

CLINICAL POLICY ADVISORY GROUP (CPAG)

Blepharoplasty Policy

Statement

NHS Derby and Derbyshire ICB has deemed that blepharoplasty should not routinely be commissioned unless criteria 1 **and** 2 are met:

- Criteria 1:
 - A defect is present predisposing to recurrent corneal or conjunctival irritation, OR,
 - Visual field tests confirm vision is reduced to 120° laterally and 40° vertically
- Criteria 2: the defect or reduced vision is due to any one of the following examples:
 - o entropion/ectropion
 - o complications of a prosthetic in anophthalmia socket
 - Periorbital sequelae of nerve palsy or trauma
 - Dermatochalasis (excess upper eyelid skin, including where change is age related)

This procedure is not commissioned as a cosmetic intervention (at any age) without accompanying functional impact.

These commissioning intentions will be reviewed periodically. This is to ensure affordability against other services commissioned by the ICB.

1. Background

Blepharoplasty is a surgical procedure that involves the removal of excess skin, fat or muscle from the eyelids. The aim of the procedure is to improve hooded or drooping eyelids.

The procedure usually involves an incision along the natural creases of the upper lids or just below the lashes in the lower lids, which are extended into the crow's feet at the corner of the eyes. Excess fat, skin and sagging muscle is then removed and the incision is stitched up. The procedure can be carried out under local or general anaesthetic.

2. Recommendation

NHS Derby and Derbyshire ICB (NHSDDICB) has deemed that blepharoplasty should not routinely be commissioned unless criteria 1 **and** 2 are met:

- Criteria 1:
 - A defect is present predisposing to recurrent corneal or conjunctival irritation, OR.
 - Visual field tests confirm vision is reduced to 120° laterally and 40° vertically
- Criteria 2: the defect or reduced vision is due to any one of the following causes:
 - entropion/ectropion
 - o complications of a prosthetic in anophthalmia socket
 - o Periorbital sequelae of nerve palsy or trauma
 - o Dermatochalasis (excess upper eyelid skin, including where change is age related)

This procedure is not commissioned as a cosmetic intervention (at any age) without accompanying functional impact.

Information to be Included with Referral

- Confirmation of visual field defect
- Details of condition

For meibomian cyst (chalazion) removal, please refer to the <u>NHSDDICB Meibomian Cyst</u> (Chalazion) Policy.

3. Rationale for Recommendation

Blepharoplasty is not commissioned for purely cosmetic reasons as:

- Many people will acquire excess skin in the upper eyelids as part of the natural process of aging that may not cause any visual or functional impairment.
- Excessive skin within the lower lid may cause "eyebags". However this does not affect the function of the eyelid or vision and therefore does not need correction.

4. Useful Resources

- Eyelid Surgery, NHS, last reviewed 30/08/2019 https://www.nhs.uk/conditions/cosmetic-procedures/eyelid-surgery/
- Eyelid Surgery (Blepharoplasty), British Association of Aesthetic Plastic Surgeons, https://baaps.org.uk/patients/procedures/9/eyelid_surgery_blepharoplasty

5. References

- East Midlands Commissioning Policy for Cosmetic Procedures (All Ages), ratified 25/03/2011.
- Eyelid Surgery, NHS, last reviewed 30/08/2019, accessed 26/05/23, https://www.nhs.uk/conditions/cosmetic-procedures/eyelid-surgery/
- Information for commissioners of plastic surgery services: referrals and guidelines in plastic surgery, British Association of Plastic, Reconstructive and Aesthetic Surgeons (BAPRAS), March 2012, accessed 26/05/23, http://www.bapras.org.uk/docs/defaultsource/commissioning-and-policy/information-for-commissioners-of-plastic-surgeryservices.pdf?sfvrsn=2
- Eyelid Surgery (Blepharoplasty), British Association of Aesthetic Plastic Surgeons, accessed 26/05/23.

https://baaps.org.uk/patients/procedures/9/eyelid surgery blepharoplasty

6. Appendices

Appendix 1 - Consultation

All relevant providers/stakeholders will be consulted via a named link consultant/specialist. Views expressed should be representative of the provider/stakeholder organisation. CPAG will consider all views to inform a consensus decision, noting that sometimes individual views and opinions will differ.

Consultee	Date
Consultant Ophthalmologist (UHDBFT)	June 2023
Consultant Ophthalmologist (CRHFT)	June 2023
Clinical Policy Advisory Group (CPAG)	July 2023
Consultant Ophthalmologist, UHDBFT	November 2023
Plastic Surgery Nurse, Lead Clinician, Cosmetics Referral Assessment Service	November 2023
Specialist Therapeutic Optometrist, Chair, Local Eye Health Network (LEHN), Derbyshire & Northamptonshire	November 2023
Clinical Policy Advisory Group (CPAG)	December 2023
Plastics Clinical Nurse Specialist, UHDBFT	June 2024
Clinical Policy Advisory Group (CPAG)	July 2024

Appendix 2 - Document Update

Document Update	Date Updated
Version 3.0	July 2023
Policy has been re-worded to reflect the new NHSDDICB	
organisation.	
 Policy criteria has been re-worded for further clarity. 	
 Link to the NHSDDICB Meibomian Cyst (Chalazion) Policy added. 	
Version 3.1	December 2023
• Dermatochalasis (excess upper eyelid skin, including where change is age related) has been added to Criteria 2.	
,	
 Following statement has been added: This procedure is not commissioned as a cosmetic intervention (at any age) without 	
accompanying functional impact.	
Version 3.2	July 2024
 Removal of reference for requirement of clinical photographs to be included with referral to reflect the closure of the Cosmetics Referral Assessment Service. 	

Appendix 3 - OPCS code(s)

C131 Blepharoplasty of both eyelids C132 Blepharoplasty of upper eyelid

C133 Blepharoplasty of lower eyelid C134 Blepharoplasty NEC