

CLINICAL POLICY ADVISORY GROUP (CPAG)

Mastopexy (Breast Uplift) Policy

Statement

NHS Derby and Derbyshire ICB has deemed that mastopexy should not routinely be commissioned unless the procedure is for breast reconstruction as part of the management of breast cancer, where a unilateral procedure can be performed.

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

1. Background

Mastopexy is a surgical procedure that involves the removal of extra loose skin from the breast to help lift and reshape them. Over time, breast tissue becomes stretched and loses the support of the fibrous ligaments. This is a natural progression commonly seen with age, after pregnancy and breastfeeding, and after weight loss. The procedure can lead to reduced sensation in the breast and nipple.

2. Recommendation

Mastopexy should not routinely be commissioned unless the procedure is for breast reconstruction as part of the management of breast cancer, where a unilateral procedure can be performed.

3. Rationale for Recommendation

The restriction of activity to just one procedure will improve patient outcomes by limiting postoperative complications to one spell. The surgical procedure carries risk of complications such as scarring, bleeding, infection, seroma (collection of fluid within the breast), asymmetry, increased or reduced sensation, damage to deeper structures such as the nerves and blood vessels. Mastopexy also carries risks associated with anaesthesia such as chest infections, allergic reaction, blood clots, heart attack and stroke. The risks should be weighed up against the potential benefit of the surgery.

4. Useful Resources

- British Association of Aesthetic Plastic Surgeons, Breast Uplift (Mastopexy), https://baaps.org.uk/patients/procedures/5/breast_uplift_mastopexy.
- Breast Surgery GIRFT Programme National Specialty Report, February 2021, https://gettingitrightfirsttime.co.uk/wp-content/uploads/2021/09/BreastSurgeryReport-Jul21p.pdf

5. References

- Breast Reconstruction, Breast Cancer Care, January 2018.
- British Association of Aesthetic Plastic Surgeons, Breast Uplift (Mastopexy), accessed 21/02/20, <u>https://baaps.org.uk/patients/procedures/5/breast_uplift_mastopexy</u>
- East Midlands Commissioning Policy for Cosmetic Procedures, version 2, 2014.
- BAAPS. Breast Uplift (Mastopexy) | The British Association of Aesthetic Plastic Surgeons [Internet]. [cited 2021 Dec 21]. Available from: https://baaps.org.uk/patients/procedures/5/breast_uplift_mastopexy

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 Breast Surgeon, CRHFT	December 2022
Consultant in Anaesthesia and Pain, Medicine Clinical Director, CRHFT	December 2022
Consultant Plastic and Reconstruction Surgeon, UHDBFT	December 2022
Oncoplastic Breast Surgeons, UHDBFT	December 2022
Associate Specialist in Plastic Surgery, UHDBFT	December 2022
Clinical Policy Advisory Group (CPAG)	February 2023

Appendix 2 - Document Update

Document Update	Date Updated
 Version 2.0 Policy reviewed. Minor changes include: Minor change to recommendation wording from 'where one asymmetry procedure should be done' to 'where a unilateral procedure can be performed' for clarity Rewording to reflect the new NHS Derby and Derbyshire ICB organisation. References to the 'Getting it Right First Time General surgery report: how to improve clinical quality and efficiency' replaced with more relevant and up to date references to 'Breast Surgery GIRFT Programme National Specialty Report' Addition of the risks associated with mastopexy added to rationale section 	February 2023

Appendix 3 - OPCS Code(s)

• B313 (mastopexy)