

# NATIONAL INSTITUTE FOR HEALTH AND CARE EXCELLENCE

## NICE guidelines

### Equality impact assessment

### Acne vulgaris: management

The impact on equality has been assessed during guidance development according to the principles of the NICE equality policy.

#### 4.0 Final guideline (to be completed by the Developer before GE consideration of final guideline)

4.1 Have any additional potential equality issues been raised during the consultation, and, if so, how has the Committee addressed them?

- It was raised that azelaic acid as a topical monotherapy would be more suitable for darker skin than the currently recommended options. However, the committee did not recommend this because it was not clear whether there is evidence supporting this and the evidence showed combination treatments to be more effective than monotherapies. However, the committee also did not recommend against its use and therefore this could be used if deemed suitable on a case-by-case basis.
- Whether the guideline contained sufficient advice for people who have cognitive impairments was also raised during consultation. To address this a new recommendation was made:

*1.1.2 Include parents and carers in discussions if the person with acne would like them to be involved, or when support is required (for example, for a person with cognitive impairment).*

- Varying costs of syndet skin cleansing products were also raised as an issue which would be an equality issue related to socio-economic factors. We have therefore added the following to the relevant rationale:

*The committee agreed that different formulations are probably similarly effective, so the findings would still be applicable and it would be reasonable to try the cheapest syndet cleansing product in the first instance.*

4.2 If the recommendations have changed after consultation, are there any recommendations that make it more difficult in practice for a specific group to access services compared with other groups? If so, what are the barriers to, or difficulties with, access for the specific group?

No there are not.

4.3 If the recommendations have changed after consultation, 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, there is not.

4.4 If the recommendations have changed after consultation, are there any recommendations or explanations that the Committee could make to remove or alleviate barriers to, or difficulties with, access to services identified in questions 4.1, 4.2 and 4.3, or otherwise fulfil NICE's obligations to advance equality?

The committee noted that the recommendations have simplified acne treatment and therefore will help alleviate barriers to, or difficulties with access to services.

4.5 Have the Committee's considerations of equality issues been described in the final guideline, and, if so, where?

The committee's discussion related to azelaic acid as an additional topical monotherapy option for darker skin colour was added to evidence reviews E1 and F1.

In relation to cognitive impairments we have added to the discussion of evidence report A (information and support) that discussions could involve the person as well as their families and carers if the person would like them to so that they can get support (for example with treatment instructions).

Updated by Developer: Katharina Dworzynski

Date: 11<sup>th</sup> May 2021

Approved by NICE quality assurance lead: Christine Carson

Date: 24<sup>th</sup> June 2021

**5.0 After Guidance Executive amendments – if applicable (to be completed by appropriate NICE staff member after Guidance Executive)**

5.1 Outline amendments agreed by Guidance Executive below, if applicable:
---

Not applicable
----------------

Approved by Developer: Katharina Dworzynski

Date: 9<sup>th</sup> June 2021

Approved by NICE quality assurance lead: Christine Carson

Date: 24<sup>th</sup> June 2021