

NATIONAL INSTITUTE FOR HEALTH AND CARE EXCELLENCE

HEALTH TECHNOLOGY APPRAISAL PROGRAMME

Equality impact assessment – Guidance development

STA Dupilumab for maintenance treatment of uncontrolled chronic obstructive pulmonary disease

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

Consultation

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| 1. Have the potential equality issues identified during the scoping process been addressed by the committee, and, if so, how? |
| <p>During scoping, it was noted that:</p> <ul style="list-style-type: none">• COPD is more common in men and people over 40• there are disparities in care for patients with COPD linked to ethnicity, age and socioeconomic status• COPD disproportionately affects people from lower socioeconomic backgrounds• there is unequal access to diagnostic tests and maintenance treatments and younger people are frequently underdiagnosed which could result in delays for certain populations accessing dupilumab• COPD patients are less mobile and often unable to access care, as evidenced by the disparity in pulmonary rehab. <p>Stakeholders noted that it is important for committee to consider the disproportionate impact of COPD on these disadvantaged groups and how the provision of a targeted, effective, and well-tolerated treatment could improve their health and reduce inequalities.</p> <p>The committee noted that age, race and sex are protected are protected characteristics under the Equality Act 2010. It also noted that COPD disproportionately impacts people from lower socioeconomic backgrounds. However, issues related to differences in prevalence or incidence of a disease cannot be addressed in a technology appraisal. It also noted the disparities in care and unequal access to care based on specific</p> |

demographics. It considered that access to care is an issue that cannot 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?

In the submissions and expert statements, stakeholders reiterated the potential issues previously raised at scoping.

Stakeholders also highlighted the impact of geographical location on variation in outcomes and on access to pulmonary rehabilitation across England. Stakeholders noted that access to dupilumab has the potential to alleviate inequalities as people will have access to dupilumab in all regions.

The committee recognised this and understood that care varied based on geographic location. But the committee considered that access to care is an issue that cannot 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?

N/a

7. Have the committee's considerations of equality issues been described in the draft guidance, and, if so, where?
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Yes – please see Section 3.18 of the draft guidance

Approved by Associate Director (name): Janet Robertson

Date: 14 April 2025