

# NATIONAL INSTITUTE FOR HEALTH AND CARE EXCELLENCE

## HEALTH TECHNOLOGY APPRAISAL PROGRAMME

### Equality impact assessment – Guidance development

#### **STA Tisagenlecleucel for treating relapsed or refractory B-cell acute lymphoblastic leukaemia in people aged up to 25 years (MA review of TA554)**

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#### **Final draft guidance**

(when no draft guidance was issued)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? |
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During the scoping consultation it was noted that people from ethnic minority backgrounds are less likely to find a suitable allogeneic stem cell match, and that access to tisagenlecleucel may address this. The committee discussed this but noted that a technology appraisal cannot change how suitable matches for allo-SCT are identified and so, it is not a potential equality issue that can be addressed by the committee.
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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? |
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It was noted that because brexucabtagene autoleucel is now available through the CDF for relapsed or refractory B-ALL in people 26 years and over (see <a href="#">NICE technology appraisal guidance on brexucabtagene autoleucel</a> ), there is a high unmet need for CAR T-cell therapies in people aged up to 25. The committee recognised that having continued access to
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Technology appraisals: Guidance development

Equality impact assessment for the single technology appraisal of tisagenlecleucel for treating relapsed or refractory B-cell acute lymphoblastic leukaemia in people aged up to 25 years (MA review of TA554)

Issue date: April 2024

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tisagenlecleucel would help resolve an unmet need in this age range. Age is a protected characteristic under the Equality Act 2010. But, because the recommendation does not restrict access to treatment for some people over others, the committee concluded that there were no equality issues relevant to this review.

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

None identified.

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?

It is not anticipated that the recommendation will make it more difficult in practice for a specific group to access the technology. It was raised that there can be difficulties travelling to CAR-T centres, but this is not anticipated to differentially affect groups with protected characteristics.

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?

None identified.

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?

N/A.

7. Have the committee's considerations of equality issues been described in the final draft guidance, and, if so, where?

Equalities are discussed in section 3.15 of the draft guidance.

**Approved by Associate Director (name):** Ross Dent

**Date:** 25/03/2024