

NATIONAL INSTITUTE FOR HEALTH AND CARE EXCELLENCE

Health Technology Evaluation

Equality impact assessment – Scoping

Tislelizumab for treating unresectable advanced oesophageal squamous cell cancer after platinum-based chemotherapy (review of TA1068)

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 (draft scope consultation and scoping workshop discussion), and, if so, what are they?

- Approximately 70% of oesophageal cancer diagnoses occur in men; there is a twofold to threefold difference in incidence and mortality rates between the sexes (2018-2019, 2021).
- The incidence of oesophageal cancer is strongly correlated to age, where around 41% of new cases in the UK between 2017 to 2019 were diagnosed in those over 75 years old.
- Mortality of oesophageal cancer is strongly correlated to age with around a fifth (19.0%) of people in England diagnosed with oesophageal cancer aged 15-54 surviving their disease for ten years or more, compared with around 5 in 100 (6.0%) people diagnosed aged 75-99 (2013-2017)
- There are important socio-economic influences in the incidence and mortality of oesophageal cancer which can lead to health inequalities. Incidence rates in England in females are 43% higher in the most deprived quintile compared with the least, and in males are 50% higher in the most deprived quintile compared with the least (2013-2017).
- In addition, oesophageal cancer deaths in England are more common in people living in the most deprived areas. Around a fifth (21.2%) of people in England diagnosed with oesophageal cancer in the least deprived group survive their disease for five years or more, compared with more than 1 in 10 (13.6%) people in the most deprived group (2016-2020).

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

Issues related to differences in prevalence or incidence of a disease cannot be addressed in a technology evaluation. The committee will consider all other potential equalities issues during the course of this evaluation.

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

N/A

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?

No additional stakeholders identified.

Approved by Principal Technical Adviser (name): JC Dietz

Date: 10/03/2026