

Enc 6 Appx 6 Opicapone (Ongentys®) EIA

Medicine name: Opicapone (Ongentys®) 25mg and 50 mg hard capsules

Submission reference number: 5285

Indication: Adjunctive therapy to preparations of levodopa/DOPA decarboxylase inhibitors (DDCI) in adult patients with Parkinson's disease and end-of-dose motor fluctuations who cannot be stabilised on those combinations

New Medicines Group meeting date: 10 April 2024 All Wales Medicines Strategy Group (AWMSG) meeting date: 14 May 2024

The impact of this medicine on equality has been assessed during this appraisal.

Have any potential equality issues been identified for this medicine? If so, what are they?

People with Parkinson's disease can face discrimination due to negative attitudes and physical barriers. Opicapone may help to alleviate this discrimination because it helps to control symptoms of Parkinson's disease in some people.

Would the availability of the medicine result in different impacts for protected groups (age, gender, gender reassignment, disability, pregnancy and maternity, marriage or civil partnership, race, religion or belief, sexual orientation)?

Due to a lack of data opicapone is not recommended during pregnancy or in women of childbearing potential not using contraception.

Would it be more difficult in practice for a specific group to access the medicine, compared with other groups? If so, what are those barriers or difficulties? Are there any recommendations that AWMSG could make to remove or alleviate difficulties with access?

No. People will have access via NHS specialist providers.

How will any equality issues be addressed?

This will be identified for consideration at the next review if there is a change to the current advice

Does the medicine relate to an area with known health inequalities?





No

Is a full equality and health impact assessment needed?

No

Actions:

Patient organisations/patients/members of the public are invited to comment on the submission via the AWTTC website. The SmPC criteria specify which people are excluded from treatment due to the associated risks of treatment.

Approved by: Stuart Keeping (Appraisal Scientist) **Date:** 25/01/2024

Date of next review: DD/MM/YEAR