

South Central Priorities Committees (Hampshire & Isle of Wight PCTs)

Policy Statement 15: Cosmetic breast surgery

Date of Issue: September 2008

The Hampshire & Isle of Wight Priorities Committee has reviewed the evidence for surgery to alter breast size. The following general principles were adopted:

• Health care aims to improve health status.

• Need for a cosmetic procedure implies:

(1) that there is an impairment of health status resulting from the patient's appearance

(2) "improvement" of appearance is likely to improve the patient's health status

(3) the cosmetic procedure is the most appropriate mechanism for achieving "improvement".

Breast augmentation and reduction surgery are LOW PRIORITY due to lack of evidence of clinical need and/or clinical benefit in most people. The policy applies to males and females and to the treatment of gynaecomastia and breast asymmetry. The only general exception is breast reconstruction after surgery for breast cancer.

Women with complications of previous breast augmentation surgery, such as capsular contracture, are eligible for NHS-funded removal of implants. However, implant replacement is LOW PRIORITY.

Women seeking breast reduction surgery may experience an improvement in their symptoms with a professionally fitted brassière. Those with a body mass index over 27 are also likely to benefit from weight loss.

Any application for exceptional funding should define what health improvement will arise.

There is very little evidence of the clinical and cost-effectiveness of breast augmentation and the correction of asymmetry. Although there is more evidence in favor of breast reduction, the procedure is low priority because it does not usually address a clinical need.

NOTES:

- 1. Exceptional circumstances may be considered where there is evidence of significant health impairment and there is also evidence of the intervention improving health status.***
- 2. This policy will be reviewed in light of new evidence or guidance from NICE.***