

**NATIONAL INSTITUTE FOR HEALTH AND CARE
EXCELLENCE**

HEALTH TECHNOLOGY APPRAISAL PROGRAMME

Equality impact assessment – Guidance development

**STA Sotatercept for treating pulmonary arterial
hypertension [ID6163]**

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

Final draft guidance

(when draft guidance issued)

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| 1. Have any additional potential equality issues been raised during the consultation, and, if so, how has the committee addressed these? |
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<p>At the second committee meeting, the committee also acknowledged that the company’s positioning of sotatercept means that people already in the intermediate–high-risk group and those in high-risk group at any point would not be eligible for starting sotatercept. It also acknowledged that these groups may experience significant burden from use of PCA. This is because of side effects of PCA and the mobility required to administer PCA. The committee is aware that its remit is to evaluate the clinical and cost effectiveness of the technology in the population covered by the marketing authorisation. The committee noted that the marketing authorisation for sotatercept covers WHO FC 2 and 3. This corresponds to low-risk, intermediate–low-risk and intermediate–high-risk groups. There were no people at high risk in the sotatercept arm of STELLAR at baseline. A small proportion of people on the sotatercept arm may have progressed to high risk in STELLAR at 24-week follow up, but it was uncertain how many would in the longer term and in clinical practice. There is also a lack of evidence on starting sotatercept in the intermediate–high-risk group or high-risk group.</p>
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The committee concluded that in the absence of data, this was not an equality issue that is within its remit.

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 the technology compared with other groups? If so, what are the barriers to, or difficulties with, access for the specific group?

No

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

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 identified in questions 2 and 3, or otherwise fulfil NICE's obligations to promote equality?

No

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 Have the committee's considerations of equality issues been described in the final draft guidance, and, if so, where?

Yes, in section 3.23

Approved by Associate Director: Emily Crowe.....

Date: 07/05/2026