

NATIONAL INSTITUTE FOR HEALTH AND CARE EXCELLENCE

HEALTH TECHNOLOGY APPRAISAL PROGRAMME

Equality impact assessment – Guidance development

HST Fosdenopterin for molybdenum cofactor deficiency type A

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?

Stakeholders noted that molybdenum cofactor deficiency (MoCD) type A is more prevalent in people from South Asian family, and consanguineous family background. The committee understood that MoCD type A is linked with high incidence of consanguinity rather than with being South Asian. The committee noted that issues related to differences in prevalence cannot be addressed in a technology evaluation.

The company also noted that fosdenopterin could reduce carer burden and that caring may be disproportionately done by women. The committee considered this issue and recalled that it had taken carer burden into account in its decision making (see draft guidance section 3.12).

The patient experts noted that families on low income may not have access to the medical grade freezer needed to store fosdenopterin. The committee considered this issue but because its recommendation does not restrict access to treatment for some people over others, the committee agreed this was not a potential equalities issue. The committee noted that it was not presented with evidence to support the improved impact of fosdenopterin for any of the groups highlighted.

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 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?

N/A.

7. Have the committee's considerations of equality issues been described in the draft guidance, and, if so, where?

Yes, section 3.19.

Approved by Associate Director (name): Jasdeep Hayre

Date: 30 August 2024