

4.0.3 DOC Cmte minutes

Abdominal Aortic Aneurysm Guideline Committee – development

Date: 07/06/2016

Location: NICE Offices, London

Minutes: Final



Committee members present:	
Andrew Bradbury (AB) – Chair	Present for all items
Chris Hammond (CH)	Present for all items
Karen Jellett (KJ)	Present for all items
Gillian Kitching (GK)	Present for all items
Jacqueline Lindridge (JL)	Present for all items
Adam Pichel (AP)	Present for all items
Tamsin Ribbons (TR)	Present for all items
Matthew Slater (MS)	Present for all items
Alan Huw Smith (AHS)	Present for all items
Sammer Tang (ST)	Present for all items
Matt Thompson (MT)	Present for all items

In attendance:		
Lucy Hoppe (LH)	ICG – Technical Analyst	Present for all items
Rachel Houten (RH)	ICG – Health Economist	Present for all items
Sue Spiers (SS)	ICG – Associate Director	Present for all items
Joshua Pink (JP)	ICG – Senior Technical Advisor	Present for all items
Sarah Glover (SG)	NICE – Information Specialist	Present for all items
Susan Ellerby (SE)	ICG – Clinical Advisor	Present for all items

Apologies:
Jugdeep Dhesi – Committee Member
Karen Jellett – Committee Member
Ivan Bennett– Committee Member
Claire Martin – Committee Member
Noel Wilson– Committee Member
Ben Doak – NICE Guideline Commissioning Manager
Lisa Stone – MPP Medicines Advisor

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1. Welcome, apologies, minutes of the last meeting, declarations of interest

Welcome –

The Chair welcomed the Committee members and attendees to the sixth meeting of the abdominal aortic aneurysm guideline committee.

Apologies –

Apologies for the meeting were received as detailed above.

Objectives –

The Chair outlined the main objectives of the meeting, which included:

- Discussion and agreement of review protocols
- Presentation of evidence reviews for review questions 13 and 24

Minutes of the last meeting –

The minutes were agreed as an accurate record of the previous meeting without any amendments.

Declarations of interest –

The Declarations of Interest (DOI) register was made available to the Chair. No new Declarations of Interest were made at the meeting.

The Chair reviewed the committee's DOI register and declared that in relation to previous declarations recorded in the DOI register no committee members would be excluded from the meeting.

2. New Timeline Update

SS updated the committee on the new meeting dates which have been scheduled to reflect the extended development time allocated to the guideline.

To facilitate attendance it was agreed that the current scheduling for review questions during development would be shared with committee members.

3. Recording committee justifications for recommendations

JP informed the committee that to support NICE's digital strategy a new template has been introduced to capture the committee's discussion and justification for any recommendations made.

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This revised template will be utilised throughout development of the AAA guideline.

4. Review Protocols

The committee briefly reviewed previously agreed review protocols and finalised the following protocols:

RQ26 - Is goal directed therapy effective during the surgical repair of a ruptured abdominal aortic aneurysm?

RQ27 - How frequently should people be monitored for postoperative complications, further aneurysm expansion and aneurysm rupture after EVAR or open repair of an abdominal aortic aneurysm?

RQ28 – When monitoring people after they have had EVAR or open repair of an abdominal aortic aneurysm which imaging techniques are most useful for detecting postoperative complications further aneurysm expansion and aneurysm rupture?

RQ29 – Is tailored surveillance more effective than generalised surveillance n monitoring for postoperative complications, further aneurysm expansion and aneurysm rupture after EVAR or open repair of an abdominal aortic aneurysm?

RQ30 - What post-operative interventions are effective in reducing the risk of complications after surgical repair of an abdominal aortic aneurysm, as well as optimising postoperative outcomes and survival?

RQ31 - How should complications be managed if they do arise?

- a) Endoleak (type 2 in particular)
 - b) Expanding aneurysm sac
 - c) Stent fractures and occlusions
 - d) Graft infection
 - e) Graft migration
 - f) Aortic enteric fistula
 - g) Aortic rupture
 - h) Ischaemic complications (limb, visceral and renal)
- Open, endovascular or percutaneous

5. Call for Evidence

LH confirmed with the committee the review questions where it would be appropriate to seek additional evidence via expert witnesses to support discussion and the drafting of recommendations. The committee discussed and agreed the evidence it would wish to seek from expert witnesses.

6 and 7. Review Questions

RQ13 What is the most effective approach to anaesthesia and/or analgesia in improving surgical outcomes in people undergoing i) EVAR and ii) open repair of an unruptured abdominal aortic aneurysm?

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RQ24 What is the most effective approach to anaesthesia and/or analgesia in improving surgical outcomes in people undergoing i) EVAR and ii) open repair of a ruptured abdominal aortic aneurysm?

LH reminded the committee of the protocol for the above review question prior to presenting the included evidence.

The committee considered and discussed the evidence presented in the context of their clinical experience and expertise and made recommendations in relation to this review question.

8. Any other business

Date of next meeting: Tuesday 26 July 2016

Location of next meeting: NICE offices, Manchester