NHS Scarborough and Ryedale and Vale of York Clinical Commissioning Groups

Breast Implants – Removal Commissioning Policy

Intervention	Breast Implants - Removal			
Definition	The presence of breast implants may cause patients a range of			
	symptoms over time. These include a change in appearance of implants			
	or increased associated pain. Common problems include age related			
	sagging; calcification of breast tissue; capsular correction; leak from			
	implant; implant wrinkling or rippling; infection; inflammation or irritation.			
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	Concerns about cosmetic appearance should not be referred to			
	secondary care. These procedures will not be funded.			
Red Flag	In all cases, exclude Red Flag Symptoms and if present, refer			
symptoms	2WW or to symptomatic breast clinic			
Exclusions to	This policy does not apply to breast reconstruction as part of the			
policy	treatment for breast cancer			
Commissioning	NHS Scarborough & Ryedale and Vale of York CCG's do not routinely			
position	commission the removal of breast implants.			
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	Where there is a clinical indication for removal of breast implants this			
	will only be commissioned in the following circumstances:			
	will city be continued in the following circumstances.			
	Breast cancer			
	Breast Implant associated – Anaplastic Large Cell Lymphoma (BIA ALCL) is supported.			
	(BIA-ALCL) is suspected			
	Implants complicated by recurrent infections			
	Implants with capsule formation that is associated with severe			
	pain			
	 Implant is proven to be ruptured (intra or extra capsular) 			
	Baker Grade IV capsular contracture			
	 Implants with a capsule formation that interferes with breast 			
	imaging			
	Implant is a PiP implant			
	This commissioning decision applies regardless of funding source of			
	the original surgery (i.e. whether funded by the NHS or on a private			
	basis**). Patients will be offered the choice of removing both			
	prostheses in the event that only one has been ruptured with the			
	intention of ensuring symmetry.			
	This policy does not include replacement of removed implants – please			
	see separate policy.			
	** in the first instance the patient should be directed back to the original			
	private provider for the procedure. If the private provider is unable to			
	support the patient, the NHS will undertake removal only. The CCG			
	reserves the right to seek reimbursement from the provider.			
OPCS codes	B30.			
Effective from	15 th July 2019			
Review Date	2021			
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References:

1. Poly implant Prothese (PiP) breast implants; Final report of the Expert Group June 2012 Sir Bruce Keogh NHS Medical Director http://www.nhs.uk/conditions/breast-implants/Documents/PIP%20expert%20group%20final%20report.pdf

Version	Created /actioned by	Nature of Amendment	Approved by	Date
1.0	Lead Clinician and Senior Service Imp Manager	Re-drafting of STP and SR/VoY policies	n/a	March 19
2.0	Senior Service Improvement Manager	Share of new draft for consultation		March 19
3.0	Senior Service Improvement Manager	Update of threshold following consultation		April 19
FINAL	Senior Service Improvement Manager	Approval of threshold	SRCCG Business Committee VoY Clinical Executive	June 19 June 19