NATIONAL INSTITUTE FOR HEALTH AND CARE **EXCELLENCE**

HEALTH TECHNOLOGY APPRAISAL PROGRAMME

Equality impact assessment – Guidance development

STA Solriamfetol for treating excessive daytime sleepiness caused by narcolepsy

The impact on equality has been assessed during this appraisal according to the

orinciples 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 equality issues were identified at scoping.		
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.		
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 parriers to, or difficulties with access for	

at 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?
Not applicable.	
7.	Have the committee's considerations of equality issues been described in the appraisal consultation document, and, if so, where?
Yes in section 3.15	

Approved by Associate Director (name): Jasdeep Hayre

Date: 25 February 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?

A patient organisation raised a potential equality issue in that the Medicines and Healthcare products Regulatory Agency (MHRA) has issued a warning

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that modafinil use is linked to birth defects and reduced oral contraception efficacy. It said anyone with narcolepsy affected by this warning needs alternative treatment options. The committee were also aware that dexamfetamine or methylphenidate may not be suitable for some groups, including people with certain mental health conditions.

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, the recommendation allows use of solriamfetol in people who cannot have modafinil, dexamfetamine or methylphenidate.

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 appraisal determination, and, if so, where?

Yes, in section 3.17.

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daytime sleepiness caused by narcolepsy 3 of 4

Approved by Associate Director (name): Jasdeep Hayre

Date: 4 November 2021

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