

BREAST ASYMMETRY SURGERY FOR FEMALES

PRIOR APPROVAL

Version:	2425.V1a
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Application Form	Prior Approval Form

**BREAST ASMMETRY SURGERY (FOR FEMALES - 2 CUP SIZE DIFFERENCE)
PRIOR APPROVAL**

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VERSION CONTROL

Document Status:	Current policy
Version:	2425.V1a

DOCUMENT CHANGE HISTORY

Version	Date	Comments
2223.v1e	July 2023	3-year review, inclusion of criterion and wording from NHS E EBI list 3 under implant section
2324.v2	November 2023	Inclusion within 2.4 Implant removal and replacement routinely commissioned & criterion wording to include capsular contracture. Wording amended for private treatment 2.6
2324.v3	May 2024	Amendment of numbering within section 2 (2.3 - 2.11). Amendment to website link 3.6
2425.v3a	July 2024	Breast Surgery for Females Treatment Policy amended. Breast Asymmetry criterion amended & moved to a separate treatment policy/wording amendment to General Principles & pathway
2425.V1	January 2025	Amend wording within 2.4 to read clearer/update of references

Equality Impact Assessment EIA	May 2016
Quality Impact Assessment QIA	N/A
Sponsoring Director:	Bernie Marden
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1 GENERAL PRINCIPLES PA (PRIOR APPROVAL)

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 post-surgical 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 - BREAST ASYMMETRY

2.1 The breast surgeries below are NOT WITHIN THE REMIT OF THIS POLICY please refer to the individual breast surgery policies listed on the Evidence based Interventions (EBI) webpage [Evidence Based Interventions - NHS Somerset ICB](#) for:

- Breast Reconstruction Post Cancer
- Breast Reduction Surgery
- Breast Implants
- Breast surgery (for males) please refer to the Breast Reduction Gynaecomastia Policy

2.2 Breast surgery for patients on the gender dysphoria pathway is the commissioning responsibility of NHS England and IS NOT commissioned by NHS Somerset ICB

2.3 **Breast Asymmetry Surgery**

Breast Asymmetry Surgery is NOT ROUTINELY COMMISSIONED for patients under the following indications:

- a) Under the age of 18 years
- b) On cosmetic grounds
- c) To improve appearance and/or to correct natural changes such as those associated with ageing
- d) To resolve possible psychological issues as there is no clinical evidence base to support clinical effectiveness in these circumstances
- e) Who are pregnant or who have had a baby within the past 12 months

2.4 NHS Somerset ICB will commission Breast Asymmetry for patients who fulfil the criterion below

- a) 18 years of age or above
- b) A BMI of 19 to 27 sustained for a minimum of 6 months
- c) Patient has not smoked/used nicotine replacement therapy over the preceding 3 months
- d) A DISPARITY OF 2 CUP SIZES OR GREATER IN THE LOWER RANGE (size C or below based on the smaller breast size)

Please note. A difference of B - D would count as 2 cup sizes

- e) A DISPARITY OF 3 OR MORE CUP SIZES IN THE UPPER RANGE (size D upwards based on the smaller breast size)

Please note.

A difference of DD - F would count as 3 cup sizes (E, EE, F)

2.5 Upon receipt of a completed Breast Asymmetry Prior Approval application form confirming the criterion is met by the referring GP, the EBI team will refer the patient to the Somerset Breast Care Nurse Team for a comprehensive assessment

2.6 **Commissioned breast surgical procedure where funding has been authorised**

Breast prosthesis or implants often have a limited lifespan and are likely to require replacement or revision during the patient's lifetime, where possible, breast reduction of the larger breast should be the preferred option for patients considering surgery

- 2.7 Patients who are not eligible for treatment under this policy, please refer to section 3 EVIDENCE BASED INTERVENTIONS APPLICATION PROCESS on how to apply for funding with evidence of clinical exceptionality

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 - NHS Somerset ICB](#) 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: somicb.pals@nhs.net

5 REFERENCES

- The following sources have been considered when drafting this policy:
- 5.1 British Association of Plastic Reconstructive Aesthetic Surgeons. (2015). Congenital Breast and Chest Conditions. Retrieved 04 26, 2016, from British Association of Plastic Reconstructive and Aesthetic Surgeons:
<http://www.bapras.org.uk/public/patient-information/surgery-guides/congenital-breast-and-chest-conditions>
 - 5.2 NHS Choices. (2014,07 09). Breast Implants – Complications. Retrieved 04 26, 2016, from NHS Choices:
<http://nhs.uk/Conditions/Breast-implants/Pages/Complications.aspx>
 - 5.3 British Association of Plastic Reconstructive and Aesthetic Surgeons. (2015). Breast Augmentation. Retrieved 04 26, 2016, from British Association of Plastic Reconstructive and Aesthetic Surgeons:
[Breast Augmentation | BAPRAS](#)
 - 5.4 British Association of Plastic Reconstructive and Aesthetic Surgeons. (2015). *What complications can occur?* Retrieved 04 26, 2016, from British Association of Plastic Reconstructive and Aesthetic Surgeons:
[What complications can occur | BAPRAS](#)
 - 5.5 NHS Choices. (2014, 07 09). Breast implants - complications. Retrieved 04 26, 2016, from NHS Choices:
<http://www.nhs.uk/Conditions/Breast-implants/Pages/Complications.aspx>
 - 5.6 British Association of Plastic Reconstructive and Aesthetic Surgeons. (2015). Breast Reduction. Retrieved 04 14, 2016, from British Association of Plastic Reconstructive and Aesthetic Surgeons:
<http://www.bapras.org.uk/public/patient-information/surgery-guides/breast-reduction>
 - 5.7 NHS Choices. (2014, 01 07). Breast Reduction. Retrieved 04 14, 2016, from NHS Choices:
<http://www.nhs.uk/conditions/Breast-reduction/pages/introduction.aspx>
 - 5.9 Science Direct <https://www.sciencedirect.com/science/article/pii/S1198743X15007193>
 - 5.10 NHS England EBI List 3 https://ebi.aomrc.org.uk/wp-content/uploads/2023/03/EBI_Guidance_List3_0523.pdf
 - 5.11 NHS England EBI AoMRC <https://ebi.aomrc.org.uk/interventions/breast-prosthesis-removal/>