

NATIONAL INSTITUTE FOR HEALTH AND CARE EXCELLENCE

HEALTH TECHNOLOGY APPRAISAL PROGRAMME

Equality impact assessment – Guidance development

STA Ruxolitinib cream for treating non-segmental vitiligo in people 12 years and over (rapid review of technology appraisal guidance 1088) [ID6652]

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

Final draft guidance

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

At the scoping consultation for TA1088, the following comments were made:

- The condition is more noticeable in brown and black skin tones, but the psychological impact is apparent for all skin tones, along with the risk of sunburn for all skin tones.
- There is a risk of depression and anxiety which may be greatest in the Black and minority ethnic populations.
- Some quality-of-life measures may discriminate against non-native English speakers.

The committee was mindful of its obligations in relation to the Equality Act 2010. It understood that the impact of vitiligo patches varies individually and does not necessarily depend on a person's skin colour or Fitzpatrick scale skin type.

The committee noted that some quality-of-life measures may discriminate against people with English as a second language but that it was unclear whether this was relevant to the measures used in the key clinical trials.

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?

Other potential equality issues raised in submissions/expert statements for TA1088 included:

- There may be an additional cultural burden in people with brown and black skin tones, which may lead them to experience more discrimination.
- If ruxolitinib is recommended, it should be offered to all people with vitiligo irrespective of their ethnicity or any other protected characteristic.
- Vitiligo is more common in younger people, and that if ruxolitinib was recommended it should be available to people 12 years and over.
- Access to phototherapy may vary depending on where a person lives.

The committee was mindful of its obligations in relation to the Equality Act 2010. It considered that it could only recommend ruxolitinib within its marketing authorisation.

The committee considered that issues around healthcare implementation could not be addressed in a technology appraisal. It understood that there was a personal and financial burden associated with a course of phototherapy, which may mean that it is not suitable for some people who are eligible for treatment. It considered that if ruxolitinib was recommended it may provide another option that does not have the associated barriers to access that phototherapy has.

Potential equality issues raised during appeal and in patient and company submissions post-appeal. These reflected the issues raised earlier but, in some cases, provided more details, including:

- Vitiligo can be distressing and devastating for people of all skin tones but the physical, social, psychosocial implications may be disproportionately greater in people with black and brown skin tones because of social and cultural stigmas; and in children and young people because of the disruptions to young people's daily life, education, friendship, intimate relationships and embarking on careers.

- The additional cultural burden and social stigma associated with vitiligo in people with brown and black skin tones, may lead them to experience more discrimination.
- Risk of depression and anxiety with vitiligo, which may be greatest among ethnic minority backgrounds
- If ruxolitinib is recommended, it should be offered to all people with vitiligo irrespective of their ethnicity or any other protected characteristic, but the greater impact of vitiligo on people with black and brown skin tones and the associated physical, social and psychosocial implications for them should be considered in the committee's decision making.
- Access to phototherapy may vary depending on where a person lives.

The committee was mindful of its obligations in relation to the Equality Act 2010. It was also aware that aiming to reduce health inequalities is one of the principles guiding the development of NICE recommendations. It considered the company's revised subgroup analysis by Fitzpatrick score submitted post appeal because this was related to the upheld appeal points. But it agreed with the company and stakeholders not to recommend ruxolitinib to specific subgroups defined by skin colour or protected characteristics.

The committee noted that the company's revised subgroup analysis was of poor statistical practice, but it was likely that some benefits associated with ruxolitinib in people with black or brown skin tones or in children and young people are not fully captured in the model. And this was taken into account in the committee's decision making.

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 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?

The company positioned ruxolitinib cream only for people 12 years and over with non-segmental vitiligo with facial involvement that has not responded to topical first-line treatments or when these treatments are not suitable. The committee made its recommendation within the whole population for which it had been presented evidence.

5. Is there potential for the 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?

The committee took into account all the equality considerations raised in its decision making.

7. Have the committee's considerations of equality issues been described in the final draft guidance, and, if so, where?

Yes, in section 3.21.

Approved by Associate Director (name): Ross Dent

Date: 30/01/2026