

Spondyloarthritis Committee meeting

Date: 7th & 8th September 2015

Location: Dee meeting room, NICE Manchester

Minutes: Draft

Committee members present:		
	Day 1	Day 2
Gary McVeigh (Chair) (GM)	Present for all items	Present for all items
Amanda Isdale (AI)	Present for all items	Present for all items
Nicola Goodson (NG)	Present for all items	Present for all items
Louise Warburton (LW)	Present for all items	Present for all items
Tina Hawkins (TH)	Present to the end of item 5	Present for all items
Carol McCrum (CM)	Present for all items	Present for all items
Charlotte Davis (CD)	Present from the middle of item 1 to the end	Present for all items
David Chandler (DC)	Present for all items	Present for all items
Jon Packham (JP)	Present for all items	Present for all items
Debbie Cook (DC)	Present from item 3 to the end	Present for all items

Co-opted experts present:	
Day 1 only	
Tim Orchard (TO) <i>Gastroenterologist</i>	Present until the middle of item 5.
Nicky Bassett-Burr (NB) <i>Hand Occupational Therapist</i>	Present to the end of item 4.
Debajit Sen (DS) Adolescent Rheumatologist	Present to the end of item 4.
Alastair Denniston (AD)	Present until the middle of item 5.

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Ophthalmologist	
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In attendance:		
	Day 1	Day 2
Sue Spiers <i>Associate Director</i>	Present for all	Present for all
Katherine McAllister <i>Technical Analyst</i>	Present for all	Present for all
Robby Richey <i>Technical Analyst</i>	Present for all	Present for all
Steven Ward <i>Health Economist</i>	Present for all	Present for all
Margaret Derry <i>Project Manager</i>	Present for all	Present for all
Gabriel Rogers Technical Advisor (Health economics)	Present for all	Present for all
Hugh McGuire <i>Technical Advisor</i>	Present for all	Present for all
Shelly Patel <i>Medicines Advice – Senior Advisor</i>	Present for items 2 to the start of 6	Present for all
Jemma Deane <i>Information Specialist</i>	Present from the end of item 3 to the end	Present for all
Observing:		
Rachel Houten <i>Health Economist</i>	Present for all	Present for all
Jill Peacock Co-ordinator	Present to the end of item 4	N/A
Rosa Domingues Technical Analyst (Work placement)	Present for all	Present for all

Apologies:	
Louise Shires	Guideline Commissioning Manager

Notes

Day 1

1. Welcome, minutes of the last meeting, declarations of interest and objectives for the meeting

The Chair welcomed the Committee members and attendees to the eighth guideline development group meeting. He provided a brief overview and objectives of the day highlighting the information that would be discussed.

Apologies were noted, as recorded above and minutes of the last meeting were agreed as an accurate record. The Chair advised that due to ongoing difficulties in arranging locum cover, Issak Bhojani would be unable to attend the meeting and is stepping down from his position on committee.

All Committee members were asked to share any new conflicts of interest which have not previously been declared. Given there were new co-opted attendees at the meeting, the chair also asked all committee members to introduce themselves. There were no new conflicts of interest declared, with the following exceptions:

Name	Declaration	Action
Nicky Bassett-Burr	Member of the British Association of Hand Therapists Clinical Evidence Committee. No remuneration is received for this	Declare and participate
Louise Warburton	<ol style="list-style-type: none"> 1. Talk about diagnosing suspected inflammatory arthritis and gout at 'Best Practice 2015'. Honorarium has been declined 2. Speaking at the RCGP 'One Day essential' series. 3. Speaking at Mediconf event. Fee will either be given to charity or not taken 	Declare and participate
Tina Hawkins	<ol style="list-style-type: none"> 1. Writing an article for the Pharmaceutical journal on biosimilars. A small honorary fee 	Declare and participate for both

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	<p>of £150 may be attached to this. This will be paid directly into the pharmacy department study fund.</p> <p>2. Presenting at the Yorkshire Rheumatology Meeting at the end of this month on issues regarding pain management. There is no remuneration</p>	
Debajit Sen	Co-Director of Arthritis Research UK	Declare and participate
Nicky Goodson	Speaking engagement at the upcoming BRITSpA meeting. Non remunerated.	Declare and participate
Tim Orchard	<p>1. Chaired a meeting for Abbvie covering the use of biologics in ulcerative colitis. This was remunerated.</p> <p>2. Sat on an advisory board for Napp, the makers of biosimilar infliximab.</p>	Declare and answer any questions but not to be involved in drafting recommendations for RQ's 24 to 26
Jon Packham	A member of the steering committee for Brit-PACT and speaking at their inaugural meeting. No remuneration will be received	Declare and participate

MD noted the following:

- Thanked the GDG for their responses to email queries and urged the group to get in contact if any of the requests were unclear or further information is needed.
- Encouraged GDG members to continue sending details to the team of any newly published studies they become aware of. These will be considered by the team either during the initial evidence search for a question, or, during re-run searches for those questions that have already been presented.

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- Acknowledged the suggestion to create an email group for the GDG to communicate but advised that this could not be facilitated by NICE because of the need for all decisions to be open and transparent.

2. Recap of the guideline so far

KM gave an update on the work completed to date including:

- number of review questions completed
- recommendations made
- remaining review questions to address.

She went on to discuss the chapter introductions for the guideline and asked committee members to volunteer for topic areas.

3. Review question 27 – information on treatment, long term complications and self-management

KM went through the protocol for the review and highlighted the results of the ‘sifting’ process. In total 4 studies were included, each of which was of a low or very low quality.

The committee discussed the findings from the review and, given the low quality of the evidence, went on to discuss their experiences of information needs. It was highlighted that of paramount importance is the credibility of the information sources - there is a lot of variation in what is available. It was also noted that, because of very different concerns, the information needs of younger and older people is not the same. For younger people it tends to be more immediate concerns about how their day to day life will be impacted. It is also a complex disease to explain which adds to the difficulties.

The group went onto discuss the issues in more detail before considering and drafting recommendations.

4. RQ28 – Effectiveness of information and education in managing flare episodes

KM presented the findings of the evidence review for Q28. 8 studies were reviewed but all were excluded because they did not meet the requirements of the protocol.

Given the lack of evidence the group went onto discuss their clinical experiences of managing flare. It was noted how difficult it is to define a flare because they are so different for each person. Early recognition is important.

The group did not make a recommendation but went onto make a number of research recommendations.

5. RQ 24, 25 & 26 – Effectiveness of DMARDs for enteropathic arthritis, reactive arthritis and non-radiographic ankylosing spondylitis

KM presented the findings of the evidence review for Q's 24-26
55 studies were reviewed, with 54 excluded because they did not meet the requirements of the protocol. KM summarised the findings from the included RCT study.

Given the low number of participants involved in the RCT and overall lack of evidence the group went onto discuss their clinical experiences and considered the option of extrapolating the recommendations from the NICE Technology Appraisal on the use of adalimumab in ankylosing spondylitis. The group decided not to make a recommendation and went onto make a research recommendation.

6. RQ 29 – Access to specialist care in the management of flare episodes

The group were ahead of time and went onto discuss items originally scheduled for the second day.

RR presented the findings of the evidence review for Q29, for which no evidence was identified.

The group discussed their experiences explaining that there is a huge variation in the way cases are picked up within primary care. Delays to diagnosis are not coming down and it was queried whether education information would be valuable. The need for primary or specialist care is very much dependent on individual needs.

The group went onto make recommendations for managing flare.

7. Any other business

There were no additional matters arising. The Chair briefly summarised the discussions from the meeting before closing day 1.

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Day 2

1. Recap of day 1 and objectives
The Chair went through the revised agenda for day 2, giving a brief overview of what would be discussed.
2. LETR tables
KM presented the linking evidence to recommendations (LETR) table for Q's 27, 28 and 24-26 to the committee, who agreed it was an accurate summary of the discussion after minor amendments.
3. Review question 21 – Pharmacological interventions for the management of peripheral spondyloarthritis
RR went through the protocol for the review and highlighted the results of the 'sifting' process. In total 5 studies were included, each of which was of a low quality. The committee discussed the included studies and it was agreed that further studies should be excluded because the dosing used was not based on current practice. The group suggested looking at including the TICOPA study which will publish soon. It was noted that this could be included when doing the re-runs but only if it is published. The group went onto discuss the issues in more detail before considering and drafting recommendations.
4. LETR tables continued
KM presented the linking evidence to recommendations (LETR) table for Q's 29 and 21 to the committee, who agreed it was an accurate summary of the discussion after minor amendments.
5. RQ 20 update
It was queried whether the group wanted to include further outcomes in the Network Meta Analysis (NMA) already completed. It was agreed to include imaging as another outcome. The results will be brought back at a future meeting.
6. Any other business
GM noted that this was MD's last meeting and thanked her for her work and support.

Date of next meeting: 27th October 2015

Location of next meeting: NICE offices, Manchester

