

## **Thames Valley Priorities Committee Commissioning Policy Statement**

**Policy No. TVPC 14                      Biological Mesh**

**Recommendation made by  
the Priorities Committee:              March 2015**

**Date of issue:                              November 2015**

Mesh materials have been used for a number of years in surgery as reinforcement, to form a patch under or over the weakness, or in the form of a plug that goes inside a cavity.

The Thames Valley Priorities Committee has considered the evidence of clinical and cost-effectiveness for use of Biological Mesh in breast reconstructive surgery. Biological mesh can be used as an option for suitable patients in post cancer breast reconstruction where:

- an autologous dermal flap in single-stage immediate breast reconstruction is not appropriate
- the patient is not anticipated to require radiotherapy
- all cases must be entered in the iBRA national breast reconstruction audit

Biologic mesh is not normally funded for indications outside of the above.

### **NOTES:**

- Potentially exceptional circumstances may be considered by a patient's CCG where there is evidence of significant health status impairment (e.g. inability to perform activities of daily living) and there is evidence that the intervention sought would improve the individual's health status.
- This policy will be reviewed in the light of new evidence or new national guidance, e.g., from NICE.
- Thames Valley clinical policies can be viewed at <http://www.fundingrequests.ccsu.nhs.uk/>