

NATIONAL INSTITUTE FOR HEALTH AND CARE EXCELLENCE

Single Technology Appraisal

Equality impact assessment – Scoping

Tisagenlecleucel for treating relapsed or refractory B-cell acute lymphoblastic leukaemia in people aged up to 25 years (MA review of TA554) [ID6290]

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

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?

The scoping process for TA554 identified a potential equalities issue raised during consultation for another appraisal; comments noted that people who are part of religious groups such as Jehovah's witnesses who do not accept blood support or haematopoietic stem cell transplant. People from these groups would normally have best supportive care. The committee considered this potential issue but deemed it not an equalities issue because people can chose whether or not they wish to have tisagenlecleucel.

No other issues were identified in TA554.

Several issues were raised during this scoping consultation:

- Not every patient will be suitable or have access to allogeneic stem cell transplant. This includes people from ethnic minority backgrounds who have fewer chances of finding a suitable match. Stem cell transplant is currently the only potentially curative treatment for people with relapsed or refractory acute lymphoblastic leukaemia. Therefore, people from ethnic minority backgrounds may be disadvantaged if alternative treatments such as tisagenlecleucel are not routinely commissioned. The committee for TA893 (where this issue was identified also) acknowledged that a technology appraisal cannot change how suitable matches for allogeneic stem cell transplant are identified. Therefore, it concluded that this issue

could not be addressed in a technology appraisal with the given information available at this time.

- There is high unmet need for a CAR-T in this population of people aged up to 25 years. Patients aged 26 and over now have access to brexucabtagene autoleucel (TA893) through the Cancer Drugs Fund. The committee noted that NICE can only make recommendations within the marketing authorisation for a technology.

2. What is the preliminary view as to what extent these potential equality issues need addressing by the Committee?

As with TA554 and TA893, the above issues are unlikely to be considered equalities issues.

3. Has any change to the draft scope been agreed to highlight potential equality issues?

No change needed.

4. Have any additional stakeholders related to potential equality issues been identified during the scoping process, and, if so, have changes to the stakeholder list been made?

No.

Approved by Associate Director (name): Jasdeep Hayre
August 2023

Date: 7