

NATIONAL INSTITUTE FOR HEALTH AND CARE EXCELLENCE

HEALTH TECHNOLOGY APPRAISAL PROGRAMME

Equality impact assessment – Guidance development

STA Difelikefalin for treating pruritus in people having haemodialysis

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

Final draft guidance

(when no draft guidance was issued)

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| 1. Have the potential equality issues identified during the scoping process been addressed by the committee, and, if so, how? |
| No equality issues were identified during the scoping process |

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| 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 company submission identified the following equality issues: <ul style="list-style-type: none">• People in lower socio-economic groups are more likely to develop chronic kidney disease (CKD), progress towards kidney failure, and die earlier with CKD• People who are from black, Asian and minority ethnic family backgrounds are more likely to progress to kidney failure faster and less likely to receive a transplant• Women are more likely to be diagnosed with CKD, but less likely to start dialysis and |

- Older people with CKD who are less likely to have a kidney transplant compared to younger people.

It noted difelikefalin is restricted for in-centre haemodialysis use, which may be considered a barrier for people that find in-centre haemodialysis less accessible.

The submission from Kidney Research UK stated chronic kidney disease disproportionately affects people from deprived communities and ethnic minority groups. People in these groups can progress faster to end stage renal failure. Fewer kidney patients are from deprived communities and treated with peritoneal dialysis, and more patients will have haemodialysis. So there are likely to be proportionally more people in this group with pruritus who are likely to benefit from treatment with difelikefalin.

The committee considered one advantage of difelikefalin might be to lessen that burden and therefore help reduce health inequalities.

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

The company submission identified the following equality issues:

- People in lower socio-economic groups are more likely to develop chronic kidney disease (CKD), progress towards kidney failure, and die earlier with CKD
- People who are from black, Asian and minority ethnic family backgrounds are more likely to progress to kidney failure faster and less likely to receive a transplant
- Women are more likely to be diagnosed with CKD, but less likely to start dialysis and
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4. Do the 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- not applicable.

5. 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.

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 final draft guidance, and, if so, where?

Yes in section 3.17 of the final draft guidance.

Approved by Associate Director (name): Henry Edwards

Date: 10/03/2023