## NATIONAL INSTITUTE FOR HEALTH AND CARE EXCELLENCE

#### HEALTH TECHNOLOGY APPRAISAL PROGRAMME

### **Equality impact assessment – Guidance development**

# STA lxekizumab for treating axial spondyloarthritis after nonsteroidal anti-inflammatory drugs

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?

No equalities issues were identified during the scoping process.

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 equality issues were identified.

3. Have any other potential equality issues been identified by the committee, and, if so, how has the committee addressed these?

No equality issues were identified.

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?

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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?
No.	
7.	Have the committee's considerations of equality issues been described in the appraisal consultation document, and, if so, where?
N/A.	
	ved by Associate Director (name):Janet Robertson  2 March 2021

## 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?

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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, 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?

Recommendation 1.2 is to assess response to ixekizumab after 16 weeks of treatment and to continue treatment only if there is clear evidence of response. This is defined as a reduction in the Bath Ankylosing Spondylitis Disease Activity Index (BASDAI) score to 50% of the pre-treatment value or by 2 or more units and a reduction in the spinal pain visual analogue scale (VAS) by 2 cm or more.

In addition, recommendation 1.3 has been added to 'Take into account any communication difficulties, or physical, psychological, sensory or learning disabilities that could affect responses to the BASDAI and spinal pain VAS questionnaires, and make any appropriate adjustments'. This is in line with previous NICE technology appraisal guidance in this disease area.

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5.	Have the committee's considerations of equality issues been described in the final appraisal determination, and, if so, where?
N/A	

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

**Date: 26 May 2021**