

# NATIONAL INSTITUTE FOR HEALTH AND CARE EXCELLENCE

## INTERVENTIONAL PROCEDURES PROGRAMME

### Equality impact assessment

#### IPG739 Neurostimulation of lumbar muscles for refractory non-specific chronic low back pain

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?

**Age:** Studies have shown that the risk of low back pain increases as a patient gets older, but once one reaches the age of about 65 the risk stops increasing. Back pain is the most frequent cause of the limitation of activity in people younger than 45 years of age. Low back pain is common in working-age adults (particularly between the ages of 40 and 60 years).

**Gender:** Some studies have shown that males are at greater risk for low back pain, while other studies suggest that females are more likely to develop this type of pain. Women who have had two or more pregnancies have a higher risk of developing low back pain. According to the Health survey for England 2011, back pain was responsible for 37% of all chronic pain in men and 44% in women.

**Disability:** Low back pain is the leading cause of disability in the UK. Patients with chronic low back pain may be covered by the Equality Act 2010 if their symptoms have a substantial adverse effect on day to day activities for longer than 12 months.

No data available from standard IP sources on ethnicity, socioeconomic status, sexual orientation, and gender reassignment.

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:** 02/08/2022

## **Consultation**

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

Not applicable

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, 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:** 01/08/2022

**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?
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, 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**

**Approved by Associate Director**

**Date: 1/8/2022**