

NATIONAL INSTITUTE FOR HEALTH AND CARE EXCELLENCE

HEALTH TECHNOLOGY APPRAISAL PROGRAMME

Equality impact assessment – Guidance development

STA Relugolix-estradiol-norethisterone acetate for treating symptoms of endometriosis [ID3982]

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?

There were several issues raised during scoping:

- technology should be available to all eligible people, which may include trans men or non-binary people.
- people from some ethnic minority groups may be underdiagnosed, and/or present later and thus with more severe symptoms and that they are more likely to receive lower quality care due to a higher likelihood of living in areas of high deprivation, having lower incomes, experiencing language barriers and having poorer access to women's healthcare services.
- use of treatments which are contraceptive may not be acceptable to people from some religious or ethnic groups.
- delaying childbearing, either by choice or because of subfertility, may be a risk factor for endometriosis.

The committee was aware that some people with endometriosis may be trans, and that gender reassignment is a protected characteristic under the Equality Act 2010. The population in the guidance refers to 'adults' and therefore includes all eligible people.

The committee considered that differences in diagnosis between different groups cannot be addressed through a technology appraisal, but access would be improved in all groups if the technology is recommended. It also considered that it had not been presented with evidence that it was

appropriate or proportionate to make an adjustment for people of different ethnic backgrounds.

The committee considered all people eligible for treatment when making recommendations but did not consider that its recommendations would have a different impact on people protected by the equality legislation than on the wider population.

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?

Additional issues raised include:

- issues of underdiagnosis of endometriosis
- current treatment is a postcode lottery, based on knowledge of individual professionals and what is available in different areas
- clear and culturally competent information may be needed to improve access
- convenience of relugolix CT over GnRH agonist injection may particularly benefit individuals with transportation barriers and mobility issues

The committee acknowledged that access would be improved in all groups if the technology is recommended but did not consider that its recommendations would have a different impact on people protected by the equality legislation than on the wider population.

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

The committee considered that the SPIRIT trials had few people from ethnic minority backgrounds. However, it had not been presented with evidence that people from ethnic minority backgrounds would respond differently to the treatment.

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?
No

7. Have the committee's considerations of equality issues been described in the appraisal consultation document, and, if so, where?
Yes, in section 3.23.

Approved by Associate Director (name): ...Linda Landells.....

Date: 19 March 2024