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NATIONAL INSTITUTE FOR HEALTH AND CARE EXCELLENCE

EQUALITY IMPACT ASSESSMENT

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Heavy menstrual bleeding (HMB)

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

3.0 Guideline development: before consultation (to be completed by the developer before draft guideline consultation)

3.1 Have the potential equality issues identified during the scoping process been addressed by the Committee, and, if so, how?

n/a (no scoping process for clinical guideline updates)

3.2 Have any **other** potential equality issues (in addition to those identified during the scoping process) been identified, and, if so, how has the Committee addressed them?

The committee identified race as a potential equalities issue, as fibroids are more common in women of African Caribbean descent than other women. Fibroids are also more common in women who are overweight. Age was identified as another possible issue, as fibroids become more common with age, and the suitability of treatment may depend on the age of a woman and the proximity to menopause (as fibroids often reduce in size after menopause). Many of the treatments for fibroids (such as hysterectomy) affect fertility, and so a woman's wishes about fertility may

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3.2 Have any **other** potential equality issues (in addition to those identified during the scoping process) been identified, and, if so, how has the Committee addressed them?

influence her choice of treatment for fibroids. None of the currently recommended treatments are suitable for women who are currently trying to conceive. The committee also noted that treatment options which affect regular menstruation may not be favourably considered by some women as in some cultures regular menstrual cycles are considered important.

Relevant subgroups were also been specified in the review protocol, however, no evidence relating specifically to these subgroups were available in the evidence.

3.3 Were the Committee's considerations of equality issues described in the consultation document, and, if so, where?

The 'other considerations' section of the Linking Evidence To Recommendations table in the guideline.

3.4 Do the preliminary recommendations make it more difficult in practice for a specific group to access services compared with other groups? If so, what are the barriers to, or difficulties with, access for the specific group?

Progesterone receptor modulators may interfere with regular menstruation, and so this may be a barrier to women for cultures for who regular menstrual cycles are important.

3.5 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

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3.6 Are there any recommendations or explanations that the Committee could make to remove or alleviate barriers to, or difficulties with, access to services identified in questions 3.1, 3.2 or 3.3, or otherwise fulfil NICE's obligation to advance equality?

See section 3.3 and 3.4 above

Completed by Developer _Lorraine Taylor, Associate Director, Clinical Guidelines Update Team

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Approved by NICE quality assurance lead Christine Carson

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