NATIONAL INSTITUTE FOR HEALTH AND CARE EXCELLENCE

HEALTH TECHNOLOGY APPRAISAL PROGRAMME

Equality impact assessment – Guidance development

STA Ombitasvir–paritaprevir–ritonavir with or without dasabuvir for treating chronic hepatitis C

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?
At scoping workshop the patient expert stated that in clinical practice there may be a reluctance to treat people who use intravenous drugs with new treatments for hepatitis C due to fear of drug interactions and it may be a potential barrier to access. The Committee agreed that its preliminary recommendations do not exclude the patient groups who use intravenous drugs.

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?
The company noted that minority ethnic groups are more highly represented in the genotype 4 HCV population than in the genotype 1 populations. The Committee was satisfied that it had sufficiently considered the evidence available for people with HCV genotype 4 (albeit limited). In absence of robust data on clinical effectiveness of people with genotype 4 HCV with cirrhosis the Committee had attempted to bridge evidence gap by considering whether the evidence available for HCV genotype 1b was generalisable to the HCV genotype 4 population, and based on the cost effectiveness data had made recommendations that were aligned with the treatment duration stated in the marketing authorisation. Therefore, the Committee agreed that its recommendations were fair and did not constitute an equality issue. The company also stated that efficacy of 3D is not expected to differ in

patients with HIV co-infection and therefore recommendations on the use of 3D or 2D should not differ for patients with or without HIV co-infection. The Committee was satisfied that its recommendations did not restrict access of 3D and 2D treatments for people with HIV co-infection.

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 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, or difficulties with, access for the specific group?
No	

5.	Is there potential for the preliminary 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?
N/A	

7.	Have the Committee's considerations of equality issues been described in the appraisal consultation document, and, if so, where?

Please see section 4.24 of the appraisal consultation document and the summary table.

Approved by Associate Director (name): Helen Knight

Date: 22/07/2015

Final appraisal determination

(when an ACD issued)

1.	Have any additional potential equality issues been raised during the consultation, and, if so, how has the Committee addressed these?
During consultation, the Haemophilia Society stated that any delay in access to treatment would have a significant adverse impact on people with haemophilia and other bleeding disorders.	

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?
After consultation, the Committee recommended 3D and 2D for all the groups specified in the marketing authorisation. Therefore, the Committee concluded that no further consideration of the potential equality issues raised by Consultees, was necessary to meet NICE's obligation to promote equality of access to treatment.	

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?
None.	

5.	Have the Committee's considerations of equality issues been described in the final appraisal determination, and, if so, where?
Please see section 4.26 of the final appraisal determination and the summary table.	

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

Date: 13 October 2015