Policy Statement

Aesthetic / Cosmetic Breast Surgery

Date (approved by CPDG): 2016-10-13

Great Yarmouth and Waveney CCG
North Norfolk CCG
Norwich CCG
South Norfolk CCG
West Norfolk CCG

Please check the Knowledge Anglia website http://nww.knowledgeanglia.nhs.uk/ for the latest version of this policy.
Equality Statement
The CCGs and the Clinical Policy Development Group (CPDG) are committed to ensuring equality of access and non-discrimination as enshrined in the Health and Social Care act 2012. In carrying out its functions, the CPDG will have due regard to the different needs of protected equality groups, in line with the Equality Act 2010. This document is compliant with the NHS Constitution and the Human Rights Act 1998.

Clinical Governance statement
It is important that the implementation of this policy is seen as an opportunity to encourage team working and cooperation between commissioners, primary and secondary care providers. Service Providers will be expected to collect and provide audit data on request as part of a professionally-led clinical review and audit cycle.

Exceptionality
For patients not meeting the policy criteria or where a treatment is not routinely funded, an application should be made to the Individual Funding Request (IFR) panel if the referrer considers that there are clinically exceptional circumstances. IFR policy and procedure documents can be found on Knowledge Anglia.
## Policy Statement

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<th>Aesthetic / Cosmetic Breast Surgery</th>
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Norfolk and Waveney CCGs will **not routinely fund** Aesthetic / Cosmetic Breast Surgery for the conditions or procedures listed below:

- Surgical treatment of Inverted Nipples
- Hypoplasia or Aplasia of Breast(s)
- Other Breast Asymmetry
- Gynaecomastia
- Breast Reduction
- Ptosis/ Mastopexy
- Breast Augmentation

Norfolk and Waveney CCGs will fund removal/replacement of breast implants on a restricted basis according to the following criteria:

1. **Implant removal**
   Removal of breast implants will be funded where there is documented evidence of ANY of the following:
   
   1. Breast disease (current or prior to previous mammoplasty)
   2. Implant complicated by recurrent infection
   3. Implant with capsular contracture
   4. Implant is ruptured

2. **Replacement of breast implants**
   Replacement of breast implants will be funded only for patients fulfilling the criteria for implant removal (criteria 1-4 above) and that the removal and replacement of implant is carried out as part of the same surgical procedure. For implants complicated by recurrent infection, it may not be possible to remove and replace the implant at the same time, and clinically appropriate decisions should be taken for such patients. All other applications for replacement will be considered via the IFR process.

**Policy exclusions:**
Reconstructive surgery following malignancy, trauma or other disease is routinely commissioned across Norfolk and Waveney on a separate care pathway.
Clinical Codes for audit/monitoring

<table>
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<tr>
<td><strong>Breast augmentation</strong></td>
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<tr>
<td>B31.2 Augmentation mammoplasty</td>
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<tr>
<td>B30.1 Insertion of prosthesis for breast</td>
</tr>
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<td>B30.8 Other specified prosthesis of breast followed by Y03.2 Renewal of prosthesis in organ</td>
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<td>B30.4 Renewal of prosthesis for breast</td>
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<tr>
<td>B37.5 Lipofilling of breast</td>
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<tr>
<td><strong>Breast Reduction</strong></td>
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<tr>
<td>B31.1 Reduction mammoplasty</td>
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Evidence of Effectiveness

There is limited scientific evidence of the clinical and cost effectiveness of cosmetic/aesthetic breast surgery.

The British Association of Plastic Reconstructive and Aesthetic Surgeons (BAPRAS) has published recent guidance for commissioners (NHS Modernisation Agency 2005, updated by BAPRAS, 2014). This guidance recommends that psychological screening and assessment by psychologists specialised in cosmetic surgery and Body Dysmorphic Disorder should be considered to improve long term outcomes in some patients.

Currently there are no scientifically sound and clinically useful instruments available to properly assess cosmetic surgery patients’ mental health and related body image expectations prior to surgery (Wildgoose et al 2013).

Evidence-informed risks of aesthetic breast surgery are stated on the NHS Choices website: [http://www.nhs.uk/Conditions/Breast-implants/Pages/Complications.aspx](http://www.nhs.uk/Conditions/Breast-implants/Pages/Complications.aspx)

References


