

# NATIONAL INSTITUTE FOR HEALTH AND CARE EXCELLENCE

## HEALTH TECHNOLOGY APPRAISAL PROGRAMME

### Equality impact assessment – Guidance development

#### STA Ustekinumab for treating moderately to severely active ulcerative colitis

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

#### Consultation

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| 1. Have the potential equality issues identified during the scoping process been addressed by the committee, and, if so, how? |
| No equality issues were identified during the scoping process                                                                 |

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| 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?                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |
| A patient organisation raised the following point in its submission. The patient expert noted in their submission that they supported the comments from the patient organisation<br><br>For certain religious groups, the impact of active disease and the effects of surgery may interfere with religious practices and cause particular distress, which could be alleviated by an additional medical therapeutic option.<br><br>As noted above, women who have not yet had any children and wish to do so would have a reduced chance of conceiving naturally following colectomy or pouch surgery. This technology would offer another option to delay or avoid surgical intervention.<br><br>The committee discussed the impact of ulcerative colitis on activities of daily living (which may include participation in religious practices) and the impact |

of surgery on reproductive function. The committee recognised that there is an unmet clinical need for additional medical treatments for patients with active disease who wished to avoid surgery. The committee did not consider this unmet need to be specific to the groups identified in the submission, therefore the committee did not consider these groups to be disproportionately affected by its decision not to recommend ustekinumab.

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?

Not applicable

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

No, although as noted in response to question 2 above, the committee's discussion of the impact of disease and current treatment options on health related quality of life is captured in the appraisal consultation document in section 3.1.

**Approved by Associate Director (name):** .....Janet Robertson.....

**Date:** 13 January 2020

### 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?

No. A patient organisation raised the same points regarding the impact of active disease and how the effects of surgery may interfere with religious practices and cause particular distress and the impacts of surgery on fertility in women below childbearing age.

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?
Not applicable.

5. Have the committee's considerations of equality issues been described in the final appraisal determination, and, if so, where?
No. As described in the response to question 2 above, the committee agreed that there is an unmet clinical need for additional medical treatments for patients with active disease who wished to avoid surgery but this unmet need was not considered to be specific to the groups identified in the submission. As these groups are not considered to be disproportionately affected by the recommendations, there was no discussion of this point in the final appraisal determination.

**Approved by Associate Director (name):** ...Janet Robertson.....

**Date:** 17 April 2020