



Equality and Health Impact Assessment

Budesonide (Jorveza®) for maintaining remission of eosinophilic oesophagitis in adults.

AWTTC fill in an Equality and Health Impact Assessment in parallel with each development stage of our projects. This will help us to follow the five ways of working for public bodies, and work to achieving the wellbeing goals, outlined in the Well-Being of Future Generations (Wales) Act 2015.

Date: 16/01/2026

1.	AWTTC contact details	Tel: 02921 826900 Email: awttc@wales.nhs.uk
2.	State the objectives of the project.	<p>AWTTC will prepare an evidence summary report (ESR) for a limited AWSMG assessment for the use of orodispersible budesonide (Jorveza®) for maintaining remission of eosinophilic oesophagitis (EoE) in adults.</p> <p>NICE guidance (TA 108) recommends orodispersible budesonide for inducing remission of EoE in adults; but NICE has not published guidance for its use as maintenance treatment. Orodispersible budesonide is recommended for maintaining remission of EoE in a joint consensus guideline developed by the British Society of Gastroenterology (BSG) and British Society of Paediatric Gastroenterology, Hepatology and Nutrition (BSPGHAN). There is published evidence that orodispersible budesonide is likely to be a clinically effective intervention for this indication.</p> <p>The ESR produced by AWTTC will focus on: clinical evidence from a submission from the pharmaceutical company (marketing authorisation holder for Jorveza®), and a literature search by AWTTC; feedback from clinicians in Wales, and an estimation of the budget impact. AWTTC will request the views of patient organisations relevant to this condition.</p>



		<p>AWTTC will send the ESR to the pharmaceutical company and to clinicians for comment. Clinicians, company representatives and patient organisation representatives are invited to attend the Licensed One Wales Medicines Assessment Group (LOWMAG) meeting. The LOWMAG constitution is available online.</p>
<p>3.</p>	<p>Evidence and background information considered. For example:</p> <ul style="list-style-type: none">• population data• staff and service users' data, as applicable• needs assessment• engagement and involvement findings• research• good practice guidelines• participant knowledge• list of stakeholders and how stakeholders have engaged in the development stages• comments from those involved in the designing and development stages <p>Population pyramids are available from Public Health Wales Observatory.</p>	<p>Eosinophilic oesophagitis (EoE) is considered a rare condition. In 2021, the estimated prevalence and annual incidence rates in England were Wales are 12.8 and 2.07 per 100,000 population, respectively (NICE Single Technology Appraisal ID1202). However, evidence suggests that the prevalence of EoE is increasing globally (Hahn et al., 2023).</p> <p>EoE is a chronic inflammatory condition of the oesophagus which is diagnosed in adults and children presenting with dysphagia or food bolus obstruction (BSG and BSPGHAN joint consensus guidelines on the diagnosis and management of eosinophilic oesophagitis in children and adults, 2022).</p> <p>The BSG/BSPGHAN guidelines recommend dietary or pharmacological interventions to induce remission of EoE in adults. Pharmacological therapies include proton pump inhibitors and topical corticosteroids, including orodispersible budesonide. Due to the high risk of relapse following withdrawal of topical corticosteroids, the BSG/BSPGHAN guidelines recommend orodispersible budesonide for maintaining remission of EoE in adults. Orodispersible budesonide (Jorveza[®]) is licensed for the induction and maintenance of EoE remission in adults.</p> <p>For maintaining EoE remission, the licensed dose of orodispersible budesonide is 0.5 mg or 1 mg twice daily, with the higher dose recommended for patients with long standing disease history and/or a high extent of oesophageal inflammation in their acute disease state (Summary of Product Characteristics; SmPC). The duration of maintenance therapy is determined by the clinician.</p>



		<p>Clinical trials by Straumann et al. (2020) and Biedermann et al. (2025) evaluated the effectiveness of orodispersible budesonide for maintaining remission of EoE in adults. Straumann et al. demonstrated that patients receiving maintenance treatment with orodispersible budesonide were significantly less likely to relapse than those who did not receive orodispersible budesonide maintenance therapy. Building on this, the Biedermann et al. trial showed that continued maintenance treatment resulted in prolonged remission over an extended period of time. The adverse events reported by both studies were generally mild, such as oral thrush. The adverse events were consistent with the known safety profile of orodispersible budesonide as stated in the SmPC.</p>
4.	Who will this project affect?	Adults with eosinophilic oesophagitis and their families and carers, and healthcare workers caring for them.

5. EQIA - How will the project impact on people?

Questions in this section relate to the impact on people based on the 'protected characteristics' of the Equality Act 2010, and other factors.

How will the project impact on, or affect:	Potential positive and/or negative impacts	Recommendations for improvement/ mitigation	Actions taken (and who by).
<p>5.1 Age For most purposes, the main categories are people aged:</p> <ul style="list-style-type: none"> • under 18 years; • between 18 and 65 years; • over 65 years. 	<p>We do not expect a potential negative, or unequal, impact on people based on their age.</p> <p>[Note: For prescription medicines we expect the prescriber to have prescribed or advised their use within the terms of their UK marketing authorisations. Healthcare professionals should take note of the contraindications, warnings, safety recommendations and any monitoring needs for the medicine. These are explained in the Summary of Product Characteristics (SmPC) for the medicine or the British National Formulary.</p>	<p>Any patient-facing resources produced will be provided on the AWTTC website in accessible formats that can be printed.</p>	<p>N/A</p>



How will the project impact on, or affect:	Potential positive and/or negative impacts	Recommendations for improvement/ mitigation	Actions taken (and who by).
5.2 Persons with a disability as defined in the Equality Act 2010 Those with physical impairments, learning disability, sensory loss or impairment, mental health conditions, long-term medical conditions such as diabetes.	We do not expect a potential negative, or unequal, impact on people with a disability.	All related documents published on the AWTTC website will meet accessibility requirements. Any patient-facing materials will also be produced in easy read formats in Welsh and English.	N/A
5.3 People of different genders: Consider men, women, people undergoing gender reassignment. N.B. Gender-reassignment is anyone who proposes to, starts, is going through or who has completed a process to change his or her gender with or without going through any medical procedures. Sometimes referred to as Trans or Transgender.	We do not expect a potential negative, or unequal, impact on people based on their gender, or on people undergoing gender reassignment.	N/A	N/A
5.4 People who are married or who have a civil partner.	We do not expect a potential negative, or unequal, impact on people based on their marital status or being in a civil partnership.	N/A	N/A



How will the project impact on, or affect:	Potential positive and/or negative impacts	Recommendations for improvement/ mitigation	Actions taken (and who by).
<p>5.5 Women who are expecting a baby, who are on a break from work after having a baby, or who are breastfeeding. They are protected for 26 weeks after having a baby whether or not they are on maternity leave.</p>	<p>We do not expect a potential negative, or unequal, impact on women who are expecting a baby, are breastfeeding, or are on a break from work after having a baby.</p> <p>Administration of Jorveza[®] should be avoided during pregnancy, unless there are compelling reasons for therapy. Please refer to the SmPC for further details.</p> <p>The manufacturer of orodispersible budesonide (Jorveza[®]) advises that only minor effects on the breast-fed child are anticipated after oral use of Jorveza[®] within the therapeutic range. A decision must be made whether to discontinue breastfeeding or to discontinue/abstain from Jorveza[®] therapy, taking into account the benefit of</p>	<p>Prescribers should take account of the Summary of Product Characteristics (SmPC) when prescribing any medicines for women who are pregnant, or who are breastfeeding.</p>	<p>The SmPC criteria specify which people are excluded from treatment due to the associated risks of treatment. This will be identified for consideration of any change to the advice at the next review if there is a change to the current advice for pregnant and breastfeeding women.</p>



How will the project impact on, or affect:	Potential positive and/or negative impacts	Recommendations for improvement/ mitigation	Actions taken (and who by).
	breastfeeding for the child and the benefit of therapy for the woman. Please refer to the SmPC for further details.		
5.6 People of a different race, nationality, colour, culture or ethnic origin including non-English speakers, gypsies and travellers, migrant workers. The Runnymede Trust	We do not expect a potential negative, or unequal, impact on people of a different race, nationality, colour, culture or ethnic origin. People of different race and ethnicities can have varying responses to medicines.	Note in the project document that people of different race and ethnicities can have varying responses to medicines. Any patient information leaflets produced will be available in Welsh and English.	N/A
5.7 People with a religion or belief or with no religion or belief. The term 'religion' includes a religious or philosophical belief. Implications of religious beliefs on selection of medicines (BMJ) In practice: guidance on religion, personal values and beliefs (General Pharmaceutical Council)	We do not expect a potential negative, or unequal, impact on people who have a religion or belief, or people with no religion or belief. Some medicines are made from certain animal products and people might not want to take them because of religion or belief.	N/A	N/A



How will the project impact on, or affect:	Potential positive and/or negative impacts	Recommendations for improvement/ mitigation	Actions taken (and who by).
5.8 People who are attracted to other people of: <ul style="list-style-type: none">• the opposite sex (heterosexual);• the same sex (lesbian or gay);• both sexes (bisexual). Stonewall	We do not expect a potential negative, or unequal, impact on people based on who they are attracted to.	N/A	N/A
5.9 People who communicate using the Welsh language in terms of correspondence, information leaflets, or service plans and design.	We do not expect a potential negative, or unequal, impact on people who communicate using the Welsh language. Any patient-facing materials will be produced in Welsh and English, in line with the Welsh language standards, including easy read booklets.	Any patient-facing materials will be produced in Welsh and English, in line with the Welsh language standards, including easy read booklets. These will be provided on the AWTTC website in accessible formats that can be printed.	N/A
5.10 People according to their income related group.	We do not expect a potential negative, or unequal, impact on people based on their income-related group. In Wales, all prescription medicines are free-of-charge for patients; positive recommendations through this project will not affect people	N/A	N/A



How will the project impact on, or affect:	Potential positive and/or negative impacts	Recommendations for improvement/ mitigation	Actions taken (and who by).
	depending on their income-related group.		
5.11 People according to where they live.	We do not expect a potential negative, or unequal, impact on people based on where they live.	N/A	N/A
5.12 Consider others who face health inequalities, such as: <ul style="list-style-type: none">• Looked after and accommodated children and young people• Carers: paid/unpaid, family members• People who are homeless or those who experience homelessness: people on the street; those staying temporarily with friends/family; those in hostels/B&Bs• People involved in the criminal justice system: offenders in prison or on probation, ex-offenders• People with addictions and substance misuse problems• People who have poor literacy	We do not expect a potential negative, or unequal, impact on people who face health inequalities.	N/A	N/A



How will the project impact on, or affect:	Potential positive and/or negative impacts	Recommendations for improvement/ mitigation	Actions taken (and who by).
<ul style="list-style-type: none">• People living in remote, rural and island locations			
5.13 Consider any other groups and risk factors relevant to this project.	N/A	N/A	N/A

6. HIA - How will the project impact on the health and wellbeing of people in Wales and help address inequalities in health?

Questions in this section relate to the impact on the overall health of individual people, and the impact on the population in Wales.

How will the project impact on, or affect:	Potential positive and/or negative impacts and any particular groups affected	Recommendations for improvement/ mitigation	Actions taken (and who by) <i>Refer to where the mitigation is included in the document, as appropriate.</i>
6.1 People being able to access the service offered.	We do not expect a potential negative, or unequal, impact on people's ability to access the service offered.	N/A	N/A
6.2 People being able to improve or maintain healthy lifestyles.	We do not expect a potential negative, or unequal, impact on people's ability to improve or maintain healthy lifestyles.	N/A	N/A
6.3 People in terms of their income and employment status.	We do not expect a potential negative, or unequal, impact on people in terms of their income and employment status.	N/A	N/A
6.4 People in terms of their use of the physical environment.	We do not expect a potential negative, or unequal, impact on people's use of the physical environment.	N/A	N/A
6.5 People in terms of social and community influences on their health.	We do not expect a potential negative, or unequal, impact on people in terms of social and community influences on their health.	N/A	N/A



How will the project impact on, or affect:	Potential positive and/or negative impacts and any particular groups affected	Recommendations for improvement/ mitigation	Actions taken (and who by) <i>Refer to where the mitigation is included in the document, as appropriate.</i>
6.6 People in terms of macro-economic, environmental and sustainability factors.	We do not expect a potential negative, or unequal, impact on people in terms of macroeconomic, environmental and sustainability factors.	N/A	N/A

7. Please fill in section 7.1 after completing the EqHIA, and fill in the action plan.

<p>7.1 Please summarize the potential positive and/or negative impacts of the project.</p>	<p>No potential negative impacts identified.</p>
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Action plan for mitigation or improvement and implementation

	Action	Lead(s)	Timescale	Actions taken (<i>state who by</i>)
<p>7.2 What are the key actions identified as a result of completing the EqHIA?</p>	<ul style="list-style-type: none"> • AWTTC to consult with clinical experts in Wales, patient organisations, patients and carers in Wales (or the UK) and invite comments through the AWTTC website or questionnaire by email • AWTTC to prepare an Evidence Summary Report (ESR) • Licensed One Wales Medicines Assessment Group (LOWMAG) meet to consider and make a recommendation to AWMSG. • AWMSG meet to consider and endorse the LOWMAG recommendation to Welsh 	<p>AWTTC</p>	<p>July 2025 – April 2026</p>	<p>Clinical experts consulted by AWTTC – July 2025–March 2026</p> <p>Patient organisations contacted by AWTTC – December 2025</p> <p>ESR prepared by AWTTC – March 2026</p>

	Action	Lead(s)	Timescale	Actions taken (state who by)
	Government about the use of orodispersible budesonide in Wales.			
7.3 Is a more comprehensive Equalities Impact Assessment or Health Impact Assessment needed?	No	N/A	N/A	
7.4 What are the next steps?	AWTTC conduct a limited assessment and submit an evidence summary report to the Licensed One Wales Medicines Assessment Group (LOWMAG).	AWTTC	March – April 2026	
7.5 Review of project and EqHIA		AWTTC	[TBC]	

AWTTC's EqHIA template is adapted from the Cardiff & Vale University Health Board EHIA template.