outlining the findings from the effectiveness and cost effectiveness reviews.</p> <p>The PHAC were given an opportunity to ask any questions of clarification.</p> <p>Action: The YHEC team should add in the duration of effect to the evidence statements.</p>	<p>YHEC</p>
<p>6, 7. Health economic model</p>	<p>Rob Hodgson (RH), analyst from York Health Economics Consortium (YHEC), gave a presentation to the PHAC outlining the suggested economic model for this work.</p> <p>David McDaid, PHAC member, then started a discussion about the model.</p> <p>It was agreed that the following should be considered when developing the model:</p> <ul style="list-style-type: none"> • Effect size • Duration of effect • Costs and effectiveness of UK practice • Assumptions made in the previous model from skin cancer • Whether there was enough resource to add complexity to the model (a cumulative model would be more satisfactory than a linear model if resources permitted) • Scenario analyses <p>The committee were asked to consider which 3 or 4 interventions should be modelled by the YHEC team.</p> <p>Action: It was agreed that the following interventions should be considered:</p> <ul style="list-style-type: none"> • UV photos and ageing • A mass media campaign • A tailored intervention aimed at children • Some sort of school level policy <p>The committee considered which outcomes might be used in relation to the above.</p>	

	<p>Given the timescale and resource, it was agreed that the model should look at the above interventions and consider these in relation to skin cancer but not vitamin D. It was agreed that the team would ascertain but not model the QALY losses associated with osteomalacia and rickets due to Vitamin D insufficiency.</p> <p>It was agreed that the team shouldn't model anything that has already been modelled before for other guidelines.</p>	
<p>8, 9. Sunlight Exposure: communicating the benefits and risks of ultraviolet light to the general population – barriers and facilitators</p>	<p>Anne Morgan from YHEC gave a presentation to the PHAC on 'communicating the benefits and risks of Ultraviolet light to the general population – barriers and facilitators review'.</p> <p>The committee were given an opportunity to ask any questions or discuss the issues raised.</p> <p>The following was agreed: Action: The summary tables from the presentations on the effectiveness and barriers review should be tabled at the next PHAC meeting. Action: Interventions that use new media – this should be taken forward as a possible research recommendation.</p>	<p>NICE</p> <p>NICE to log</p>
<p>10, 11. Expert testimony: vitamin D and ultra violet radiation exposure</p>	<p>John Hawk presented testimony from his perspective on vitamin D and ultra violet radiation exposure.</p> <p>Lesley Rhodes then presented expert testimony on sunlight induced vitamin D synthesis.</p> <p>The expert testimony given was to help the committee to understand some of the facts about vitamin D and safe sun levels given as SACN haven't yet reported their findings.</p> <p>The committee were given an opportunity to ask any questions or discuss the issues raised.</p>	
<p>12, 13. Expert Testimony: UVR and eye health</p>	<p>John Marshall, Professor of Ophthalmology at the Institute of Ophthalmology in association with Moorfield's Eye Hospital, UCL, presented expert testimony on UVR and eye health.</p> <p>He had no Declarations of interest to declare.</p> <p>Action: John Marshall to send some prevalence statistics on this topic.</p> <p>The committee were given an opportunity to ask any questions or discuss the issues raised.</p>	<p>John Marshall</p>

<p>14, 15. Sunlight exposure: Health promotion messages</p>	<p>Clare Wohlgemuth from NICE presented an overview of the findings from an analysis undertaken by NICE of health promotion messages already published by different organisations in the UK on sunlight exposure.</p> <p>Many of the messages were consistent though there were some inconsistencies which might be addressed within this guidance.</p> <p>The committee then had a discussion about all of the evidence that had been presented throughout the day.</p>	
<p>16. Writing recommendations and considerations</p>	<p>Sue Jelley from NICE presented to the committee the do's and don'ts of drafting recommendations.</p>	
<p>17 Drafting recommendations and considerations</p>	<p>Clare Wohlgemuth provided an overview of the process of writing recommendations and considerations as outlined in the manual.</p> <p>Peter Shearn, analyst at NICE, suggested some possible outline areas for recommendations based upon the evidence presented to the committee so far. They were as follows:</p> <ul style="list-style-type: none"> • Risk communication – design features • Risk communication – different audiences (population or targeted) • Social marketing for PHE or local authority • Training and competency • Media • Content of sun exposure health promotion messages (including addressing common misconceptions) <p>Research recommendations:</p> <ul style="list-style-type: none"> • Risk factors • Complex risk <p>The committee agreed that most of these broad areas for recommendations seemed useful and evidence statements can be linked to them.</p> <p>Action: NICE team to table draft recommendations with evidence statements</p>	<p>NICE</p>
<p>18, 19. Summary by the chair and further expert testimony</p>	<p>The Chair suggested that there was consensus on the following messages:</p> <ul style="list-style-type: none"> • The need for people not to get burnt • That there isn't one message for everyone • That some exposure to sunlight is beneficial • That interventions aimed at children are likely 	

	<p>to be more effective than those for adults</p> <ul style="list-style-type: none"> • Bother under use and over-zealous use of sun-cream can be a problem • Interventions aimed at particular institutions may be useful. <p>It was noted that cost-effectiveness of these interventions had not yet been demonstrated. This would be discussed at the next meeting.</p> <p>The guideline PH32 on skin cancer to be considered by the committee at the next meeting.</p> <p>The committee discussed whether to invite further experts and co-optees to future meetings. The following was agreed:</p> <ul style="list-style-type: none"> • Action: Behaviour change experts should be invited to meetings 5&6. AM and CL to discuss the practicalities in more detail. • Action: Someone from the Northern Ireland Department of Health who was involved in the skin cancer 10 year strategy should be invited to a future meeting. 	<p>NICE team</p> <p>NICE team</p>
<p>20. Summary by the chair</p>	<p>Summary of next steps by the chair:</p> <ul style="list-style-type: none"> • The committee have agreed on the priority interventions that should now be modelled by the health economic team. • The economic model and cost effectiveness review will be considered in more detail at the next meeting. • Previous guidance on skin cancer and behaviour change will be considered by the PHAC at the next meeting. • At the next meeting, a large proportion of the time will be spent on considering outline recommendations. 	
<p>21. Close</p>	<p>The meeting closed at 4.30pm.</p>	

Next meeting: Monday 8th September

VENUE FOR NEXT MEETING: NICE London Office, 10 Spring Gardens, London SW1A 2BU