

NATIONAL INSTITUTE FOR HEALTH AND CLINICAL EXCELLENCE

HEALTH TECHNOLOGY APPRAISAL PROGRAMME

Equality impact assessment – Guidance development

STA Abiraterone for castration-resistant metastatic prostate cancer previously treated with a docetaxel-containing regimen

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

Consultation

1. Have the potential equality issues identified during the scoping process been addressed by the Committee, and, if so, how?

It was noted in consultation that prostate cancer is more common in African-Caribbean men and men over 60 years of age, and that men from lower socioeconomic backgrounds are less likely to survive prostate cancer than those from more affluent backgrounds.

It was agreed in the scoping workshop that, should the topic proceed through the appraisal process, access to the technology should not be defined by any of the protected characteristics outlined in the current equalities legislation.

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?

No issues that could have potential impact on equality were identified in the submissions, expert statements or academic report.

3. Have any other potential equality issues been identified by the

Committee, and, if so, how has the Committee addressed these?
The Committee considered that people who have undergone male to female gender reassignment can still develop prostate cancer. The Committee therefore concluded that this appraisal should refer to people rather than to men.

4. Do the preliminary 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 access for the specific group?
No. The Committee was aware that people with prostate cancer who have undergone male to female gender reassignment may find it uncomfortable to attend male urology clinics. However, the Committee agreed that the treatment of prostate cancer would be likely to be provided in oncology clinics.

5. Are there any recommendations or explanations that the Committee could make to remove or alleviate barriers to access identified in question 4, or otherwise fulfil NICE's obligations to promote equality?
No

6. Have the Committee's considerations of equality issues been described in the appraisal consultation document, and, if so, where?
Yes Section 4.21 and the ACD summary table.

Approved by Associate Director (name): Elisabeth George

Date: 26 01 12

Final appraisal determination

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

No

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 access for the specific group?

No.

3. If the recommendations have changed after consultation, are there any recommendations or explanations that the Committee could make to remove or alleviate barriers to access identified in question 2, or otherwise fulfil NICE's obligations to promote equality?

N/a

4. Have the Committee's considerations of equality issues been described in the final appraisal determination, and, if so, where?

Yes, see section 4.23

Approved by Centre or Programme Director (name): Meindert Boysen

Date: 25 04 12