NATIONAL INSTITUTE FOR HEALTH AND CARE EXCELLENCE

Equality and health inequality impact assessment

HTG10470 (IP1774/2) Ultrasound-guided transcervical and transvaginal radiofrequency ablation for symptomatic uterine fibroids

Scoping

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

- There is a higher incidence of fibroids in Black women compared to other racial groups. They often experience earlier onset and have more severe symptoms (Caribbean and African Health Network).
- Uterine fibroids only affect people with a uterus.
- Some people with uterine fibroids may not identify as female, including non-binary people or trans men. Gender reassignment is a protected characteristic under the Equality Act 2010. The use of inclusive language and clinician awareness that transvaginal procedures may trigger gender dysphoria may be important for patient experience and engagement.
- Some treatments for fibroids are unsuitable for people who are pregnant and some interventions can have a negative effect on fertility and future pregnancy. Conversely, treating fibroids may enable a person to become pregnant.
- Uterine fibroids are common in people between 25 to 45 years of age and most common toward the end of the reproductive years, although they can occur at any age.

- People with uterine fibroids may be covered under disability in the Equality Act 2010 if their symptoms have a substantial adverse effect on day to day activities for longer than 12 months.

2 Have any potential health inequality issues been identified during the scoping process? If so, what are they?

- There is disproportionate use of hysterectomy as a treatment option and longer postoperative recovery periods for Black women (Caribbean and African Health Network).
- Uterine fibroids are more common in people with obesity, which has a higher prevalence in more deprived socioeconomic groups.

3 What is the preliminary view as to what extent the committee needs to address the potential issues set out in questions 1 and 2?

The potential equality issues will be noted by the committee and inform discussions where appropriate.

4 Has any change to the draft scope been agreed to highlight the potential equality or health inequality issues set out in questions 1 and 2 following the scope consultation?

Yes, the following potential health inequality issues has been added following consultation:

Access to specialist fibroid services and treatment options may vary because of differences in local service provision and referral pathways.

The comment '*Uterine fibroids only affect people with a uterus'* was removed as it was considered duplicative by consultees. The scope states that uterine fibroids is the condition being assessed throughout.

5 Has the stakeholder list been updated as a result of additional equality or health inequality issues identified during the scoping process?

No

Approved by senior responsible officer: Lizzy Latimer

Date: 13/07/2026

Draft guidance (if issued)

6 Have the potential equality issues identified during the scoping process been addressed by the committee? If so, how?

[add answer]

7 Have the potential health inequality issues identified during the scoping process been addressed by the committee? If so, how?

[add answer]

8 Have any other potential equality or health inequality issues been raised in information submitted by stakeholders or in the external assessment report? If so, how has the committee addressed these?

[add answer]

9 Have any other potential equality or health inequality issues been identified by the committee? If so, how has the committee addressed these?

[add answer]

10 Do the preliminary recommendations make it more difficult for a specific group to access the technology than other groups? If so, what are the barriers to, or difficulties with, access for this group?

[add answer]

11 Has the committee made any reasonable adjustments within its recommendations for the equality issues identified? That is, have any adjustments to the recommendations been made to remove or alleviate barriers to, or difficulties with, access to the technology needed to fulfil NICE's obligations to promote equality.

[add answer]

12 Has the committee taken into consideration the health inequality issues in its decision-making? If so, how was this done?

[add answer]

13 Have the committee's considerations of equality and health inequality issues been described in the draft guidance? If so, where?

[add answer]

Approved by senior responsible officer: [name]

Date: XX/XX/20XX

Final draft guidance (when issued)

14 Have any additional potential equality or health inequality issues been raised during consultation on the draft guidance? If so, how has the committee addressed these?

[add answer]

15 Have any additional potential equality or health inequality issues been identified by the committee? If so, how has the committee addressed these?

[add answer]

16 If the recommendations have changed after consultation, do the updated recommendations make it more difficult for a specific group to access the technology than other groups? If so, what are the barriers to, or difficulties with, access for this group?

[add answer]

17 If the recommendations have changed after consultation, has the committee made any other reasonable adjustments in the recommendations for the equality issues identified? That is, have any adjustments to the recommendations been made to remove or alleviate barriers to, or difficulties with, access to the technology needed to fulfil NICE's obligations to promote equality.

[add answer]

18 Has the committee taken into consideration the health inequality issues in its decision-making? If so, how was this done?

[add answer]

19 Have the committee's considerations of equality and health inequality issues been described in the final draft guidance? If so, where?

[add answer]

Approved by senior responsible officer: [name]

Date: XX/XX/20XX

