

Minutes of the RA Clinical Practice Guidelines Meeting, 21st April 2009

1. **Apologies:** Drs E. Sharples, C. Jones, C. Geddes, G. Woodrow, R. Baker, S. Kanagasundaran, R. Fluck, A. Mikhail, M. Kumwenda

Present: Drs S. Davies, M. Taal, M. MacGregor, D. Goldsmith, S. Steddon, N. Duncan, K. Farrington, G. Warwick, R. Mactier (chairman), M Wilkie

2. **Recognition of the contribution of the late Dr. Mike Cassidy.** The committee remembers with fondness Mike's gentle personality and great fortitude during his long illness. He had prepared both the cardiovascular and bone metabolism sections of the complications of renal failure module in 2007 and was keen to remain involved with the committee's work despite ongoing ill health. His contributions to the guidelines committee will be hard to replace.
3. **Matters Arising:** already covered in the agenda
4. **New layout of the guidelines pages on the website:** This has been expanded to 4 pages to provide separate pages for
 - a) current RA guideline modules and drafts
 - b) plans for new RA guidelines and the dates of updates of existing RA guidelines with details of the co-authors of each module
 - c) other guidelines endorsed by or produced in collaboration with the RA
 - d) old guidelines which are out of date
5. **Adoption of the Modified GRADE system in all RA guidelines from 2009**

This grading system combines an assessment of the strength of each recommendation (1 or 2) with the level of evidence in support of the recommendation (A, B, C or D). The use of this grading system in all future RA guidelines was approved at the last Executive meeting in January 2009 and the other major international nephrology guideline groups (KDIGO, ERBP, CARI) are also planning to use the Modified GRADE system. The first draft of the guideline modules on blood borne viruses and peritoneal access have used the modified GRADE system and have been on the website for feedback and comments for more than 1 month. These modules and the KDIGO guidelines in preparation on renal transplantation and bone metabolism are the first nephrology guidelines to use the Modified GRADE system.
6. **New guidelines:**
 - a) BBV module. The first draft has completed 1 month period of feedback on the RA website. Stakeholders who have provided feedback to the co-authors include the Association of Renal Technologists and virologists. Dr Geddes has informed the chairman that the section on Hep B immune status is being revised to take account of feedback. Final draft is now in preparation.

- b) Peritoneal access module. The first draft has completed 1 month period of feedback on the RA website. This module was co-written by Badi Shresha FRCS to reflect the surgical viewpoint of peritoneal access creation. Dr Wilkie confirmed that feedback was received asking how many catheters need to be placed each year to maintain competency in the procedure but this is going to be addressed by auditing outcomes rather than stating a number of procedures that should be performed to acquire and maintain clinical competency in catheter insertion technique. Final draft is now in preparation.
- c) Planning, Initiating and Withdrawal of RRT. The first draft of this module has been circulated to the committee prior to the meeting and will be put on the RA website for feedback. Nominees of key stakeholder groups (e.g. palliative care, BRS (by contacting Jane McDonald), Kidney Alliance (by contacting Fiona Lord) and National Cancer) will be invited by the co-authors to send comments to them within 1 month. Dr Warwick will remove the section on hepatitis B vaccination from the draft as this topic is already covered in the BBV module and will replace it with a cross reference to the BBV module.
- d) Medical management of the transplant recipient. Dr Baker and Prof Jardine will have the first draft completed at the end of May 2009. This will be harmonised with the KDIGO guideline in preparation on renal transplantation and both co-authors have completed feedback on the second draft of KDIGO renal transplantation guideline.
- e) Vascular access for HD. Dr Kumwenda will link with Dr Fluck to produce the first draft before the end of June. The vascular access section has been removed from the draft of the 2009 update on haemodialysis

7. Updates of existing modules in 2009

- a) CKD
Drs Taal and MacGregor will produce an update module of the CKD module although it was recognised that this should harmonise but not merely duplicate the recommendations within either the recent NICE or SIGN CKD guidance.
- b) Cardiovascular Disease
Dr Goldsmith indicated that Dr S Holt, Brighton, would be a good replacement for Dr Cassidy to help with the preparation of the update of this module.
- c) Anaemia
Dr Mikhail is already preparing a draft of the update of this module ahead of the end of year deadline.
- d) Nutrition
- e) Haemodialysis
Dr Mactier informed the committee that a draft is well underway and this module is being edited on the website to test if this is a practical way of updating existing modules. Dr MacGregor indicated that new website

software should enable the co-authors to track changes when editing future modules on the website but this is not available as yet. The sections on vascular access and planning and initiation of RRT have been removed as these topics are now covered in separate modules. A separate section for home HD is planned in the update.

f) Peritoneal Dialysis

Dr Davies will be linking with Dr. Woodrow to update this module which will include a new section on EPS

8. Updates of existing modules in 2010

- a) Bone metabolism (to be harmonised with KDIGO mineral metabolism guideline in preparation 2009)
- b) AKI (to be harmonised with KDIGO AKI guideline in preparation 2009-2010)

9. Harmonisation with global guidelines from KDIGO

The BBV guideline has referenced the KDIGO guideline on hepatitis C whenever appropriate to UK clinical practice. The final draft of the peritoneal access module is being harmonised with the pending guideline on peritoneal access from the ISPD. Dr Wilkie is a co-author of both guidelines.

10. AOCB

NHS Evidence – Dr. Mactier has already written to NICE on behalf of CAB commenting on the criteria that are to be used in the accreditation of guidelines produced by specialist societies or associations. The RA CPG chairman on behalf of the committee anticipates applying for accreditation in this scheme which is being developed to improve the quality of guidance produced by specialised societies in the UK. The six domains (with a total of 24 criteria) for accreditation include involvement of patients in producing guidelines and it was agreed that co-authors should link with representatives of national patient associations and patients from their local units when preparing the drafts of their modules. Dr Davies proposed that a patient friendly version of the key recommendations should be prepared for each guideline for which there was general agreement. Dr Mactier agreed to circulate a copy of the feedback from NHS Evidence to the committee when this is available.

Secretarial work to produce standard format of modules – The Treasurer has agreed that Emma Farrell, Prof N Turner’s secretary, will be reimbursed by the RA for the time she needs to edit the modules into a standard format before they go on the website.

Date of next meeting – The next formal meeting is planned during the combined RA/BRS meeting in Manchester in May 2010.