

NATIONAL INSTITUTE FOR HEALTH AND CARE EXCELLENCE

HEALTH TECHNOLOGY APPRAISAL PROGRAMME

Equality impact assessment – Scoping

STA arsenic trioxide for acute promyelocytic leukaemia

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

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| 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? |
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Comments received at consultation suggest that the following sub groups require separate consideration:

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| <ul style="list-style-type: none">• People who have secondary APL after a previous cancer• Jehovah's witnesses for whom chemotherapy is not suitable |
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| 2. What is the preliminary view as to what extent these potential equality issues need addressing by the committee? |
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The first group does not represent a potential equality issue, but the efficacy of treatment could be considered separately in the economic analysis.

As blood support or HST treatment is not acceptable to some religious groups such as Jehovah's witnesses the relevant comparator in these patients is best supportive care. If the evidence does not support committee recommendation because the ICER is beyond what is normally considered cost effective the committee should consider whether a higher ICER is acceptable to promote access to treatment in this protected group.

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| 3. Has any change to the draft scope been agreed to highlight potential equality issues? |
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No

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?

A Jehovah's witness group has been added to the commentators in the provisional matrix.

Approved by Associate Director (name): ...Frances Sutcliffe.....

Date: 12/10/2017