

NATIONAL INSTITUTE FOR HEALTH AND CARE EXCELLENCE

HEALTH TECHNOLOGY APPRAISAL PROGRAMME

Equality impact assessment – Guidance development

STA Acoramidis for treating transthyretin amyloidosis with cardiomyopathy ID6354

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Final draft guidance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 scoping consultation stakeholders highlighted that fewer women are currently diagnosed with ATTR-CM than men. Further evidence on prevalence, presentation and diagnosis in women is needed. Stakeholders added that ATTR-CM is most common in older people and individuals with African, Caribbean or Hispanic family backgrounds – the most common variants of hereditary ATTR-CM amyloidosis are the Val122Ile in people with African or Caribbean family backgrounds and the Val30Met in people with Hispanic family backgrounds (although the latter is rarely seen in the UK).

The recommendation includes use of acoramidis for any adults with treat wild-type or hereditary transthyretin-related amyloidosis with cardiomyopathy in adults (within its marketing authorisation) and does not restrict based on genetic variant of the condition, age, ethnicity or gender, including gender reassignment.

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?

In the company and stakeholder submissions, it was highlighted that ATTR-CM is most common in older people, which could bring issues for accessibility and attendance at clinics for diagnosis, treatment and review.

The recommendation includes use of acoramidis for any adults with treat wild-type or hereditary transthyretin-related amyloidosis with cardiomyopathy in adults (within its marketing authorisation) and does not restrict based on age.

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?

No

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?

No

7.	Have the committee's considerations of equality issues been described in the final draft guidance, and, if so, where?
	Not applicable

Approved by Associate Director (name): ...Richard Diaz.....

Date: 18 Nov 2025