

## FACIAL BLUSHING (INCLUDING ERYTHROPHOBIA) EVIDENCE BASED INTERVENTIONS (EBI) POLICY

|   |   |
|---|---|
| Version:                                      | 2425.v2d  |
| Recommendation by:                            | NHS Somerset ICB Clinical Commissioning Policy Forum (CCPF)   |
| Date Ratified:                                | October 2022  |
| Name of Originator/Author:                    | EBI Service   |
| Approved by Responsible Committee/Individual: | NHS Somerset ICB Clinical Executive Committee (CEC)   |
| Publication/issue date:                       | November 2022   |
| Review date:                                  | Earliest of either NICE publication or 3 years from issue   |
| Target audience:                              | <p><b>NHS Somerset ICB:</b></p> <ul style="list-style-type: none"> <li>• NHS Providers</li> <li>• GP Practices</li> <li>• Contracts Team</li> </ul> <p><b>Medical Directors:</b></p> <ul style="list-style-type: none"> <li>• Somerset Foundation Trust</li> <li>• Yeovil District Hospital NHS FT</li> <li>• Royal United Hospitals Bath NHS FT</li> </ul> |
| Application Form                              | Generic EBI Application   |

**FACIAL BLUSHING (INCLUDING ERYTHROPHOBLA)  
EVIDENCE BASED INTERVENTIONS (EBI) POLICY**

| <b>Section</b> | <b>CONTENT</b>                                   | <b>Page</b> |
|----------------|--|-------------|
|                | Version Control                                  | 1           |
| 1              | General Principles                               | 2           |
| 2              | Policy Criteria                                  | 2 - 3       |
| 3              | Evidence Based Interventions Application Process |             |
| 4              | Access To Policy                                 | 4           |
| 5              | References                                       | 4           |

**VERSION CONTROL**

|                         |                |
|-------------------------|----------------|
| <b>Document Status:</b> | Current policy |
| <b>Version:</b>         | 2425.v2d       |

**DOCUMENT CHANGE HISTORY**

| <b>Version</b> | <b>Date</b>  | <b>Comments</b>  |
|----------------|--------------|--|
| 1516.v1        | July 2017    | Change from CSU to Somerset CCG template   |
| 1516.v1a       | January 2020 | Template update, rebranding IFR to EBI, 3-year review                                |
| 2021.v2        | July 2022    | Amendment from SCCG to NHS Somerset ICB. New PALS email address                      |
| 2223.v2a       | October 2022 | 3 yr review  |
| 2223.v2b       | March 2023   | Wording change 3.6   |
| 2223.v2c       | June 2024    | Logo change with amendment to website link and clinical exceptionalty wording on 3.6 |

|                                       |                  |
|---------------------------------------|------------------|
| <b>Equality Impact Assessment EIA</b> |                  |
| <b>Quality Impact Assessment QIA</b>  |                  |
| <b>Sponsoring Director:</b>           | Dr Bernie Marden |
| <b>Document Reference:</b>            | 2425.v2d         |

## **1 GENERAL PRINCIPLES (EBI)**

- 1.1 Funding approval must be secured prior to a referral for an assessment and/or surgery. Referring patients to secondary care without funding approval having been secured not only incurs significant costs in out-patient appointments for patients that may not qualify for surgery, but inappropriately raises the patient's expectation of treatment
- 1.2 On limited occasions, we may approve funding for an assessment only in order to confirm or obtain evidence demonstrating whether a patient meets the criteria for funding. In such cases, patients should be made aware that the assessment does not mean that they will be provided with surgery and surgery will only be provided where it can be demonstrated that the patients meet the criteria to access treatment in this policy
- 1.3 Funding approval will only be given where there is evidence that the treatment requested is effective and the patient has the potential to benefit from the proposed treatment. Where it is demonstrated that patients have previously been provided with the treatment with limited or diminishing benefit, funding approval is unlikely to be agreed
- 1.4 Receiving funding approval does not confirm that they will receive treatment or surgery for a condition as a consent discussion will need to be undertaken with a clinician prior to treatment
- 1.5 The policy does not apply to patients with suspected malignancy who should continue to be referred under 2 week wait pathway rules for assessment and testing as appropriate
- 1.6 Patients with an elevated BMI of 30 or more may experience more post-surgical complications including post-surgical wound infection so should be encouraged to lose weight further prior to seeking surgery.  
<https://www.sciencedirect.com/science/article/pii/S1198743X15007193>  
(Thelwall, 2015)
- 1.7 Patients who are smokers should be referred to smoking cessation services in order to reduce the risk of surgery and improve healing

## **2 POLICY CRITERIA NOT COMMISSIONED**

- 2.1 Facial blushing including erythrophobia surgery/treatment is not routinely commissioned by the ICB
- 2.2 The following treatments are not commissioned to treat facial blushing including erythrophobia;
  - Drug and/or surgical treatments
  - Botulinum Toxin treatment by injection
  - Endoscopic Thoracic Sympathectomy [ETS]

- 2.3 Patients should be treated conservatively including being provided with reassurance and advice
- 2.4 Where there are anatomical abnormalities in children <18 likely to cause impairment of normal emotional development pathological abnormalities e.g. facial palsy, progeria or cutis laxa please refer to the EBI application pathway under item 3

### 3 EVIDENCE BASED INTERVENTIONS APPLICATION PROCESS

- 3.1 Patients who are not eligible for treatment under this policy may be considered on an individual basis where their GP or Consultant believes exceptional circumstances exist that warrant deviation from the rule of this policy
- 3.2 Completion of a **Generic EBI Application Form** by a patient's GP or Consultant is required
- 3.3 Applications cannot be considered from patients personally
- 3.4 Only electronically completed EBI applications will be accepted to the EBI Service
- 3.5 It is expected that clinicians will have ensured that the patient, on behalf of who they are forwarding the application for, is appropriately informed about the existing policies prior to an application to the EBI service. This will reassure the service that the patient has a reasonable expectation of the outcome of the application and its context
- 3.6 EBI funding application 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

- 3.7 Where appropriate photographic supporting evidence can be forwarded with the application form
- 3.8 An application put forward for consideration must demonstrated some unusual or unique clinical factor about the patient that suggests they are exceptional as defined below:
- Significantly different to the general population of patients with the condition in question
  - Likely to gain significantly more benefit from the intervention than might be expected from the average patient with the condition

## 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](mailto:somicb.pals@nhs.net)

## 5 REFERENCES

The following sources have been considered when drafting this policy:

5.1 [Blushing - NHS \(www.nhs.uk\)](http://www.nhs.uk)