## LOW-INTENSITY PULSED ULTRASOUND FOR FRACTURE HEALING (LIPUS) (MARKETED AS EXOGEN®)

## **EXCEPTONAL FUNDING REQUIRED**

**Condition:** Fractures (broken bones) are common and whilst they can cause morbidity and reduced quality of life the majority heal with good functional results within 20 weeks. However, some fractures take longer than expected to heal (delayed union) and a small proportion fail to heal without further intervention (non-union, sometimes referred to as 'established' non-union). Risk factors for non-union include systemic medical conditions, smoking, use of non-steroidal anti-inflammatory drugs, local factors such as infection, vascular problems, magnitude of injury (fracture location and gap, trauma), and advanced age.

The current standard treatment is surgery.

## Policy statement

Due to the limited evidence of clinical effectiveness Low-intensity Pulsed Ultrasound for Fracture Healing (LIPUS) marketed as Exogen® for fresh fractures, delayed-union and non-union fractures are not normally funded.

Exceptional clinical cases can be considered via the BSW ICB Exceptional Funding Request route

Sometimes there will be choices to make about your healthcare. If you are asked to make a choice, make sure you get the answers to these three questions:

- What are my options?
- What are the benefits and risks?
- How likely are these risks and benefits?

## STP principles to promote health and wellbeing:

- Patients who are overweight should be encouraged to lose weight prior to seeking surgery to reduce the risk of complications during and after surgery.
- Patients who smoke should be advised to attempt to stop smoking and offered a referral to stop smoking services before the operation, to reduce the risk of complications during and after surgery.
- Underlying medical conditions should have been investigated and the patient's condition optimised prior to referral for surgical interventions

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Primary care must obtain funding before referring patients to secondary care providers and secondary care providers must satisfy themselves that the patient has funding secured prior to seeing the patient. This is to ensure inappropriate out-patient appointments are avoided and patient expectations are properly managed.

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