

BREAST SURGERY - COSMETIC

EXCEPTIONAL FUNDING REQUIRED

General principles

- GPs wishing to seek a consultant opinion on the potential benefit of a cosmetic surgery for their patient must first have the agreement of the Individual Funding Request (IFR) Panel, with well-documented supporting evidence for exceptional clinical circumstances.
- If an IFR application is supported and referral for surgical opinion has been agreed, the final decision to proceed with the procedure is led by the clinical specialist.
- The ICB does not normally fund cosmetic procedures solely to improve appearance in the absence of disease, significant congenital deformity, and limitation of function and/or impaired ability to perform activities of daily living. Therefore, cosmetic procedures are interventions not normally funded.
- Assessment of patients being considered for referral to cosmetic surgery who may have an underlying genetic, endocrine, or psychosocial condition should have had this fully investigated by a relevant specialist prior to the referral to plastic surgery being made.
- Psychological distress alone will normally not be accepted as a reason to fund surgery. Clinicians are requested to refer to NICE guideline 31 on 'obsessive-compulsive disorder (OCD) and Body Dysmorphic Syndrome (BDS)' prior to referring on psychological grounds. <http://www.nice.org.uk/guidance/CG31>

Referrals within the NHS for the revision of treatments originally performed outside the NHS will not normally be funded. Referrers are encouraged to re-refer to the practitioner who conducted the original treatment.

EXAMPLES OF COSMETIC BREAST PROCEDURES NOT NORMALLY FUNDED:

Mastopexy (breast lifting)	Breast surgery due to breast asymmetry
Corrective surgery of the nipple	Breast reduction (male or female)
Removal of supernumerary nipples	Removal of benign breast lumps
Breast augmentation	

REMOVAL AND REPLACEMENT OF BREAST IMPLANTS

CRITERIA BASED ACCESS

BSW ICB will fund surgery to remove a breast implant in any of the following circumstances:

- Breast implant leakage or rupture
- Implants complicated by recurrent infection or seroma
- Extrusion of implant through skin
- Implant is a Poly Implant Prosthesis (PIP implant)
- The patient develops Breast Implant Associated Anaplastic Large Cell Lymphoma (BIA-ALCL)

PRIOR APPROVAL

Prior approval is required for:

- Breast implant removal when capsular contracture is associated with pain that significantly affects activities of daily living
- Removal of any contralateral, non-affected implant; or for the replacement of an implant that was placed by an NHS provider.

Pre and postoperative photographs **MUST** be recorded for audit purposes. All eligible patients **MUST** be entered into the Breast and Cosmetic Implant Registry (BCIR) for audit purposes.

Patients whose initial procedure was privately funded should seek breast implant removal from their private provider in the first instance.

If, however, the patient meets one of the above clinical indications, and the private provider is unable to offer the patient surgery, the patient can be offered an NHS referral for breast implant removal but not for replacement.

Only implant removal should be performed, and no other subsequent cosmetic procedure e.g. mastopexy.

The removal of breast implants due to symptoms termed as Breast Implant Illness (BII) or Autoimmune Syndrome Induced by Adjuvants (ASIA) on social media, or due to the risk of developing Breast Implant Associated Anaplastic Large Cell Lymphoma (BIAA-ALCL) is not currently recommended.

Note that implants placed due to breast cancer are excluded from this policy— refer to the Breast reconstruction policy for details.