



# NASAL SURGERY Septoplasty / Rhinoplasty / Septo-Rhinoplasty / Polyps EVIDENCE BASED INTERVENTIONS (EBI) POLICY

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Target audience:	<ul> <li>NHS Somerset ICB:</li> <li>NHS Providers</li> <li>GP Practices</li> <li>Contracts Team</li> </ul> Medical Directors: <ul> <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

# NASAL SURGERY EVIDENCE BASED INTERVENTIONS (EBI) POLICY

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# **VERSION CONTROL**

Document Status:	Current policy
Version:	2324.v3b

DOCUMENT CHANGE HISTORY		
Version	Date	Comments
2021.v1	April 2016	Removed from the "Guidance for Clinicians Policy" document
1617.1a	April 2016	Amendment to criteria wording
1617.v2a	July 2016	Policy name change to Nasal Surgery
1617.v2b	January 2017	Amendment to wording on Septoplasty criteria
1617.v2b	February 2019	New policy template and layout
1819.v2b	June 2020	Update template, rebranding from IFR to EBI, 3 year review include surgical treatment for polyps
2021.v3	July 2022	Amendment from SCCG to NHS Somerset ICB. New PALS email address
2223.v3a	July 2023	3-year review/inclusion of laser treatment & logo update

Equality Impact Assessment EIA	26 March 2016
Quality Impact Assessment QIA	Month yyyy
Sponsoring Director:	Bernie Marden
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## 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.

  <a href="https://www.sciencedirect.com/science/article/pii/S1198743X15007193">https://www.sciencedirect.com/science/article/pii/S1198743X15007193</a>
  (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 (EBI)

- 2.1 Patients are eligible for Manipulation under Anaesthetic (MAU) immediately post-Trauma without funding approval being required. Failure to engage with this treatment within the recommended period post-trauma or dissatisfaction with the outcome of the MAU is unlikely to be considered exceptional
- 2.2 **Septoplasty does not** require funding authorisation where:
  - There is clinical evidence of a nasal blockage
  - There is/has been no improvement after a trial of maximal medical treatment which is fully documented in the patient's medical record

## 2.3 Nasal Treatments/Surgery not routinely commissioned

- a) Rhinoplasty & Septo-rhinoplasty
- b) Laser treatment
- c) Nasal surgery to correct the following
  - To stop snoring
  - Cosmetic appearance of the nose
  - Where patients are unhappy with the outcome of previous surgeries including immediate post-trauma corrections (whether provided by the NHS or private providers)

#### 2.4 **Nasal Polyps**

Diagnosis and treatment in secondary care is **not routinely commissioned** 

Surgical intervention in the treatment of Nasal Polyps will only be considered in patients who fail to improve after a trial of maximal medical treatment for a period of at least 6 months, and this information is fully documented within the patient's clinical records

Please follow the EBI application pathway under item 3

#### 2.5 **Post-traumatic nasal injury**

Where there is post- traumatic nasal injury causing continuous and chronic bi-lateral nasal airway obstruction associated with septal/bony deviation of the nose which as part of reconstructive head and neck surgery (including traumatic deformity)

Please follow 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 applications are reviewed and considered against clinical exceptionality

For further information on 'clinical exceptionality', please refer to the NHS Somerset ICB website and input into the 'Search this website' box clinical exceptionality. Click on the link to access the full NHS description of clinical exceptionality

Social, Emotional and Environmental factors *i.e.*, *income*, *housing*, *environmental pollution*, *access to services*, *family*, *friends*, *ethnicity*, *life experiences etc.* CANNOT be considered with an application

- 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

#### 5 REFERENCES

- The following sources have been considered when drafting this policy:
- 5.1 British Association of Plastic Reconstructive and Aesthetic Surgeons. (2015). *Rhinoplasty*. Retrieved 04 14, 2016, from British Association of Plastic Reconstructive and Aesthetic Surgeons:

  http://www.bapras.org.uk/public/patient-information/surgery-guides/rhinoplasty
- 5.2 NHS Choices. (2019, 05 03) cosmetic surgery procedures. Retrieved 04 14, 2016, from NHS Choices: http://www.nhs.uk/Conditions/Cosmetic-surgery/Pages/Procedures.aspx#nose
- 5.3 Nuffield Health. (2016). *Rhinoplasty (or nose reshaping)*. Retrieved 04 14, 2016, from Nuffield Health:

  http://www.nuffieldhealth.com/treatments/rhinoplasty-or-nose-reshaping
- The British Association of Aesthetic Plastic Surgeons . (n.d.). Rhinoplasty (Reduction).

  Retrieved 04 14, 2016, from The British Association of Aesthetic Plastic Surgeons:

  Rhinoplasty (Reduction) | The British Association of Aesthetic Plastic Surgeons
  (baaps.org.uk)
- 5.5 The British Association of Aesthetic Plastic Surgeons. (n.d.). Rhinoplasty
  (Augmentation). Retrieved 04 14, 2016, from The British Association of Aesthetic Plastic Surgeons:
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