

NATIONAL INSTITUTE FOR HEALTH AND CARE EXCELLENCE

HEALTH TECHNOLOGY APPRAISAL PROGRAMME

Equality impact assessment – Guidance development

STA Lecanemab for treating mild cognitive impairment or mild dementia caused by Alzheimer’s disease

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?

The issues identified were:

- There is current inequality in terms of who has an Alzheimer’s disease diagnosis and accessing care. This will be exacerbated by introducing the complex diagnostic pathway for lecanemab.
- People with Down’s syndrome (who have a 90% lifetime risk of developing Alzheimer’s disease), people with young-onset dementia and people from diverse family backgrounds were not fully represented in Clarity AD. These groups are at risk of being excluded from accessing lecanemab.
- Lecanemab may have different treatment effectiveness and benefits for different subgroups based on age, sex and family background.
- Lecanemab would need significant increases in NHS capacity for service delivery. Inequalities may increase as existing services that are already under strain would be needed to deliver the treatment.

The committee noted the concerns raised with getting a diagnosis, accessing care in a new and complex pathway, and substantial demand on NHS services. It understood these concerns but noted that they were outside of its remit. The committee understood that some people with Alzheimer’s disease have Down’s syndrome and may be considered disabled under the Equality Act 2010. It also noted the possibility of different treatment effects for subgroups. Age, sex, family background and disability are protected characteristics under the Equality Act 2010. The committee agreed that any recommendation should not restrict access to treatment for some people over others since protected characteristics.

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 other issues raised.

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

No other issues 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?

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 draft guidance, and, if so, where?

Yes, see section 3.25.

Approved by Associate Director (name): Ross Dent

Date: 31/05/2024