



ABDOMINOPLASTY / APRONECTOMY EVIDENCE BASED INTERVENTIONS (EBI) POLICY

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Target audience:	 NHS Somerset ICB: NHS Providers GP Practices Contracts Team Medical Directors: Somerset NHS Foundation Trust Royal United Hospitals Bath NHS FT
Application Form	Generic EBI Application

ABDOMINOPLASTY / APRONECTOMY EVIDENCE BASED INTERVENTIONS (EBI) POLICY

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VERSION CONTROL		
Document Status:	Current Policy	
Version:	2425.v3	

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	
1516.v1.1	August 2016	Change of policy template from SWCSU template to SCCG, wording amendments, inclusion of surgery info	
1819.v1.2	June 2018	3-year review no change to criteria, update CCG template & contact details	
1819.v2	Sept 2020	Rebranding from IFR to EBI, 3-year review CCPF no amendments	
2021.v2	July 2022	Amendment from SCCG to NHS Somerset ICB. New PALS email address	
2223.v2a	March 2023	Wording change 4.6	
2223.v2b	November 2023	3-year review, no clinical changes	
2324.v2c	June 2024	Amendment to website link and clinical exceptionality wording on 3.6	
2425.v2d	January 2025	3-year review. Criteria for possible consideration removed as not routinely commissioned.	

Equality Impact Assessment (EIA)	1516.v1
Quality Impact Assessment QIA.	March 2018
Sponsoring Director:	Dr Bernie Marden
Document Reference:	2425.v3

1 GENERAL PRINCIPLES EBI (Evidenced Based Intervention)

1.1 Funding approval must be in place prior to treating patients for this prior approval treatment

Please note: Funding approval is given where there is evidence that the treatment requested is clinically effective and the patient has the potential to benefit from the proposed treatment

- 1.2 Receiving funding approval for the specified treatment requested, DOES NOT confirm that the patient will receive treatment or surgery. The patient MUST CONSENT to receiving treatment/ surgery prior to treatment being undertaken
- 1.3 The policy does not apply to patients with suspected malignancy who should continue to be referred under the NHS '2 week wait pathway' rules for assessment and testing as appropriate
- 1.4 Patients with an elevated BMI of 30 or more MAY experience more postsurgical complications including post-surgical wound infection and should be encouraged to lose weight further prior to seeking surgery

https://www.sciencedirect.com/science/article/pii/S1198743X15007193 (Thelwall, 2015)

- 1.5 Patients who are smokers should be referred to a smoking cessation service to reduce the risk of surgery and improve healing
- 1.6 Prior approval funding is available for one year commencing the date of approval

2 POLICY CRITERIA NOT COMMISSIONED

- 2.1 Abdominoplasty/Apronectomy Surgery is not routinely commissioned
- 2.2 Abdominal loose skin removal is a surgical operation to remove excess skin and fat from the middle and lower area of the abdomen and to tighten the muscles of the abdominal wall to reduce the appearance of a saggy or sticking out stomach
- 2.3 Abdominoplasty/Apronectomy are regarded as procedures of low clinical priority and are not routinely funded by the ICB. These procedures are not available on cosmetic grounds including where there has been significant weight loss following surgery for morbid obesity, or where there has been natural weight loss.

3 EVIDENCE BASED INTERVENTIONS APPLICATION PROCESS

3.1 Patients who are not eligible for surgery under this policy may be considered for surgery on an individual basis where the 'CLINICIAN BEST PLACED' believes exceptional circumstances exist that warrant deviation from the rule of this policy

'THE CLINICIAN BEST PLACED' is deemed to be the GP or Consultant undertaking a medical assessment and/or a diagnostic test/s to determine the health condition of the patient.

3.2 Completion of a **Generic EBI Funding Application Form** must be sent to the EBI team by the 'clinician best placed' on behalf of the patient

Note. Applications CANNOT be considered from patients personally

- 3.3 Only electronically completed EBI applications emailed to the EBI Team will be accepted
- 3.4 It is expected that clinicians will have ensured that the patient, on behalf of whom they are forwarding the funding application, has given their consent to the application and are made aware of the due process for receiving a decision on the application within the stated timescale
- 3.5 Generic EBI Funding Applications are considered against '**clinical exceptionality**'. To eliminate discrimination for patients, social, environmental, workplace, and non-clinical personal factors CANNOT be taken into consideration.

For further information on 'clinical exceptionality' please refer to the NHS Somerset ICB / EBI webpage Evidence Based Interventions - <u>Evidence</u> <u>Based Interventions - NHS Somerset ICB</u> and click on the section titled **Generic EBI Pathway**

3.6 Photographs can be forwarded with the funding application form to further support the clinical evidence provided where appropriate

4 ACCESS TO POLICY

- 4.1 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
- 4.2 **Or write to us**: NHS Somerset ICB, Freepost RRKL-XKSC-ACSG, Yeovil, Somerset, BA22 8HR or **Email** us: <u>somicb.pals@nhs.net</u>

5 **REFERENCES**

 The following sources have been considered when drafting this policy:
 Thelwall 2015 Obesity & the risk of wound infection following surgery https://www.ncbi.nlm.nih.gov/pubmed/26197212