

West Yorkshire Integrated Care Board (WY ICB)					
Policy	Facial procedures (Facelift/Rhytidectomy/Brow lift /Blepharoplasty (inc ptosis))			ICB Ref	Planned care
First Issue Date	To be confirmed	Current version:	1	Last reviewed:	May 2022
Review date	To be confirmed	Contact	West Yorkshire Health and Care Partnership (WY HCP) wyhcp.plannedcare@nhs.net		
Clinical Reviewer	WY HCP	Approved by	WY ICB		
Policy exclusions					
<p>Facial procedures (facelift/Rhytidectomy and brow lift surgery) without medical/functional necessity are considered cosmetic and will not be funded. These treatments will not be available to treat the natural processes of ageing.</p> <p>Blepharoplasty (including ptosis and brow lift) is not routinely funded. Without medical necessity/functional impairment, this procedure is considered cosmetic. This policy also applies to ptosis and brow lift procedures.</p> <p>The following clinical circumstances are not considered to be functional</p> <ul style="list-style-type: none"> • Dermatitis • Difficulty wearing a prosthesis in an anophthalmic socket • Temporal visual field impairment preventing a driver from meeting licensing standards <p>These requests may be considered for IFR approval if:</p> <ol style="list-style-type: none"> 1. Documentary evidence has been received that all other treatment options currently funded by the NHS have been exhausted or are contraindicated. 2. This is accompanied by a letter from a Consultant or appropriate specialist in the specialty related to the clinical reason cited for surgery (e.g. a Consultant Ophthalmologist) confirming that there are no suitable evidence-based treatment options other than surgery. <p>NB Exceptions to this policy relate to reconstructive procedures which are routinely commissioned. This policy does not apply to patients with entropion, ectropion or pseudotriciasis where blepharoplasty is funded routinely if required.</p>					
Policy inclusion criteria					
Facelift/Rhytidectomy and other cosmetic facial surgery procedures are not routinely commissioned. Any requests that are not medically necessary are considered cosmetic and will not be funded. Facelift/Rhytidectomy may be considered on an					

individual, exceptional basis, where the GP or consultant has completed the necessary Individual Funding Request form.

Cases may be considered on an exceptional basis, for treatment of:

- Congenital facial abnormalities
- Facial palsy (congenital or acquired paralysis)
- As part of the treatment of specific conditions affecting the facial skin, e.g. cutis laxa pseudoxanthoma elasticum, neurofibromatosis
- To correct the consequences of trauma
- To correct deformity following surgery

In addition to the above, for a Browlift procedure the following will also be required:

- Results from an appropriate visual fields test with eyelid un-retracted to determine visual disturbance. Please refer to Blepharoplasty below for brow lift exceptionality criteria.

Blepharoplasty is not routinely commissioned. Any requests that are not medically necessary are considered cosmetic and will not be funded. Blepharoplasty may be considered on an individual, exceptional basis, where the GP or consultant has completed the necessary Individual Funding Request form.

- Impairment of visual fields in the relaxed, non-compensated state where there is evidence that eyelids impinge on visual fields.
- Clinical observation of poor eyelid function, discomfort, e.g. headache worsening towards end of day and/or evidence of chronic compensation through elevation of the brow.
- Significant ectropion or entropion that requires correction or for the removal of lesions of the eyelid skin or lid margin.
- To correct prosthesis difficulties in an anophthalmia socket.
- To treat periorbital sequelae of nerve palsy.
- To relieve painful symptoms of blepharospasm.

Along with the above, the following must be present;

- Marginal reflex distance (vertical distance between the top of the pupil and the midline of the pupil) of no more than 2mm shown in photographs of straight gaze.

AND

- Demonstrated superior visual field defect on Humphrey 24-2 visual field test (this test can be performed by either an ophthalmologist or an optometrist) Results from an appropriate visual fields test will be required with the eyelid/s both retracted and un-retracted to rule out any pathological causes. With a Superior visual field loss of 12 degrees or 24%

OR

- Down-gaze ptosis impairing reading documented by MRD1 of <2 mm measured in down gaze.

OR

- Chin-up backward head tilt induced by visual field impairment caused by lids.

OR

- Interference with occupational duties and safety resulting from visual impairment caused by the upper lids

OR

- Symptoms of visual interference due to the upper eyelid position

NB: Lower lid Blepharoplasty except for correction of ectropion or entropion or for the removal of lesions of the eyelid skin or lid margin is not included in the above exceptionality criteria. Excessive skin on the lower lid may cause “eye bags” but does not affect the function of the eyelid or vision and therefore does not need correction.

Congenital ptosis

Status: routinely commissioned in certain circumstances

Surgical correction of congenital ptosis is medically necessary to allow proper visual development and prevent amblyopia in infants and children with moderate to severe ptosis interfering with vision. Surgery is considered cosmetic for mild ptosis that is only of cosmetic concern without visual interference and does not need correction. Photographs must be available for review to document that the skin or upper eyelid margin obstructs a portion of the pupil.

Summary of evidence / Rationale	<ol style="list-style-type: none"> 1. Information for Commissioners of Plastic Surgery Services. Referrals and Guidelines in plastic surgery (PDF); http://www.bapras.org.uk/docs/default-source/commissioning-and-policy/information-for-commissioners-of-plastic-surgery-services.pdf?sfvrsn=2 2. Cosmetic procedures - Facelift - NHS (www.nhs.uk) 3. Evidence to support clinical outcomes for improved visual fields and relief of headache after Blepharoplasty; https://pubmed.ncbi.nlm.nih.gov/30528286/ 4. Cosmetic procedures - Eyelid surgery - NHS (www.nhs.uk)
Reference	