

**BREAST AUGMENTATION SURGERY
INDIVIDUAL FUNDING REQUEST POLICY**

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Application Form	Generic IFR application form

BREAST AUGMENTATION SURGERY

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BREAST AUGMENTATION SURGERY

VERSION CONTROL

Document Status:	Current policy
Version:	1617.2

DOCUMENT CHANGE HISTORY		
Version	Date	Comments
V1	2010	Updated Guidance for Clinicians Policy Document
V8e	October 2015	Reviewed by the SCCG CCPF no amendments Removed from the SCCG Guidance for Clinicians Policy Document
1617.2	July 2017	Change of policy template from SWCSU template to SCCG

Equality Impact Assessment (EIA) Form OR EIA Screening Form completed. Date:	August 2015
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BREAST AUGMENTATION

Breast Augmentation is not routinely commissioned/funded by the CCG

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

Breast implant surgery, also referred to as breast augmentation or enlargement surgery, is a type of cosmetic surgery.

Breast implants can be used for cosmetic purposes, to enhance the size and shape of the breast, or for reconstructive purposes following a mastectomy (the surgical removal of the breast often as treatment for breast cancer). In general, breast implant surgery is undertaken for cosmetic reasons.

POLICY – IFR

1. Breast augmentation surgery is not routinely commissioned/funded as this procedure is considered cosmetic
2. Surgery to improve appearance and/or to correct natural changes such as those associated with ageing is not funded by the CCG
3. Breast surgery is not commissioned for surgery to the healthy breast tissue as this is cosmetic
4. Applications **will not be considered** under the following circumstances:
 - a) on cosmetic grounds
 - b) patients under the age of 18 years
 - c) patients who have not attained full breast development
 - d) to resolve possible psychological issues as there is no clinical evidence base to support this is effective in these circumstances
 - e) patients with a BMI <19 or >27
 - f) where weight loss has not been sustained for a minimum of 6 months at the current BMI of 27 or below
 - g) patients who have smoked/used nicotine replacement therapy over preceding 3 months *(Note 2)
 - h) who are pregnant or who have had a baby within the past 12 months
 - i) Breast surgery for patients on the gender dysphoria pathway is the commissioning responsibility of NHS England and is not subject to this policy

***Note 2:** The restriction to non-smokers relates to associated surgical complications and problems with healing as a result of the effects of nicotine on the peripheral circulation

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:

1. British Association of Plastic Reconstructive and Aesthetic Surgeons. (2015). Breast Augmentation. Retrieved 04 26, 2016, from British Association of Plastic Reconstructive and Aesthetic Surgeons: <http://www.bapras.org.uk/public-information/surgery-guides/breastenlargement>
2. NHS Choices. (2014, 07 09). Breast Implants. Retrieved 04 26, 2016, from NHS Choices: <http://www.nhs.uk/Conditions/Breastimplants/Pages/Introduction.aspx>
3. The British Association of Aesthetic Plastic Surgeons. (n.d.). Breast Augmentation. Retrieved 04 26, 2016, from The British Association of Aesthetic Plastic Surgeons: <http://baaps.org.uk/procedures/breast-augmentation>