

NATIONAL INSTITUTE FOR HEALTH AND CARE EXCELLENCE

INTERVENTIONAL PROCEDURES PROGRAMME

Equality impact assessment

IPG523 Ultrasound-enhanced, catheter-directed thrombolysis for deep vein thrombosis

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

Scoping

1. Have any potential equality issues been identified during the scoping process (development of the scope or discussion at the Committee meeting), and, if so, what are they?

Deep vein thrombosis (DVT) is more common in men, and in women who are pregnant, on contraceptive pills or on hormone replacement therapy. About 1 in 1,000 pregnant women have a DVT while pregnant, or within six months after delivery.

The incidence of DVT increases with age: for people under 40 years the annual incidence of DVT is 1 in 10,000, whereas for people over 80 years the incidence rises to 1 in 100 due to serious illness or poor mobility. The risk of recurrence increases with time and half of the patients with DVT will go on to develop a pulmonary embolism.

The incidence is higher in African Americans than it is in white people and Asians.

People with severe mobility impairments or serious illness and at higher risk of DVT are covered under disability in the Equality Act. People presenting with a DVT without a pre-existing impairment are only likely to be covered under disability in the Equality Act if their condition has a substantial adverse impact on day to day activities for longer than 12 months, or is likely to do so.

2. What is the preliminary view as to what extent these potential equality issues need addressing by the Committee? If there are exclusions listed in the scope (for example, populations, treatments or settings), are these justified?

This was not thought to have an impact on the assessment of the procedure.

3. Has any change to the scope (such as additional issues raised during the Committee meeting) been agreed to highlight potential equality issues?

No

Consultation

1. Have the potential equality issues identified during the scoping process been addressed by the Committee, and, if so, how?

No specific data relating to the potential equality issues were identified in the literature presented in the overview.

2. Have any other potential equality issues been raised in the overview, specialist adviser questionnaires or patient commentary, 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 a technology or intervention compared with other groups? If so, what are the barriers to access for the specific group?

No

5. Are there any recommendations or explanations that the Committee could make to remove or alleviate barriers to access identified in question 4, or otherwise fulfil NICE's obligation to promote equality?
Not applicable

6. Have the Committee's considerations of equality issues been described in the consultation document, and, if so, where?
No

Final interventional procedures document

1. Have any additional potential equality issues been raised during the consultation, and, if so, how has the Committee addressed these?
No

2. If the recommendations have changed after consultation, are there any recommendations that make it more difficult in practice for a specific group to access a technology or intervention compared with other groups? If so, what are the barriers to access for the specific group?
Not applicable

3. If the recommendations have changed after consultation, are there any recommendations or explanations that the Committee could make to remove or alleviate barriers to access identified in question 2, or otherwise fulfil NICE's obligations to promote equality?
Not applicable

4. Have the Committee's considerations of equality issues been described in the final interventional procedures document, and, if so, where?
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No

Approved by Programme Director: Mirella Marlow

Date: 31 March 2015