

NATIONAL INSTITUTE FOR HEALTH AND CARE EXCELLENCE

INTERVENTIONAL PROCEDURES PROGRAMME

Equality impact assessment

IPG723 Liposuction for chronic lymphoedema

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

Briefing

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

- Sex: Secondary lymphoedema occurs more frequently in women, possibly because it can sometimes be a side effect of breast cancer treatment.
- Disability: people with lymphoedema because of cancer treatment will be covered under disability in the Equality Act 2010 from point of cancer diagnosis. Other individuals with lymphoedema may be covered under disability in the Equality Act 2010 if their symptoms have had a substantial adverse effect on day to day activities for longer than 12 months.

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 brief (for example, populations, treatments or settings), are these justified?)

This was not thought to have an impact on the assessment of the procedure. No exclusions were applied.

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

No.

4. Have any additional stakeholders related to potential equality issues been identified during the committee meeting, and, if so, have changes to the stakeholder list been made?

No.

Kevin Harris

Approved by Programme Director and Clinical Advisor

Date: 25/02/2022

Consultation

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

- Sex: of the studies included in the overview, the proportion of patients that were female ranged from 80% to 100%.
- Disability: 2 studies included only people who had breast-cancer related lymphoedema, 2 studies included some people who had breast-cancer related lymphoedema.

Note: 2 systematic reviews were included that do not report the proportion of male/female patients or the lymphoedema aetiology of included studies.

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?

- Primary lymphoedema can arise from genetic conditions that affect the development and functioning of the lymphatic system.
- In the studies included in the overview, the proportion of people who had primary lymphoedema ranged from 10% to 58%. Some of these people had a congenital aetiology.

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, 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?

Not applicable.

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 obligation to promote equality?

Not applicable.

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

Kevin Harris

Approved by Programme Director and Clinical Advisor

Date: 25/02/2022

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?
One consultee noted that the most common form of lymphoedema in the UK is lymphoedema secondary to obesity, and that breast-cancer related lymphoedema accounts for approximately 37% of cases.

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, or difficulties with, access for the specific group?
Not applicable.

3. If the recommendations have changed after consultation, 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?
Not applicable.

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

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

Anastasia Chalkidou

Associate Director

Date: 02/03/2022