

NATIONAL INSTITUTE FOR HEALTH AND CARE EXCELLENCE

DIAGNOSTICS ASSESSMENT PROGRAMME

Equality impact assessment – Scoping

Automated ankle brachial pressure index measurement devices for assessing peripheral arterial disease in people with leg ulceration

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

1. Have any potential equality issues been identified during the scoping process (scoping workshop discussion, assessment subgroup discussion), and, if so, what are they?

Potential equality issues were discussed both in the scoping workshop 8 March 2022 and in the assessment subgroup meeting 23 March 2022.

The following were identified as potential equality issues relating to peripheral arterial disease and leg ulcers:

- The risk of cardiovascular disease, including peripheral arterial disease, is greater in men, people from South Asian family background and in areas of socio-economic deprivation. The risk increases with age. People with diabetes have an increased risk of cardiovascular disease, including peripheral arterial disease.
- Leg ulcers are common in people with sickle cell disease. Sickle cell disease is particularly common in people with an African or Caribbean family background.

If there is any benefit to the automated devices in terms of making ABPI assessment easier or in improving detection of peripheral arterial, people in these groups may gain particular benefit.

The following were identified as potential equality issues relating to the testing:

- Swelling of the leg, obesity or complex ulceration may make it difficult or painful to wear blood pressure cuffs. Some automated tests provide cuffless ankle pressure measurements and so might make doing the test more comfortable for these people.

- People with leg ulcers who have back pain or other conditions in which laying on the back is painful, may find it difficult to lie flat, in particular for the length of time it may take to rest before and do a manual doppler test. If automated tests can make doing the test more comfortable or quicker, they may have particular benefit for this group.
- The tests may not be suitable or work accurately for people who have had lymph nodes removed or damaged (and are at risk of lymphoedema), limb amputation or other conditions where blood pressure cannot be measured on both arms or legs.
- Similar to the manual doppler test used in current practice, the ABPI measured by the automated devices in the following people may look normal when in fact they have peripheral arterial disease: people with diabetes, rheumatoid arthritis, systemic vasculitis, atherosclerotic disease, advanced chronic renal failure or other conditions in which arterial calcification is common. Peripheral arterial disease could be detected in these groups using further information produced by doppler probes (doppler waveform). If automated devices do not use doppler technology, or produce an equivalent output to supplement ABPI, then performance in people with these conditions may be worse than use of a doppler probe (manual or automated).

2. What is the preliminary view as to what extent these potential equality issues need addressing by the committee?

The potential equality issues will be considered by committee during decision making and will inform discussions where appropriate.

3. Has any change to the draft scope been agreed to highlight potential equality issues?

The potential equality issues have been included in the equalities section of the scope. Acceptability of test procedure using the device and patient experience has been added as an outcome to try and capture whether people who find the manual test uncomfortable find the automated test more tolerable. The scope also includes the following subgroups:

- People with diabetes, rheumatoid arthritis, systemic vasculitis, atherosclerotic disease, advanced chronic renal failure or other conditions in which arterial calcification is common

- People with sickle cell disease
 - People who have had lymph nodes removed or damaged, limb amputation or other conditions where blood pressure cannot be measured on both arms or legs
4. Have any additional stakeholders related to potential equality issues been identified during the scoping process, and, if so, have changes to the stakeholder list been made?

No additional stakeholders related to potential equality issues have been identified during the scoping process.

Approved by Associate Director (name): Rebecca Albrow

Date: 01/04/2022