# NATIONAL INSTITUTE FOR HEALTH AND CARE EXCELLENCE

#### INTERVENTIONAL PROCEDURES PROGRAMME

# **Equality impact assessment**

# IPG764 Endoscopic ultrasound-guided gallbladder drainage for acute cholecystitis when surgery is not an option

The impact on equality has been assessed during guidance development according to the principles of the NICE Equality scheme.

#### **Briefing**

1. Have any potential equality issues been identified during the briefing process (development of the brief or discussion at the committee meeting), and, if so, what are they?

Age: Cholecystitis is more common in people aged 60 and older

Sex: Cholecystitis is more common in females than in males.

Ethnicity: Native American populations have a high prevalence of gallstones. African and Asian populations have a relatively low prevalence.

Disability: Patients with cholecystitis may meet the criteria for disability in the Equality Act 2010 if their symptoms have a substantial adverse effect on day-to-day activities for longer than 12 months or are likely to do so. Some people with acute cholecystitis have an underlying malignancy and will be covered by the disability provision of the Equality Act 2010 from the point of cancer diagnosis.

2. What is the preliminary view as to what extent these potential equality issues need addressing by the committee? (If there are exclusions listed in the brief (for example, populations, treatments or settings), are these justified?)

	e were not thought to have an impact on the assessment of the edure. No exclusions were applied.
3.	Has any change to the brief (such as additional issues raised during the committee meeting) been agreed to highlight potential equality issues?
No	
4.	Have any additional stakeholders related to potential equality issues been identified during the committee meeting, and, if so, have changes to the stakeholder list been made?'
No	
Consu	ultation
1.	Have the potential equality issues identified during the briefing process been addressed by the committee, and, if so, how?
range	e evidence presented to the committee, the mean or median age ed from 63 to 88 years. There was a slightly higher proportion of s than females in most of the studies.
The e	evidence included some people with an underlying malignancy.
2.	Have any other potential equality issues been raised in the overview, specialist adviser questionnaires or patient commentary, and, if so, how has the committee addressed these?
No	

3.	Have any other potential equality issues been identified by the committee, and, if so, how has the committee addressed these?
No	
4.	Do the preliminary recommendations make it more difficult in practice for a specific group to access a technology or intervention compared with other groups? If so, what are the barriers to, or difficulties with, access for the specific group?
No	
5.	Is there potential for the preliminary recommendations to have an adverse impact on people with disabilities because of something that is a consequence of the disability?
Not a	pplicable
6.	Are there any recommendations or explanations that the committee could make to remove or alleviate barriers to, or difficulties with, access identified in questions 4 or 5, or otherwise fulfil NICE's obligation to promote equality?
Not a	pplicable
7.	Have the committee's considerations of equality issues been described in the consultation document, and, if so, where?
No	

# **Amy Crossley**

## **Health Technology Assessment Adviser**

**Date:** 18/04/2023

# Final interventional procedures document

	•
1.	Have any additional potential equality issues been raised during the consultation, and, if so, how has the committee addressed these?
No	
2.	If the recommendations have changed after consultation, are there any recommendations that make it more difficult in practice for a specific group to access a technology or intervention compared with other groups? If so, what are the barriers to, or difficulties with, access for the specific group?
Not a	pplicable
3.	If the recommendations have changed after consultation, is there potential for the preliminary recommendations to have an adverse impact on people with disabilities because of something that is a consequence of the disability?
Not a	pplicable
4.	If the recommendations have changed after consultation, are there any recommendations or explanations that the committee could make to remove or alleviate barriers to, or difficulties with, access identified in questions 2 and 3, or otherwise fulfil NICE's obligations to promote equality?
Not a	pplicable
5.	Have the committee's considerations of equality issues been described in the final interventional procedures document, and, if so,

where?

No
----

## Anastasia Chalkidou

**Associate Director** 

**Date:** 15/05/2023