

**NATIONAL INSTITUTE FOR HEALTH AND CARE
EXCELLENCE**

NICE guidelines

**Equality and health inequalities assessment (EHIA)
template**

Chronic heart failure in adults: diagnosis and management

The considerations and potential impact on equality and health inequalities have been considered throughout the guidance development, maintenance and update process according to the principles of the NICE equality policy and those outlined in [Developing NICE guidelines: the manual](#).

This EHIA relates to: Chronic heart failure in adults: diagnosis and management

Appendix [X]: equality and health inequalities assessment (EHIA)

STAGE 4. Development of guideline or topic area for update

(to be completed by the developer before consultation on the draft guideline or update)

Chronic heart failure in adults: diagnosis and management

Date of completion: 25th April 2025

Focus of guideline or update: Pharmacological management

4.1 From the evidence syntheses and the committee's considerations thereof, what were the main equality and health inequalities issues identified? Were any further potential issues identified (in addition to those identified during the scoping process) or any gaps in the evidence for any particular group
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<p><i>Where heterogeneity was observed, there was insufficient data to conduct subgroup analysis by age or race. However, in evidence review A1 on reduced ejection fraction heterogeneity was present for the outcomes of mortality and hospitalisations for the comparison MRA + ACEI/ARB + BB versus ACEI/ARB + BB + placebo. Where the trial was conducted (geographical location) was used a proxy for ethnicity and the committee placed more emphasis on the results from the European population compared to the Japanese when making their recommendations.</i></p>
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<p><i>All of the recommendations are applicable to all groups of people.</i></p> <p><i>The guideline committee did not want to prescriptive about the order in which the drugs in recommendations 1.4.1, 1.4.4 and 1.6.1 are offered or considered but in the committee discussions of the evidence (evidence reviews A1 and A2), the committee refer to taking into consideration clinical presentation and comorbidities which could include age and frailty.</i></p>

4.2 Could any draft recommendations potentially increase inequalities?
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No

4.3 How has the committee's considerations of equality and health inequalities issues identified in 2.2, 3.2 and 4.1 been reflected in the development of any research recommendations?

The research conducted by the London School of Hygiene and Tropical Medicine could not be included in the guideline due to a delay in acquiring permission for the data to be shared externally.

4.4 Based on the equality and health inequalities issues identified in 2.2, 3.2 and 4.1, do you have representation from relevant stakeholder groups for the guideline or update consultation process, including groups who are known to be affected by these issues? If not, what plans are in place to ensure relevant stakeholders are represented and included?

The committee are reviewing the list of registered stakeholders to see if any organisations are missing. The public involvement team will ask key organisations to respond to the consultation.

4.5 What questions will you ask at the stakeholder consultation about the impact of the guideline or update on equality and health inequalities?

No specific questions will be asked about equality and health inequalities, but we will ensure that any comments from relevant stakeholders are considered and discussed with the committee, and changes will be made where necessary.

Completed by developer: Sharon Swain

Date: 15/05/2025

Approved by committee chair: Joseph Mills

Date: 15/05/2025

Approved by NICE quality assurance lead _____

Date _____