

Interim Clinical Commissioning  
Policy: Breast implant removal/  
re-insertion

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# Interim Clinical Commissioning Policy

## *Breast implant removal/re-insertion*

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## **Policy Statement**

NHS England will commission Breast implant removal/re-insertion in accordance with the criteria outlined in this document.

In creating this policy NHS England has reviewed this clinical condition and the options for its treatment. It has considered the place of this treatment in current clinical practice, whether scientific research has shown the treatment to be of benefit to patients, (including how any benefit is balanced against possible risks) and whether its use represents the best use of NHS resources.

This policy document outlines the arrangements for funding of this treatment for patients where NHS England directly commissions this service.

## **Equality Statement**

NHS England has a duty to have regard to the need to reduce health inequalities in access to health services and health outcomes achieved as enshrined in the Health and Social Care Act 2012. NHS England is committed to ensuring equality of access and non-discrimination, irrespective of age, gender, disability (including learning disability), gender reassignment, marriage and civil partnership, pregnancy and maternity, race, religion or belief, sex (gender) or sexual orientation. In carrying out its functions, NHS England will have due regard to the different needs of protected equality groups, in line with the Equality Act 2010. This document is compliant with the NHS Constitution and the Human Rights Act 1998. This applies to all activities for which they are responsible, including policy development, review and implementation.

## **Plain Language Summary**

Breast implant surgery is the most common type of cosmetic surgery carried out on women in the UK. Breast implants can be used for two purposes:

- reconstructive – to reconstruct the breast mound following a mastectomy (the surgical removal of the breast often used to treat breast cancer)
- cosmetic – to enhance the size and shape of the breast

After having breast implant surgery, about one in three women will require further surgery within 10 years of their initial operation.

## **1. Introduction**

Breast implant surgery is regarded as a procedure of low clinical priority and therefore not routinely funded by the Commissioner.

Additional surgery may be needed as a result of complications such as capsular contracture (hardening of the scar capsule around the implant, see below), age-related changes to the breast (sagging) or the shell of the implant rupturing (splitting).

## 2. Criteria for commissioning

NHS England will commission the removal of breast implants for any of the following indications in patients who have undergone cosmetic augmentation mammoplasty:

1. Breast disease
2. Implants complicated by recurrent infections
3. Implants with capsule formation that is associated with severe pain
4. Implants with capsule formation that interferes with mammography
5. Intra or extra capsular rupture of silicon gel-filled implants

Reinsertion of new breast implants will only be commissioned if the original implant insertion was funded by the NHS and the patient would still be eligible for breast implant under NHS England's commissioning policies for example post mastectomy or to correct asymmetry. (Reference N-SC003 Breast Asymmetry policy - <http://www.england.nhs.uk/ourwork/d-com/policies/ssp/>)

NHS England will not contribute funding to procedures funded privately, irrespective of whether part of that procedure involves removal of breast implants.

**The Clinician proposing this intervention is required to secure Prior Approval from the Armed Forces Commissioning or Health & Justice Commissioning Team in their area**

**(Application form and contact details can be found on NHS Internet <http://www.england.nhs.uk/ourwork/d-com/policies/ssp/>)**

## 3. Evidence Base

This procedure is considered to be of limited clinical value.