

Breast Surgery (for males)

Exceptional Funding Request

Before consideration of referral for management in secondary care, please review advice on the Remedy website (<https://remedy.bnssg.icb.nhs.uk>) or consider use of advice and guidance services where available.

If the patient in question is clinically exceptional compared to the cohort, then an Exceptional Funding Application may be appropriate. The only time when an EFR application should be submitted is when there is a strong argument for clinical exceptionality to be made. EFR applications will only be considered where evidence of clinical exceptionality is provided within the case history/primary care notes in conjunction with a fully populated EFR application form.

Breast Surgery for males is not routinely commissioned.

For more guidance, please see <https://remedy.bnssg.icb.nhs.uk>

Outside the scope of this policy

Breast Surgery for all patients post Breast Cancer is not covered by this policy.

BNSSG ICB is responsible for making the best use of the NHS funds allocated to us to meet the health needs of our local population. The demand for services is greater than the resources available and therefore we have to prioritise the use of funds carefully. Our approach is to prioritise commissioning treatments, operations or drugs that are most effective.

in meeting the health needs of the population. All operations carry significant risks and where symptoms are mild or moderate it is likely that the risks outweigh the benefits. Not all conditions progress and when symptoms can be managed conservatively, that is the safest option.

Breast Surgery (for males) – Plain Language Summary

Breast surgery for male patients can include the following procedures or conditions:

Breast Reduction for Gynaecomastia

Gynaecomastia is common and usually temporary in neonates and adolescent boys. It is thought to occur in about 32 to 36% of men (Lee, 2012).

Gynaecomastia is an enlargement of breast tissue in men. For some people it can be normal. It can also be a side effect of medication or a sign of disease. It is a common feature of obesity. Treatments for painful or embarrassing gynaecomastia can include some medications and surgical procedures.

Gynaecomastia does not usually require treatment. Treating an underlying disorder, or stopping a medication that is likely the cause, may be sufficient, especially if gynaecomastia is relatively recent.

Gender Dysphoria

Breast surgery for patients on the gender dysphoria pathway is the commissioning responsibility of NHS England and is not subject to this policy.

This policy has been developed with the aid of the following references:

1. NHS England (2019) Evidence Based Interventions, Breast Reduction Surgery www.england.nhs.uk
2. National Health Service (2019) Health A to Z: Breast reduction on the NHS [online] www.nhs.uk/conditions
3. National Library of Medicine (2011) The impact of obesity on breast surgery complications (21666541) www.pubmed.ncbi.nlm.nih.gov
4. National Library of Medicine (2009) The impact of breast reduction surgery on low-back compressive forces and function in individuals with macromastia (20009823) www.pubmed.ncbi.nlm.nih.gov
5. National Library of Medicine (2003) An investigation of the suitability of bra fit in women referred for reduction mammoplasty (12859918) www.pubmed.ncbi.nlm.nih.gov
6. National Library of Medicine (2008) Breast size, bra fit and thoracic pain in young women: a correlational study (PMC2275741) www.pubmed.ncbi.nlm.nih.gov
7. National Library of Medicine (2012) Relationship Between Brassiere Cup Size and Shoulder-Neck Pain in Women (PMC3322448) www.pubmed.ncbi.nlm.nih.gov
8. National Library of Medicine (2014) Breast-Related Symptoms Questionnaire (PMC24508223) www.pubmed.ncbi.nlm.nih.gov

9. National Library of Medicine (2011) Obesity in mammoplasty: a study of complications following breast reduction (PMC 20682461) www.pubmed.ncbi.nlm.nih.gov
10. National Library of Medicine (2012) Additional benefits of reduction mammoplasty: a systematic review of the literature (PMC 22090252) www.pubmed.ncbi.nlm.nih.gov
11. National Library of Medicine (2015) How Does Volume of Resection Relate to Symptom Relief for Reduction Mammoplasty Patients? (PMC24508223) www.pubmed.ncbi.nlm.nih.gov
12. Royal College Of Surgeons (2014) Breast Reduction - Commissioning Guide (PMC24508223) www.rcseng.ac.uk

Connected Policies

Breast Surgery Policy (for female) : Treatment will not be offered under this policy. Clinician's should refer to the intervention specific policy.

Cosmetic Surgery: Treatment will not be offered under this policy. Clinician's should refer to the intervention specific policy.

Skin Contouring: Treatment will not be offered under this policy. Clinician's should refer to the intervention specific policy.

Skin Camouflage: Treatment will not be offered under this policy. Clinician's should refer to the intervention specific policy.

Tattoo Removal: Treatment will not be offered under this policy. Clinician's should refer to the intervention specific policy.

Due regard

In carrying out their functions, the Bristol North Somerset and South Gloucestershire Clinical Policy Review Group (CPRG) are committed to having due regard to the Public Sector Equality Duty (PSED), and NHSE Evidence-Based Interventions (EBI). This applies to all the activities for which the CCGs are responsible, including policy development and review.

Document Control

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OPCS Procedure codes

Must have any of (primary only):

B301,B302,B303,B304,B308,B309,B311,B312,B313,B314,B318,B319,B381,B382,B388,B389,B391,B392,B393,B394,B395,B398,B399,B351,B356,B358,B359

Relevant diagnoses for this policy:

ICD10 Code: None

Diagnoses for which the above procedures are permitted:

ICD10 Code: C50, C500, C509, C501, C502, C503, C504, C505, C506, C507, C508, C509D, Z853

Support

If you would like further copies of this policy or need it in another format, such as Braille or another language, please contact the Customer Services Team on: **0117 900 2655** or **0800 073 0907** or email them on BNSSG.customerservice@nhs.net.