

**NATIONAL INSTITUTE FOR HEALTH AND CARE
EXCELLENCE**

HIGHLY SPECIALISED TECHNOLOGIES EVALUATION

Equality impact assessment – Scoping

**HST Volanesorsen for treating familial chylomicronaemia
syndrome**

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

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| 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? |
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Consultees noted that familial chylomicronaemia syndrome can have particularly severe effects on pregnant women and their foetuses because of increased levels of triglycerides and risk of gestational diabetes, leading to a potentially high mortality risk to the mother and unborn child. They noted that women with FCS who become pregnant are usually hospitalised for the duration of their pregnancy and undergo plasmapheresis.
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If separate consideration is given to women who are or who are considering becoming pregnant, this could potentially lead to equality issues on the basis of a number of protected characteristics (including, among others, gender, sex and age).
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There was also suggestion that women taking oral contraceptives (which can increase triglyceride levels) should be considered as a separate subgroup.

Consultees noted that familial chylomicronaemia syndrome is more prevalent in south eastern Asian communities.
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| 2. What is the preliminary view as to what extent these potential equality issues need addressing by the committee? |
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Following the scoping workshop, it was agreed that, if appropriate, consideration may be given to the impact of the disease on people who are

or wish to become pregnant, any such consideration will take into account any relevant equality issues.

It was also agreed that, if appropriate, consideration may be given to whether factors contributing to or exacerbating hypertriglyceridemia are associated with characteristics that are protected under equality legislation (for example, but not limited to, women using oral contraceptives).

The prevalence of the condition in south eastern Asian communities is not an equalities issue that needs addressing by the committee: any recommendations would apply equally regardless of ethnic origin.

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

If appropriate, consideration may be given to the impact of the disease on people who are or wish to become pregnant; any such consideration will take into account any relevant equality issues.

If appropriate, consideration may be given to whether factors contributing to or exacerbating hypertriglyceridemia are associated with characteristics that are protected under equality legislation (for example, but not limited to, women using oral contraceptives).

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 have been identified.

Approved by Associate Director (name): Sheela Upadhyaya

Date: 16/04/2018