

# NATIONAL INSTITUTE FOR HEALTH AND CARE EXCELLENCE

## HEALTH TECHNOLOGY APPRAISAL PROGRAMME

### Equality impact assessment – Guidance development

#### STA Sotatercept for treating pulmonary arterial hypertension [ID6163]

The impact on equality has been assessed during this appraisal according to the principles of the NICE equality scheme.

#### Consultation

1. Have the potential equality issues identified during the scoping process been addressed by the committee, and, if so, how?

During the scoping stage, it was noted that some people may have difficulties attending the pulmonary hypertension specialist centres where treatment with sotatercept is initiated.

Sotatercept is administered by a pre-filled injection that can be used at home, but some people, such as those with disabilities may need help to administer it, e.g., from a specialist nurse. Also, some people who may not have been able to have IV treatment previously, may now be able to access treatment because sotatercept is self-administered at home.

Older people and people who are menstruating may be considered less for sotatercept because of an increased risk of bleeding and associated complications.

The committee noted that issues relating to differences in prevalence or incidence of a condition, or access to care, are not issues that can be addressed by a NICE technology appraisal recommendation.

2. Have any other potential equality issues been raised in the submissions, expert statements or academic report, and, if so, how has the committee addressed these?

The clinical expert highlighted that the implementation of sotatercept would require attendance at 5 extra clinic appointments and travel to 1 of 7 specialist centres during the first 3 months of treatment. Therefore, during this time, access to sotatercept may be affected by symptom burden, financial burden, mobility and/or time commitments. This may disproportionately impact people with disabilities, people from certain socioeconomic background and people that live far away from specialist centres.

The committee noted that issues relating to differences in prevalence or incidence of a condition, or access to care, are not issues that can be addressed by a NICE technology appraisal recommendation.

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 the technology 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?

No.

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 obligations to promote equality?
No.

7.	Have the committee's considerations of equality issues been described in the draft guidance, and, if so, where?
Yes, please see section 3.19.	

**Approved by Associate Director (name):** ...Richard Diaz.....

**Date:** 19 August 2025