



**Personalised
Medicine**
All-Party Parliamentary Group

MINUTES

Chair:

Helen Whately, MP

Co-Chair:

**The Rt Hon. the Lord
Warner**

Vice Chairs:

**The Rt Hon. the Lord
Philip Hunt
Lord Narendra Patel
Chi Onwurah, MP
Sir David Amess, MP**

Treasurer:

Lord George Willis

Secretariat

**PHG Foundation
2 Worts Causeway
Cambridge
CB1 8RN**

Partners

**Sanger Institute
The BMJ
NHS**

All-Party Parliamentary Group on Personalised Medicine Inaugural Meeting

Evidence session: personalised medicine in cardiovascular disease

Venue and time

Location: Millbank House

Date: Tuesday 12 July 2017

Time: 08:30 to 10:15

Speakers

Professor Perry Elliot – MBBS MD FRCP FESC FACC
Chair of Cardiovascular Medicine, University College London
Consultant Cardiologist, Barts Heart Centre
President of Cardiomyopathy UK

Professor Jeremy Pearson – PhD HonFRCP FMedSci
Associate Medical Director, British Heart Foundation
Emeritus Professor of Vascular Biology, Kings College London

Attendees

Helen Whately MP
Chair, APPG on Personalised Medicine

Lord Patel
Vice Chair, APPG on Personalised Medicine

Jo Churchill MP

Rebecca Pow MP

Leo Doherty MP

Baroness Tanni Grey-Thompson

Minutes

Jo Churchill welcomed everyone to the meeting and thanked them for their attendance. She also explained that she would be stepping down and Helen Whately MP would become the new Chair of the Group.

Helen Whately thanked Jo and said she was pleased to take over as Chair, believing that efforts to provide better and more personalised care for patients in a sustainable manner were extremely important for the NHS,

Professor Jeremy Pearson noted that the British Heart Foundation funds over 50% of all cardiovascular disease (CVD) research in the UK, and the organisation's high levels of interest in the potential for technological developments to support precision and personalised medicine.

Professor Perry Elliot gave an overview of the current state of cardiovascular disease and personalised medicine, focusing particularly on opportunities in inherited cardiac conditions (ICCs). He introduced the notion of guarding against overhype of new technologies and developments in science. He also highlighted the need to better understand 'heart failure' and actually investigate its causes. Failure to properly diagnose the underlying causes of heart failure, he said, meant missing key patient sub-groups with inherited disease (and hence potential family members also at risk) and forms of acquired disease for which specific therapeutic options are



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available. For example, he said, some forms of inflammatory myocarditis can go unrecognised in which case the opportunity for effective treatment with immunosuppressive or anti-infective agents is lost.

The conversation covered a wide range of issues related to personalised medicine and cardiovascular disease, including:

- Changing demographics and the resulting pressures, particularly in cardiovascular disease, on the health service
- The challenge of ensuring health professionals receive adequate training in new areas of science, including cardiovascular disease and genomics
- NHS staff shortages and the related need to make the health service more efficient
- How to better collect and use patient data in cardiovascular disease and inherited disease in particular
- Whilst there have been great developments in science and technology relevant to CVD prevention and care, health professionals and the public must be adequately educated as to their probable impact; hype (such as holding up genomics and/or personalised medicine as liable to provide answers to all clinical issues in the near future) was ultimately misleading and unhelpful
- Understanding the importance of appropriately harnessing health-linked 'big data' to understand CVD and aid future prevention and care was noted to be a critical issue of public trust and understanding
- The dangers posed by the impression given that genomic and personalised medicine in the NHS was all well in hand via the 100,000 Genomes Project, whereas in fact issues of NHS capacity and equitable access for patients across the country remain
- The need for the Royal College of Physicians and other medical colleges to engage with appropriate inclusion of genomics and personalised medicine within standard and specialised training curricula

Further investigation and consideration of some of these issues by the Group was considered appropriate.

Election of Officers

The APPG on Personalised Medicine named a new Chair and confirmed that all other current Officers would remain in their roles:

- **Chair:** Helen Whately MP
- **Co-chair:** The Rt. Hon the Lord Warner
- **Vice-chairs:** Sir David Amess MP, The Rt Hon. the Lord Philip Hunt, Chi Onwurah MP, Lord Patel
- **Treasurer:** Lord Willis

It was also confirmed that The PHG Foundation would continue as Group Secretariat.

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