

Equality and Health Impact Assessment All Wales gabapentinoid resources for chronic pain

AWTTC will 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: 21/05/26

1.	AWTTC contact details	Tel: 02921 826900 Email: awttc@wales.nhs.uk
2.	State the objectives of the project.	The <i>All Wales gabapentinoid resources for chronic pain</i> are designed to support safe, effective, and evidence-based prescribing of gabapentin and pregabalin for chronic pain. The aims include: <ul style="list-style-type: none"> • Supporting shared decision-making between healthcare professionals and patients. • Providing clear, practical guidance on the initiation, monitoring, tapering, and deprescribing of gabapentinoids. • Promoting a holistic approach to chronic pain management. • Reducing inappropriate prescribing and addressing risks associated with misuse, dependence, and adverse effects.
3.	Evidence and background information considered. For example: <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 	This document has been developed in response to increasing concerns about the safety, misuse, and rising harms associated with gabapentinoids in Wales. These concerns are reflected in the growing number of deaths where pregabalin was mentioned on death certificates, alongside a substantial rise in gabapentinoid related enquiries reported to the Welsh National Poisons Unit. Gabapentin and pregabalin were introduced as a National Prescribing Indicator in 2017 and later reclassified as Class C, Schedule 3 controlled drugs. Multiple MHRA warnings have highlighted risks such as dependence, misuse, and respiratory depression. Despite this growing evidence base and clear variation in prescribing across Wales, there has previously been no national guidance to support prescribers in the safe and appropriate use of



	<ul style="list-style-type: none"> 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>	gabapentinoids for pain management. To address this gap, these first All Wales gabapentinoid resources for chronic pain were developed through extensive engagement with the All Wales Gabapentinoid Taskforce, a multidisciplinary group representing health boards, primary and secondary care, pain services, pharmacists, and substance misuse teams. Their collective expertise has aimed to ensure that the guidance is practical, clinically relevant, and designed to promote appropriate and safe prescribing across Wales.
4.	Who will this project affect?	<p>This project affects:</p> <ul style="list-style-type: none"> Healthcare professionals involved in pain management. Patients prescribed or being considered for gabapentinoids for chronic pain. Carers supporting individuals with chronic pain.

5.0 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>The project is expected to have a positive impact on older people, as chronic pain is more prevalent in this age group and gabapentinoids are commonly prescribed as part of its management. Older people may also be at increased risk of adverse effects, polypharmacy, and medication-related harm. The resources provide clear guidance on initiation, review, and deprescribing, supporting safer prescribing and more informed clinical decision-making. No negative impacts related to age have been identified.</p>	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).
5.2 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.	The project is expected to have a positive impact on people with disabilities, who may experience chronic pain and be prescribed gabapentinoids. The guidance supports safer prescribing and shared decision-making, with accessible patient materials available.	All related documents published on the AWTTC website will meet accessibility requirements. Any patient-facing materials will also be produced as easy read booklets in Welsh and English if requested.	
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
5.5 Women who are expecting a baby, who are on a break from work after having a baby, or who are breastfeeding.	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.	Prescribers should take account of the Summary of Product Characteristics (SmPC) when prescribing pregabalin and gabapentin for	The SmPC criteria specify which people are excluded from treatment due to the associated risks of treatment. This will be



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They are protected for 26 weeks after having a baby whether or not they are on maternity leave.	Manufacturers advise that pregabalin and gabapentin should not be used during pregnancy unless the potential benefit to the mother clearly outweighs the possible risk to the foetus.	women who are pregnant, or who are breastfeeding.	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.
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.	N/A	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 of 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 if requested.	
5.10 People according to their income related group.	<p>We do not expect a potential negative, or unequal, impact on people based on their income-related group.</p> <p>In Wales, all prescription medicines are free-of-charge for patients; positive recommendations through this project will not affect people depending on their income-related group.</p>	N/A	N/A
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 	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">• 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• 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

**6.0 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)
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. Improved pain management may support return to work.	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. Signposting to lifestyle interventions and social prescribing supports wellbeing	N/A	N/A
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

7.0 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>The introduction of the <i>All Wales gabapentinoid resources for chronic pain</i> is expected to have a broadly positive impact on clinical practice and patient care. By providing the first national guidance on the use of gabapentin and pregabalin for pain management, the resource aims to reduce variation in prescribing and support appropriate and more informed decision-making. Clear recommendations on initiation, review, and deprescribing are expected to improve prescribing safety and improve patient outcomes, particularly for groups at higher risk of harm. The inclusion of bilingual and accessible patient materials will support health literacy and more effective shared decision-making. No significant negative impacts have been identified, and the resource is designed to promote equity, clarity, and consistency across Wales.</p>
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Action plan for mitigation or improvement and implementation

	Action	Lead(s)	Timescale	Actions taken (state who by)
<p>7.2 What are the key actions identified as a result of completing the EqHIA?</p>	<p>The EqHIA highlighted the need to ensure that patient information is clear, accessible, and available in both Welsh and English.</p>	<p>AWTTC</p>		
<p>7.3 Is a more comprehensive Equalities Impact Assessment or Health Impact Assessment needed?</p>	<p>A more detailed EqHIA is not required.</p>	<p>N/A</p>	<p>N/A</p>	<p>N/A</p>
<p>7.4 What are the next steps?</p>	<p>Review guidance in 3 years</p>	<p>AWTTC</p>	<p>May 2029</p>	
<p>7.5 Review of project and EqHIA</p>	<p>TBC</p>	<p>AWTTC</p>	<p>Ongoing</p>	

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