

# **CLINICAL POLICY ADVISORY GROUP (CPAG)**

# **Breast Reduction Surgery Policy**

### Statement

Derby and Derbyshire ICB, in line with its principles for procedures of limited clinical value has deemed that Breast Reduction Surgery should not routinely be commissioned unless the criteria are met.

The ICB will fund breast-reduction surgery when <u>all</u> the following criteria are met:

- Sexual maturation has been reached
- BMI is between 18 25 kg/m<sup>2</sup> and has been within this range for one year as measured and recorded by the NHS\*
- Confirmed non-smoker and/or documented abstinence for at least 6 months prior to procedure
- Breast size is equal to or greater than 1000cc in each breast
- Ratio of combined breast volume to adjusted partial torso volume is greater than 13% as measured by 3D body scan to assess breast volume\*\*
- Patient is suffering from documented intractable intertrigo under the breasts and/or ulceration from breast straps not responding to conservative treatments e.g., topical medications, bra support.
- Anticipated reduction in breast volume is at least 500g (or more) per side, as the aims are to reduce symptoms, not to provide a desired cosmetic appearance.

NB: Clinical photographs are not required for this procedure.

\*The BMI requirement is fixed and does not relate to the weight of the tissue to be removed

\*\*Where a 3D scan is not available the commissioner defaults to the NHSE EBI position of a difference of 150 - 200gms size as measured by a specialist.

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

## 1. Background

The size of women's breasts may be determined by several factors, such as inherited genes, body weight and hormonal influences. Big breasts can cause problems like back or neck pain, shoulder grooves in the shoulders from bra straps, and rashes underneath the breasts.

Breast reduction surgery (also known as Reduction Mammoplasty) aims to reduce the size of the breasts, by taking away fat, breast tissue and skin, usually to relieve symptoms of pain, rashes and infections. The nipples are lifted and the breasts are reshaped to form smaller breasts. Breast reduction surgery is usually carried out under a general anaesthetic (so you would be asleep) or a regional anaesthetic (where the whole area is numbed with injections). The operation usually takes about two hours.

### 2. Recommendation

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The policy should also be read in conjunction with the following DDICB policy:

Breast Reduction Surgery for Gynaecomastia (Male) Policy

# 3. Rationale for Recommendation

The evidence from one systematic review and three non-randomized studies highlights that breast reduction is only successful in specific circumstances. Physical and psychological improvements, such as reduced pain, increased quality of life and less anxiety and depression were found for women following breast reduction surgery

Breast reduction surgery can cause permanent loss of lactation function of breasts, as well as decreased areolar sensation, bleeding, bruising, and scarring and often alternative approaches (e.g. weight loss or a professionally fitted bra) work just as well as surgery to reduce symptoms. For women who are severely affected by complications of large breasts

and for whom alternative approaches have not helped, surgery can be offered. The aim of surgery is not cosmetic, it is to reduce symptoms (e.g. back ache).

## 4. Useful Resources

- NHS Website: Breast Reduction on the NHS <u>https://www.nhs.uk/conditions/breast-reduction-on-the-nhs/</u>
- British Association of Aesthetic Plastic Surgeons. Breast Reduction
  <u>https://baaps.org.uk/patients/procedures/7/breast\_reduction</u>
- Surgery for Breast Reduction. Academy of Royal Colleges. Information for Patients. https://www.aomrc.org.uk/ebi/wp-content/uploads/2021/05/breast-reduction.pdf

### 5. References

- Royal College of Surgeons of England (2014) Commissioning Guide: Breast Reduction. <u>https://www.rcseng.ac.uk/-/media/files/rcs/standards-and-research/commissioning/breast-reduction-surgery-commissioning-guide-published-v2.pdf</u>
- Surgery for Breast Reduction. Academy of Royal Colleges https://www.aomrc.org.uk/ebi/clinicians/breast-reduction/
- British Association of Aesthetic Plastic Surgeons. Glossary [Internet]. [cited 2021 Dec 20]. Available from: <u>https://baaps.org.uk/patients/glossary/</u>

## 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, UHDBFT  | December 2021 |
| Consultant, CRHFT   | December 2021 |
| Clinical Policy Advisory Group (CPAG)   | February 2022 |
| Clinical and Lay Commissioning Committee (CLCC)   | March 2022    |
| Director of Public Health, Derby City Council   | November 2023 |
| Consultant Plastics Surgeon, UHDBFT   | November 2023 |
| Lead Plastic Surgery Specialist Nurse, DDICB Cosmetics Referral<br>Assessment Service (RAS), UHDBFT | November 2023 |
| Nurse Practitioner, Plastics Surgery, NUH   | November 2023 |
| Head of Plastic Surgery, NUH  | November 2023 |
| Specialty General Manager for Plastics, NUH   | November 2023 |
| Clinical Policy Advisory Group (CPAG)   | December 2023 |
| Population Health Strategic Commissioning Committee (PHSCC)   | January 2024  |
| Consultant Plastic and Reconstructive Surgeon, UHDBFT   | October 2024  |
| Lead Plastic Surgery Specialist Nurse, UHDBFT   | October 2024  |
| Consultant Breast Surgeon, UHDBFT   | October 2024  |
| Consultant Oncoplastic Breast Surgeon, UHDBFT   | October 2024  |
| Consultant Breast Surgeon, CRHFT  | October 2024  |
| Consultant Oncoplastic Breast Surgeon, CRHFT  | October 2024  |
| Clinical Policy Advisory Group (CPAG)   | October 2024  |

# Appendix 2 - Document Update

| Document Update   | Date Updated  |
|---|---------------|
| Version 3.0   | December 2021 |
| • Policy has been re-worded and reformatted to reflect the DDCCG clinical policies format. This includes the addition of background information, useful resources, references and consultation. |               |
| Version 3.1   | February 2022 |
| Hyperlink added for Breast Reduction Surgery for  |               |
| Gynaecomastia (Male) Policy. Addition of definition of Breast   |               |
| Reduction surgery.  |               |
| Version 3.2   | November 2023 |
| Addition of following statement "The BMI requirement is fixed   |               |
| and does not relate to the weight of the tissue to be removed"  |               |
| Version 3.3   | October 2024  |
| • In line with risk profile, CPAG agreed to extend the review date  |               |
| of this policy by 3 years, in agreement with clinical stakeholders,   |               |
| due to reduced capacity within the Clinical Policies team.  |               |