Correction of Chest Wall Deformity

Policy Statement

Policy - Criteria to Access Treatment – PRIOR APPROVAL FUNDING REQUIRED

The CCG will only agree to fund assessment for and surgical correction of chest wall deformities where:

• there is evidence that the chest wall deformity is manifestly impairing cardiac or respiratory function,

OR

• The patient is suffering from significant functional impairment due to their chest wall deformity. Significant functional impairment is defined by the commissioner as:
  o Symptoms prevent the patient fulfilling routine work or educational responsibilities, or
  o Symptoms prevent the patient carrying out routine domestic or carer activities

Background

Congenital Chest Wall deformities are very common and occur in around 3 per 1000 people. They are generally asymptomatic conditions which cause cosmetic concern.

Pectus excavatum or ‘funnel chest’, is a congenital condition where the breastbone takes on a concave, hollow appearance resulting in an unusual chest contour. It is thought to be an inherited condition. It is the most common congenital deformity of the sternum and anterior chest wall. The cosmetic disfigurement of pectus excavatum may rarely be accompanied by impaired cardiac or respiratory function.

Pectus carinatum is often referred to as ‘pigeon chest’ is where the breastbone bows forwards.

Pectus Arcuatum, is a rarer third type in which a high ridge across the sternum causes the rest of the chest to take on a flatter shaper

Patients presenting with concerns with the cosmetic appearance of their chest wall deformity should be offered reassurance and assistance in managing concerns, including if necessary referral to local mental health services. Patients should not be referred for surgical assessment in such circumstances.

Patients who are not eligible for treatment under this policy may be considered on an individual basis where their GP or consultant believes exceptional circumstances exist that warrant deviation from the rule of this policy.

Individual cases will be reviewed at the Commissioner’s Individual Funding Request Panel upon receipt of a completed application form from the patient’s GP, Consultant or Clinician. Applications cannot be considered from patients personally.

If you would like further copies of this policy or need it in another format, such as Braille or another language, please contact the Patient Advice and Liaison Service on 0800 073 0907 or 0117 947 4477.

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


NICE IPG 310 http://publications.nice.org.uk/placement-of-pectus-bar-for-pectus-excavatum-also-known-as-mirpe-or-the-nuss-procedure-ipg310/guidance
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