

BREAST REDUCTION FOR GYNAECOMASTIA INDIVIDUAL FUNDING REQUEST POLICY

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Application Form	Generic IFR application form

INSERT NAME OF POLICY

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BREAST REDUCTION FOR GYNAECOMASTIA

VERSION CONTROL

Document Status:	CURRENT
Version:	1617.V2a

DOCUMENT CHANGE HISTORY		
Version	Date	Comments
V8e	April 2015	Remove from the Guidance for Clinicians Document to a separate policy document
1617.v1a	June 2016	Not commissioned policy adopted by the SCCG COG
1617.v2	July 2017	Change the CSU template to SCCG template

Equality Impact Assessment (EIA) Form OR EIA Screening Form completed. Date:	05/05/2016
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BREAST REDUCTION FOR GYNAECOMASTIA

Breast Reduction for Gynaecomastia is not routinely commissioned

General Principles

Funding approval will only be given in line with these general principles. Where patients are unable to meet these principles in addition to the specific treatment criteria set out in this policy, funding approval will not be given.

1. The CCG does not commission surgery for cosmetic purposes alone.
2. Funding approval must be secured by primary care prior to referring patients seeking corrective surgery.
3. Referring patients to secondary care without funding approval having been secured not only incurs significant costs in out-patient appointments for patients that may not qualify for surgery, but inappropriately raises the patient's expectation of treatment.
4. On limited occasions, the CCG may approve funding for an assessment only in order to confirm or obtain evidence demonstrating whether a patient meets the criteria for funding. In such cases, patients should be made aware that the assessment does not mean that they will be provided with surgery and surgery will only be provided where it can be demonstrated that the patients meets the criteria to access treatment in this policy.
5. Funding approval will only be given where there is evidence that the treatment requested is effective and the patient has the potential to benefit from the proposed treatment. Where it is demonstrated that patients have previously been provided with the treatment with limited or diminishing benefit, funding approval is unlikely to be agreed.
6. Patients should be advised that receiving funding approval does not confirm that they will receive treatment or surgery for a condition as a consent discussion will need to be undertaken with a clinician prior to treatment.
7. The policy does not apply to patients with suspected malignancy who should continue to be referred under 2 week wait pathway rules for assessment and testing as appropriate.
8. Patients with an elevated BMI of 30 or more are likely to receive fewer benefits from surgery and should be encouraged to lose weight further prior to seeking surgery. In addition, the risks of surgery are significantly increased. (Thelwall, 2015)
9. Patients who are smokers should be referred to smoking cessation services in order to reduce the risk of surgery and improve healing. (Loof S., 2014)
10. Where funding approval is given by the Individual Funding Panel, it will be available for a specified period of time, normally one year.

Background

What is Gynaecomastia

Gynaecomastia is a common condition which causes swelling in the breast area of boys and in men, making it larger than normal. It is most common in teenage boys and in older men. It can affect one or both sides and amount of extra tissue can vary. Sometimes the tissue can be tender or painful; however this is not always the case.

What are the causes?

- Hormone imbalance
- Obesity
- Oestrogen passing through the placenta can cause the condition in newborn boys; it is temporary
- Puberty
- Older age
- Other causes – in rare cases:
 - Side effects of medication
 - Illegal drugs
 - Drinking too much alcohol
 - A health abnormality
 - Klinefelter syndrome (a rare genetic disorder)
 - Lumps or infection in the testicles

Possible treatments for gynaecomastia

- surgery to remove the excess breast tissue
- medication to adjust a hormone imbalance

(NHS Choices, 2015)

Male breast reduction surgery

Male breast reduction surgery is usually carried out under general anaesthetic, and takes around 90 minutes or more to carry out. An incision is made around the nipple (areola) and liposuction may be used to remove excess fatty tissue. If there is a lot of tissue, cuts may extend down the chest from the nipple area and nipples may need to be repositioned.

Risks of surgery please refer to_(NHS Choices, 2014) (The British Association of Aesthetic Plastic Surgeons)

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1. Cancers are diagnosed in about 1% of cases of gynaecomastia. Where history or physical examination raises suspicion of cancer, urgent referral for further investigation should be made
2. **Breast reduction for gynaecomastia is not commissioned by the CCG**

Individual cases will be reviewed at the Commissioner's Individual Funding Panel upon receipt of a completed application form from the patient's GP, Consultant or Clinician.

Applications cannot be considered from patients personally.

Provided these patients receive the full support of their general practitioner, or clinician, in pursuing their funding request an application may be made to the Individual Funding Request Panel for consideration.

In order for funding to be agreed there must be some unusual or unique clinical factor about the patient that suggests that they are exceptional as defined below:

- Significantly different to the general population of patients with the condition in question.
- Likely to gain significantly more benefit from the intervention than might be expected from the average patient with the condition.

It is expected that clinicians will have ensured that the patient, on behalf of who they are forwarding the application for, is appropriately informed about the existing policies prior to an application to the IFRP. This will reassure the Panel that the patient has a reasonable expectation of the outcome of the application and its context.

If you would like further copies of this policy or need it in another format, such as Braille or another language, please contact the Patient Advice and Liaison Service on Telephone number: 08000 851067.

Or write to us: NHS Somerset Clinical Commissioning Group, Freepost RRKL-XKSC-ACSG, Yeovil, Somerset, BA22 8HR or **Email us:** somccg.pals@nhs.net

References

The following sources have been considered when drafting this policy:

NHS Choices. (2014, 01 07). *Breast reduction - male breast reduction*. Retrieved 04 28, 2016, from NHS Choices: <http://www.nhs.uk/Conditions/Breast-reduction/Pages/Malebreastreduction.aspx>

NHS Choices. (2015, 04 01). *What is gynaecomastia?* Retrieved 04 28 , 2016, from NHS Choices: <http://www.nhs.uk/chq/Pages/885.aspx?CategoryID=61>

The British Association of Aesthetic Plastic Surgeons. (n.d.). *Gynaecomastia*. Retrieved 04 28, 2016, from The British Association of Aesthetic Plastic Surgeons: <http://baaps.org.uk/procedures/gynecomastia>