Lancashire and South Cumbria Clinical Commissioning Groups (CCGs)

Policies for the Commissioning of Healthcare

Policy for the Surgical Management of Gynaecomastia

	Introduction
	This document is part of a suite of policies that the CCG uses to drive its commissioning of healthcare. Each policy in that suite is a separate public document in its own right but will be applied with reference to other policies in that suite.
1	**Policy**
1.1	The CCG will commission the surgical management of gynaecomastia resulting from medical treatment such as the treatment of prostate cancer[1].
1.2	The CCG will not routinely commission the surgical management of gynaecomastia in circumstances other than those in section 1.1 above[1].
2	**Scope and definitions**
2.1	This policy is based on the CCGs Statement of Principles for Commissioning of Healthcare (version in force on the date on which this policy is adopted).
2.2	The surgical management of gynaecomastia is a procedure used to remove excess breast tissue in males.
2.3	The scope of this policy includes requests for surgical procedures of any type whose intended purpose is to address a patient's gynaecomastia.
2.4	The CCG recognises that a patient may have certain features, such as • having gynaecomastia, • wishing to have a service provided to manage their gynaecomastia, • being advised that they are clinically suitable for surgical management of gynaecomastia, and • be distressed by the presence of their gynaecomastia, and by the fact that that they may not meet the criteria specified in this commissioning policy. Such features place the patient within the group to whom this policy applies and do not make them exceptions to it.
2.5	For the purpose of this policy the CCG defines gynaecomastia as the benign enlargement of male breast tissue.
3	**Appropriate Healthcare**

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3.1	The purpose of the surgical management of gynaecomastia is normally to remove the excess tissue that is causing the gynaecomastia
3.2	Some requests for cosmetic procedures such as the surgical management of gynaecomastia arise from an appearance which, although related to pathology, is causing no significant symptoms apart from the appearance and the distress resulting from that appearance. A substantial number of people in the population will have these features. The policy criteria at section 1.2 of the policy rely on the criterion of appropriateness in that the CCG considers that in those circumstances other services competing for the same CCG resource more clearly have a purpose of preserving life or of preventing grave health consequences.
4	**Effective Healthcare**
4.1	The CCG does not call into question the effectiveness of the surgical management of gynaecomastia and therefore this policy does not rely on the Principle of Effectiveness. Nevertheless, if a patient is considered exceptional in relation to the principles on which the policy does rely, the CCG may consider whether the purpose of the treatment is likely to be achieved in this patient without undue adverse effects when considering an application to provide funding.
5	**Cost Effectiveness**
5.1	The CCG does not call into question the cost-effectiveness of the surgical management of gynaecomastia and therefore this policy does not rely on the Principle of Cost-Effectiveness. Nevertheless, if a patient is considered exceptional in relation to the principles on which the policy does rely, the CCG may consider whether the treatment is likely to be Cost Effective in this patient when considering an application to provide funding.
6	**Ethics**
6.1	The CCG does not call into question the ethics of the surgical management of gynaecomastia and therefore this policy does not rely on the Principle of Ethics. Nevertheless, if a patient is considered exceptional in relation to the principles on which the policy does rely, the CCG may consider whether the treatment is likely to raise ethical concerns in this patient when considering an application to provide funding.
7	**Affordability**
7.1	The policy criteria at section 1.2 of the policy rely on the Principle of Affordability. The CCG has a limited budget and must make difficult choices regarding the prioritisation of the resources available to ensure their best use. As a result of the need to manage the healthcare of its population within the budget available, access to cosmetic procedures, such as the surgical management of gynaecomastia, is restricted.

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8	**Exceptions**
8.1	The CCG will consider exceptions to this policy in accordance with the Policy for Considering Applications for Exceptionality to Commissioning Policies.
8.2	In the event of inconsistency, this policy will take precedence over any non-mandatory NICE guidance in driving decisions of this CCG. A circumstance in which a patient satisfies NICE guidance but does not satisfy the criteria in this policy does not amount to exceptionality.
9	**Force**
9.1	This policy remains in force until it is superseded by a revised policy or by mandatory NICE guidance relating to this intervention, or to alternative treatments for the same condition.
9.2	In the event of NICE guidance referenced in this policy being superseded by new NICE guidance, then: • If the new NICE guidance has mandatory status, then that NICE guidance will supersede this policy with effect from the date on which it becomes mandatory. • If the new NICE guidance does not have mandatory status, then the CCG will aspire to review and update this policy accordingly. However, until the CCG adopts a revised policy, this policy will remain in force and any references in it to NICE guidance will remain valid as far as the decisions of this CCG are concerned.
10	**References**
	1. NHS England (2018). Evidence-Based Interventions: Guidance for CCGs https://www.england.nhs.uk/wp-content/uploads/2018/11/ebi-statutory-guidance-v2.pdf

Date of adoption
Date for review

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