

NATIONAL INSTITUTE FOR HEALTH AND CARE EXCELLENCE

HEALTH TECHNOLOGY APPRAISAL PROGRAMME

Equality impact assessment – Guidance development

STA Sofosbuvir-velpatasvir for treating chronic hepatitis C

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

Consultation

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

During the scoping process, it was noted that hepatitis C virus (HCV) disproportionately affects certain populations such as certain immigrant populations, prison populations, and drug users, which can lead to poor quality care and potential discrimination in these groups.

The committee understood that any recommendations on the use of sofosbuvir-velpatasvir would be irrespective of whether or not the person is in prison, or uses injectable drugs.

The committee discussed equality issues regarding minority ethnic populations, and agreed that its recommendations do not have a different impact on people protected by the equality legislation than on the wider population (see question 2 below).

2. Have any other potential equality issues been raised in the submissions, expert statements or academic report, and, if so, how has the committee addressed these?

The equality issues raised in the company and professional group submissions reflected the issues raised during the scoping process. In addition, these submissions provided specific details about disproportionate representation of hepatitis C in minority ethnic groups. The submissions specified that there are proportionately more people from Asian and minority

ethnic groups in the genotype 3 HCV and genotype 4 HCV populations than in other HCV genotypes. The committee considered whether its recommendations could have a different impact on people protected by the equality legislation than on the wider population. Having decided that sofosbuvir-velpatasvir should be recommended for HCV genotypes 3 and 4, the committee agreed that its recommendations for these subgroups do not have a different impact on people from Asian and minority ethnic groups than on the wider population.

3. Have any other potential equality issues been identified by the committee, and, if so, how has the committee addressed these?

Having concluded that it could not recommend sofosbuvir-velpatasvir as a cost-effective use of NHS resources in 1 subgroup (untreated genotype 2 HCV in people without cirrhosis, who can have interferon) the committee considered whether this could have a different impact on people from Asian and minority ethnic groups. The committee was aware, from the evidence discussed during a previous technology appraisal for hepatitis C, that the proportion of people with this protected characteristic was not disproportionately higher in genotype 2 HCV compared with other genotypes. It also noted that the ICER for sofosbuvir-velpatasvir compared with peginterferon alpha in untreated genotype 2 HCV without cirrhosis was substantially higher than £20,000 per QALY gained (ranging from £35,100 to £39,800). Based on the evidence presented, the committee agreed that its recommendations were fair and concluded that no further consideration of potential equality issues was needed to meet NICE's obligation to promote equality of access to treatment.

4. Do the preliminary recommendations make it more difficult in practice for a specific group to access the technology 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?

No.

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 obligations to promote equality?

Not applicable.

7. Have the committee's considerations of equality issues been described in the appraisal consultation document, and, if so, where?

Yes, they are described in section 4 and the table summarising the committee's key conclusions.

Approved by Associate Director (name): Helen Knight

Date: 19/09/2016

Final appraisal determination

(when an ACD issued)

1. Have any additional potential equality issues been raised during the consultation, and, if so, how has the committee addressed these?

No additional potential equality issues were raised during the consultation.

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 the technology compared with other groups? If so, what are the barriers to, or difficulties with, access for the specific group?

Not applicable (recommendations did not change)

3. If the recommendations have changed after consultation, is there potential for the 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 appraisal determination, and, if so, where?

Yes, they are described in section 4 and the table summarising the committee's key conclusions.

Approved by Centre or Programme Director (name): Meindert Boysen

Date: 06/12/2016