MINUTES

CPIC CONFERENCE CALL

ST. JUDE CHILDREN'S RESEARCH HOSPITAL

DATE: May 5, 2011

PRESENT: Uli Broeckel, Tom Callaghan, Michelle Carrillo, Kristine Crews, Mark Dunnenberger, Andrea Gaedigk, James Hoffman, Lucia Hindorff, Julie Johnson, Teri Klein, Deanna Kroetz, Rochelle Long, Michael Martin, Mary Relling, Kathryn Teng, Rachel Tyndale, Andy Christensen, Donald Baker

| TOPIC | DISCUSSION/ACTION | FOLLOW-UP |
| --- | --- | --- |
| Posting of gene/drug pair list  Grading systems in CPIC guidelines  Discussion of IOM paper on guidelines  TPP project update  Guideline updates | Reviewed list of prioritized gene/drug pairs. Discussed that this list is currently posted on private CPIC site, but could be posted on public site, with public comment encouraged.  Grades for Quality of evidence uses A, B, C instead of High, Moderate, and Weak in CPT review (2011). Grading systems for CPIC guidelines should use words (not letters or numbers) and are in guideline templates (on CPIC site) and in published TPMT guideline (supplement).  Systems are:  Quality of evidence linking drug-related phenotypes to specific genetic variations:  High: Evidence includes consistent results from well-designed, well-conducted studies.  Moderate: Evidence is sufficient to determine effects, but the strength of the evidence is limited by the number, quality, or consistency of the individual studies; generalizability to routine practice; or indirect nature of the evidence.  Weak: Evidence is insufficient to assess the effects on health outcomes because of limited number or power of studies, important flaws in their design or conduct, gaps in the chain of evidence, or lack of information.  Strength of the recommendation:  strong recommendation for the statement  moderate recommendation for the statement  optional recommendation for the statement  James Hoffman led a discussion of how CPIC guidelines fit into IOM recommendations on guidelines. There was discussion that some would consider CPIC authors as being conflicted, because authors are actively publishing and funded in the areas the guidelines address. Most agreed that a policy of allowing funded experts to be authors, but having them declare their conflicts and specify grants related to the area – as has been done for TPMT and warfarin guidelines.  Posting guidelines for public comment and review is another policy that could be addressed more fully. It would be good to engage the community in the guideline development more. ASCPT may be a group to target?  Need to develop an SOP for writing the guidelines. SOP will be important -- as guidelines become more complicated will be bringing in people who are not familiar with the process used to develop templates. Include minimum time period for review in SOP (will be 2 years).  Translational Pharmacogenetics Project presented to PGRN’s ESP; favorable feedback, and also many suggestions for expansion/improvements. Initially will go in with 6 groups participating, but potentially bring in more sites/social science research in the future  Lots of support for CPIC and our role in writing guidelines.  Teri reminded again of the need for additional authors for guidelines  Warfarin close to being done – Julie Johnson indicated that she plans to submit next week  Abacavir/HLA—Dr. Kroetz said work is progressing; hopes to send out first draft before next call.  Carbamazepine/HLA—Dr. Leckband said draft should be ready for next CPIC call; there are challenges describing the “non-risk” alleles for HLA variants. Would be helpful if all of the HLA guidelines (abacavir, carbamazepine, phenytoin, allopurinol) could refer to some common background (probably in the Supplement) to describe the HLA nomenclature.  Need volunteers for other high priority gene/drug pairs  HLA – phenytoin  HLA – allopurinol  CYP2D6 – antidepressants  G6PD - rasburicase, septra  UGT1A – irinotecan  CPT status  Clopidogrel – August  Warfarin – October  Codeine - February 2012 | PharmGKB will post list of gene/drug pairs to CPIC site (and perhaps to replace info on Clinical Pgx tab), with a statement to encourage comments on gene/drug pairs by public.  Teri is updating CPIC public page on PharmGKB –   * + will include grading system info on the CPIC page;   + can also include the template on the CPIC page   Also, authors of CPIC guidelines should always include grading scale in the supplement.  Mary and Teri will change the guideline templates to encourage declaration of all possible conflicts (including grant funding).  We will further discuss options for engaging ASCPT and others.  PharmGKB and St. Jude lead draft of SOP; goal to have a final SOP document by end of year.  None needed at this point.  Please let Teri know if you hear of interested co-authors.  Susan and Teri and Deanna will set up a call with Munir Pirmohamed (and any others interested in HLA guidelines) to discuss HLA background format, content. |