NATIONAL INSTITUTE FOR HEALTH AND CARE EXCELLENCE

HEALTH TECHNOLOGY APPRAISAL PROGRAMME

Equality impact assessment – Guidance development

MTA adalimumab, etanercept, infliximab and abatacept for moderate rheumatoid arthritis after conventional DMARDs only have failed (partial review of TA375)

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?
Not applicable.	

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?
Stakeholders highlighted that people with moderate rheumatoid arthritis may be protected under the Equality Act 2010 (disability) and that BAME populations may not have had access to equal care, opportunity and treatment. The committee agreed no adjustment to the recommendations are needed to address these potential inequality issues.	

3.	Have any other potential equality issues been identified by the committee, and, if so, how has the committee addressed these?
Technology appraisal guidance 665 (Upadacitinib for treating severe rheumatoid arthritis) highlighted that it may be more difficult to use DAS28 measure to assess outcomes for people who have difficulty communicating.	

The committee recommended that when using the DAS28, healthcare professionals should take into account any physical, psychological, sensory or learning disabilities, or communication difficulties that could affect the responses to the DAS28 and make any adjustments they consider appropriate.

A patient expert explained that certolizumab pegol is often preferred to treat rheumatoid arthritis in women who are planning to start a family or who are pregnant. They described how not having this as a treatment option for people with moderate disease could potentially discriminate against women of childbearing age. The committee concluded that this issue could not be addressed in this technology appraisal - it was unable to make any recommendations on the use of certolizumab pegol in people with moderate disease because the manufacturer chose not to participate in the review.

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 - Section 1.5 (recommendation) and sections 4.11 to 4.12 (description of the equality issues raised)	

Approved by Associate Director (name): Ross Dent

Date: 23/03/21

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?

Potential equality issues were raised suggesting that not recommending etanercept disproportionately affects groups with protected characteristics:

- Etanercept is less likely to activate latent TB. This may be more prevalent in people from South Asian backgrounds
- People wishing to conceive, because etanercept does not need to be stopped as far in advance as adalimumab and infliximab.

Etanercept is now recommended.

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?

No

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?
No	

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?
No	

5.	Have the committee's considerations of equality issues been described in the final appraisal determination, and, if so, where?
Yes, the issues noted in 1 above are described in section 3.9 and 3.12 of the FAD.	

Approved by Associate Director (name): Ross Dent

Date: 28/05/2021