

**NATIONAL INSTITUTE FOR HEALTH AND
CARE EXCELLENCE**

HealthTech Programme

**GID-HTE10066 Ex-situ machine perfusion devices
for deceased donor liver transplants**

HealthTech Guidance assessment

Equality impact assessment: Scoping

The impact on equality has been assessed during this evaluation according to the principles of the [NICE Equality scheme](#).

1. Have any potential equality issues been identified during the scoping process, and, if so, what are they?

Several potential equality considerations have been identified in line with the scope of assessing these technologies. Key considerations include:

- End-stage liver disease can significantly affect people's daily living. Under the Equality Act 2010, a person has a disability if they have a physical or mental impairment that has a substantial and long-term effect on their ability to do typical day-to-day activities. Disease severity is an important factor in determining the allocation of liver transplants. People with more severe liver disease and higher risk of mortality, are generally prioritised for liver transplantation ahead of people with less severe liver disease and lower risk of mortality, although other factors may also be considered.
- Adults from white or Asian backgrounds tend to wait less time for a liver transplant than adults from black or other ethnic minority backgrounds ([NHS Blood and Transplant, 2024](#)).

- All of the major religions and belief systems in the UK are open to the principles of organ donation and transplantation. Organ donation is a personal choice and views on the matter can vary even among individuals within the same faith ([NHS Blood and Transplant](#)).
- There are different types of liver diseases that can be associated with alcohol, obesity, viral infection, and genetic factors. Overall, men are more likely to die from liver disease than women ([British Liver Trust, 2024](#)). In 2023/24, males represented 57% of deceased liver donors, 63% of transplant recipients and 55% of the waiting list ([NHS Blood and Transplant, 2024](#)).

Sex, disability, race and religion or belief are protected characteristics under the Equality Act (2010).

Additional considerations include:

- In England the risk of dying prematurely from alcoholic liver disease is higher in people from more deprived areas ([Office for Health Improvement and Disparities, 2024](#)). People experiencing homelessness who develop end-stage liver disease may not access healthcare services and may not receive the support they need.

2. What is the preliminary view as to what extent these potential equality issues need addressing by the Committee?

The committee should consider all equality issues and considerations when making recommendations.

3. Has any change to the draft scope been agreed to highlight potential equality issues?

Following on from the scoping workshop and scope consultation, minor amendments have been made to the draft scope equality considerations:

- The population within the draft scope was extended to include children, in addition to adults. Experts noted that in some cases ex-situ machine

perfusion devices may potentially be appropriate and beneficial for child recipients of liver transplants from deceased donors. The scope was also amended to include the use of split livers in children and small adults.

- Removal of bile salts using porcine sources as a consideration, which on discussion at the scoping workshop was deemed by stakeholders to not be an issue for liver transplantation, as use of products derived from animals, including porcine and bovine sources, are standard practice across surgical procedures.
- Further detail added on how living in rural locations impacted on access to donor organs prior to the introduction of machine perfusion technologies due to the more challenging logistics involved for rural locations coupled with the shorter preservation times associated with static cold storage compared to ex-situ machine perfusion technologies.
- Further detail added on how ongoing variations in the provision of ex-situ machine perfusion devices across liver transplant centres could lead to inequities in the allocation of livers, potentially favouring centres with greater capacity for machine perfusion.

4. Have any additional stakeholders related to potential equality issues been identified during the scoping process, and, if so, have changes to the stakeholder list been made?

An additional organisation was located for the paediatric population (Children's Liver Disease Foundation). This organisation recently merged with the British Liver Trust (April 2024), a registered stakeholder for the assessment.

Approved by Associate Director: Lizzy Latimer

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