#### NATIONAL INSTITUTE FOR HEALTH AND CARE EXCELLENCE

#### **NICE** guidelines

# Equality and health inequalities assessment (EHIA) template

## Acute kidney injury: prevention, detection and management (NICE guideline NG148)

The considerations and potential impact on equality and health inequalities have been considered throughout the guidance development, maintenance and update process according to the principles of the NICE equality policy and those outlined in <a href="Developing NICE guidelines: the manual">Developing NICE guidelines: the manual</a>.

This EHIA relates to:

Assessing risk factors for acute kidney injury in adults having iodine-based contrast media

### Appendix A: equality and health inequalities assessment (EHIA)

2023 exceptional surveillance of acute kidney injury: prevention, detection and management (NICE guideline NG148)

#### **STAGE 2. Informing the scope**

(to be completed by the Developer, and submitted with the draft scope for consultation, if this is applicable)

Acute kidney injury: prevention, detection and management NG148

Date of completion: 30.04.24

Focus of guideline or update: the assessment of risk factors for acute kidney injury in adults having iodine-based contrast media

2.1 What approaches have been used to identify potential equality and health inequalities issues during the check for an update or during development of the draft scope?

This document has been compiled using information taken from EHIA 2023 exceptional surveillance of acute kidney injury: prevention, detection and management (NICE guideline NG148).

https://www.nice.org.uk/guidance/ng148/documents/eguality-and-health-inegualities

No new equality and health inequalities issues were identified in the 2023 exceptional surveillance of acute kidney injury review.

2.2 What potential equality and health inequalities issues have been identified during the check for an update or during development of the draft scope?

The EHIA 2023 exceptional surveillance of acute kidney injury: prevention, detection and management (NICE guideline NG148) highlighted previous equality impact assessments conducted for this guideline including CG169 which identified older people as a subgroup that may need particular consideration. The recommendations on risks of contrast media, made no specific considerations for older people – although age 75 years or over was noted as risk factor for increased risk of acute kidney injury.

A 2019 update of NG148 (around preventing contrast-induced AKI) stated that the committee noted that eGFR thresholds vary in some ethnic backgrounds. Since this is widely known, the committee agreed that this is part of routine clinical practice.

NICE diagnostics guidance DG37 point-of-care creatinine devices to assess kidney function before CT imaging with intravenous contrast, noted that kidney disease occurs more frequently in males, people over the age of 60, and those of African- Caribbean, African or South-Asian family origin. It noted that the eGFR equation (which the creatinine result is used in) can be adjusted to reflect the race, age and sex of the patient. Recommendation 1.2 states: Take age, sex and ethnicity into account when assessing risk of acute kidney injury using a questionnaire-based tool. The committee noted that the availability of POC devices could have a greater benefit in groups at higher risk of kidney disease than others (including men, people over the age of 60, and those of African-Caribbean, African or South-Asian family origin).

No new equality and health inequalities issues were identified in the 2023 exceptional surveillance of acute kidney injury review.

During scoping for the update, the committee highlighted the current debate about adjusting the eGFR equation to reflect ethnicity. The CKD-epi eGFR equation was introduced in 2009 that incorporated adjustments for age, gender and ethnicity. However, the evidence for ethnicity adjustment has been increasingly questioned. In 2021 the US updated the CKD-epi eGFR equation to estimate kidney function without a race variable. However, this has not been validated in a UK population. In the 2021 update of the NICE chronic kidney disease (CKD) guideline the recommendation to adjust for ethnicity was removed, because the evidence demonstrated adjusting for ethnicity when calculating eGFR may not be valid or accurate. A research recommendation was made on appropriate eGFR equations for black, Asian and minority ethnic groups in the UK.

Older people with reduced kidney function may not have equal access to medical procedures using contrast media such as coronary angiography, because of the perceived increased risk from contrast media.

2.3	How can the identified equality and health inequalities issues be further explored and considered at this stage of the development process?
Membership of the committee will represent a range of perspectives and expertise so that equalities considerations are considered in the development of the update.  Lay members will be recruited onto the committee who will provide lived experience of the condition.	
beer the s	studies included in reviews will be checked for which CKD-epi eGFR equation has a used and if they have adjusted for race or not. The committee will take into account subgroups identified in 2.2 when developing the review protocol and whether immendations are required for specific subpopulations.
2.4	Do you have representation from stakeholder groups that can help to explore equality and health inequalities issues during the consultation process including groups who are known to be affected by these issues? If not, what plans are in place to address gaps in the stakeholder list?
Not applicable, no consultation is planned.	
2.5	How will the views and experiences of those affected by equality and health inequalities issues be meaningfully included in the guideline development process going forward?

We will recruit lay members who will contribute to the final scope of the guideline update and consider equality and health inequalities They will also be involved in committee discussions about the evidence and decisions about recommendations. They will also be asked to discuss how the suggested recommendations fit with their personal experiences.

Registered stakeholder patient organisations and charities representing people who experience health inequalities will have opportunity to comment during the consultation of the update

2.6 If applicable, what questions will you ask at the draft scope stakeholder consultation about the guideline/update and potential impact on equality and health inequalities?

Not applicable. No consultation is planned.

2.7 Has it been proposed to exclude any population groups from the scope? If yes, how do these exclusions relate to any equality and health inequalities issues identified?

Children and young people under 18 years of age are excluded from the scope of this update. None of the groups identified in this document are excluded from the scope

Completed by developer: Gill Ritchie

Date: 08.02.24

Approved by committee chair: C.Jones

Date: 24.04.24

Approved by NICE quality assurance lead: Rupert Franklin

Date: 30.04.24