

**NATIONAL INSTITUTE FOR HEALTH AND CARE
EXCELLENCE**

HEALTH TECHNOLOGY APPRAISAL PROGRAMME

Equality impact assessment – Scoping

STA Lisocabtagene maraleucel for treating relapsed or refractory diffuse large B-cell lymphoma, high grade B-cell lymphoma, primary mediastinal large B-cell lymphoma or follicular lymphoma grade 3B after first-line chemotherapy

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

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

Yes, one stakeholder mentioned that clinical teams have to consider the fitness of patients to receive more intensive cancer treatments, and to this end the age of patients can be used as a proxy for levels of fitness, which then impacts whether they are treated for “curative intent”. Relapsed or refractory DLBCL patients across all ages who are fit enough should be able to access CAR-T, and specifically liso-cel, if it is considered more tolerable and less toxic than other comparators by clinical teams.

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

The population in the scope is broad, and the committee will consider the available evidence for liso-cel in people for whom currently available potentially curative treatments (such as stem cell transplant) may not be suitable.

3. Has any change to the draft scope been agreed to highlight potential equality issues?
Not applicable

4. Have any additional stakeholders related to potential equality issues been identified during the scoping process, and, if so, have changes to the matrix been made?
No additional stakeholders identified.

Approved by Associate Director (name): Ross Dent

Date: 27/02/2024