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 obstructive sleep apnoea

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

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 the first committee meeting, the clinical expert noted that people with mental health or neurodegenerative conditions struggle to use CPAP regularly, making it difficult to control their excessive daytime sleepiness from obstructive sleep apnoea. Because the company's base case did not include those who were not adherent to CPAP the clinical expert suggested any positive recommendation could discriminate this group of people. The committee agreed with clinical experts. In response to consultation, the company provided the clinical and cost effectiveness evidence of solriamfetol for people not using primary obstructive sleep apnoea therapy at baseline. The patient expert also noted that obstructive sleep apnoea could be disabling for some people who may be unable to work or live normal lives and only having CPAP available may leave those people without any treatment options. This recommendation applies to the whole patient group covered by the marketing authorisation and there is no less favourable treatment for reasons related to a person's disability. The Committee had due regard for the impact of the guidance on patients and considered many factors, including the impact of the condition and technology on quality of life, the innovative nature of the treatment and likely non-health-related benefits.	

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?
N/A	

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?
N/A	

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?
N/A	

5.	Have the committee's considerations of equality issues been described in the final appraisal determination, and, if so, where?
Yes, section 3.6	

Approved by Associate Director (name): Jasdeep Hayre

Date: 19 January 2022