

**NATIONAL INSTITUTE FOR HEALTH AND CARE  
EXCELLENCE**

**HEALTH TECHNOLOGY APPRAISAL PROGRAMME**

**Equality impact assessment – Scoping**

**MTA TNF-alpha inhibitors for ankylosing spondylitis  
and axial spondyloarthritis without radiographic  
evidence of ankylosing spondylitis (including a review  
of technology appraisal 143 and technology appraisal  
233)**

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?

Consultees raised the following potential equality issues:

- Ankylosing spondylitis has a higher prevalence in men than in women whereas the prevalence of non-radiographic axial spondyloarthritis is similar in men and women, so it is important to assess the gender impact of any recommendations made for ankylosing spondylitis and non-radiographic axial spondyloarthritis.
- Prescribing TNF-alpha inhibitors requires radiographic sacroiliitis to be present. Because ankylosing spondylitis (which is associated with radiographic disease) is less common in women than in men, women with axial spondyloarthritis can be denied effective treatment.
- People with severe disease are currently not allowed to switch to alternate treatment with TNF-alpha inhibitor if their disease does not respond to one TNF-alpha inhibitor.

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

Any recommendations will be within the marketing authorisation for the technologies under consideration. The Committee will not discriminate between male and female patients and will ensure that any recommendations do not discriminate against any groups protected under the Equality Act.

All TNF-alfa inhibitors licensed to treat ankylosing spondylitis or non-radiographic axial spondyloarthritis will be considered by the Committee. If the evidence allows, sequential use of treatments will also be considered.

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

No changes to the draft scope are required.

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 related to potential equality issues have been identified during the scoping process.

**Approved by Associate Director (name):** .....Janet Robertson.....

**Date:** 08 April 2014