



# **Commissioning Policy**

Elective Hip Replacement Surgery
Criteria Based Access (CBA)

Date adopted: September 2020

Version: 0.5

# **Authorisation and document control**

Name of policy:	Elective Hip Replacement Surgery
Job title of author:	Senior Commissioning Programme Manager
Name of sign off group:	

Equality and Engagement Impact Assessment	
Date Equality and Engagement Impact Assessment was completed:	

Consultation	
Name of group	Date considered
MSK Clinical Programme Group lead clinicians	

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Commissioning Policy Review Group	11.06.2024
System Quality Committee	

Date of adoption	
Date of publication	
Review date	December 2026
To be reviewed by (job title)	Commissioning Manager, Elective Care

Version co	Version control			
Version number	Date	Summary of changes	Author/Editor	Approved by
0.1				
0.2	04.04.2019	Policy review date changed to April 2022. Evidence base updated	Assistant IFR Manager	ECCP Group
0.3	17.09.2020 (ECCP meeting)	Policy review date changed to September 2023. Title changed to Elective from Primary	Assistant IFR Manager	ECCP Group

		agreed at MSK review. Minor wording changes ratified by M Walkingshaw & M Andrews-Evans October 2020.		
0.4	12.12.2023	Review date changed to December 2026. Link to Kellgren-Lawrence system added. Removal of 'Conventional radiograph grading' paragraph' under policy statement. Approved by Executive Director M Walkingshaw 21.2.24		ECCP Group
0.5	11.06.2024	Removal of Kellgren Lawrence link under Policy Statement as no longer necessary. No change to criteria or review date. Policy moved to new policy template	Programme Manager/ Assistant IFR	CPRG

## 1.0 Background

Where a patient meets the criteria set out in this policy the decision to go ahead with surgery should be made using the principles of shared decision making to ensure that any decision is reached jointly taking into account the patient's needs and preferences.

New GP referrals should normally be made via the MSK specialist triage service in line with the agreed local pathway.

Surgical intervention should only be considered where the patient's general physical and mental health is sufficiently good to expect that significant improvement in pain and function will result from surgery.

# 2.0 Policy statement

Policy	Policy details
category	
CBA	The ICB will only fund surgical treatment for patients who meet the criteria set out
	below:
	The patient is suffering from significant persistent pain as defined within the policy.
	AND
	The patient is suffering from significant functional impairment as defined within the
	policy.
	AND
	The patient's symptoms persist despite the patient having fully engaged with
	conservative measures as defined by NICE Quality Standard QS87 (Quality Standard
	7: Core treatments before referral for consideration of joint surgery) for a period of 3
	months (unless the patient has severe persistent pain that is causing severe functional
	impairment which is compromising their mobility to such an extent that they are in
	immediate danger of losing their independence and joint replacement would relieve
	this, and conservative management as set out in this policy is contra-indicated).
	Definition of significant persistent pain
	Pain of almost continuous nature despite appropriate analgesia.
	i am or annost continuous nature despite appropriate analyesia.

- Pain when walking short distances on level surfaces or standing for less than half an hour.
- Daily activities limited.

#### Definition of significant functional impairment

- Functional capacity adequate to perform only a few normal activities and selfcare.
- Walking capacity limited usually less than 30 minutes.
- Aids such as a cane are often required.

### MRI grading (MRI not routinely required)

- grade 0: normal
- grade 1: inhomogeneous high signal intensity in cartilage (T2WI)
- grade 2: inhomogeneity with areas of high signal intensity in articular cartilage (T2WI); indistinct trabeculae or signal intensity loss in femoral head & neck (T1WI)
- grade 3: criteria of grade 1 and 2 plus indistinct zone between femoral head & acetabulum; subchondral signal loss due to bone sclerosis

grade 4: above criteria plus femoral head deformity

Hip replacement surgery is an effective but invasive treatment and should only be undertaken when more conservative approaches have failed to adequately address the problem.

#### 3.0 Patients who are not eligible for treatment under this policy

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 ICB'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.

#### 4.0 Connected policies

GICB policy on hip arthroscopy <a href="https://www.nhsglos.nhs.uk/wp-content/uploads/2023/07/Hip-Arthroscopy.pdf">https://www.nhsglos.nhs.uk/wp-content/uploads/2023/07/Hip-Arthroscopy.pdf</a>

GICB policy on hip impingement surgery <a href="https://www.nhsglos.nhs.uk/wp-content/uploads/2023/07/Hip-impingement-surgery.pdf">https://www.nhsglos.nhs.uk/wp-content/uploads/2023/07/Hip-impingement-surgery.pdf</a>

GICB policy on hip resurfacing techniques <a href="https://www.nhsglos.nhs.uk/wp-content/uploads/2023/07/Hip-resurfacing-techniques.pdf">https://www.nhsglos.nhs.uk/wp-content/uploads/2023/07/Hip-resurfacing-techniques.pdf</a>

#### 5.0 References

British Orthopaedic Association/Royal College of Surgeon. *Commissioning Guide: Pain Arising from the Hip in Adults*. 2017. <a href="https://www.rcseng.ac.uk/-/media/files/rcs/standards-and-research/commissioning/boa--pain-arising-from-the-hip-quide-2017.pdf">https://www.rcseng.ac.uk/-/media/files/rcs/standards-and-research/commissioning/boa--pain-arising-from-the-hip-quide-2017.pdf</a>

NICE Quality Standard QS87. Quality Standard 7: Core treatments before referral for consideration of joint surgery. 2015. <a href="https://www.nice.org.uk/guidance/qs87/chapter/Quality-statement-7-Core-treatments-before-referral-for-consideration-of-joint-surgery">https://www.nice.org.uk/guidance/qs87/chapter/Quality-statement-7-Core-treatments-before-referral-for-consideration-of-joint-surgery</a>

Li KC, Higgs J, Aisen AM et-al. MRI in osteoarthritis of the hip: gradations of severity. Magn Reson Imaging. 6 (3): 229-36. - Pubmed citation

Atlas of standard radiographs of arthritis Unesco and WHO <a href="Atlas of Standard Radiographs of Arthritis">Atlas of Standard Radiographs of Arthritis</a> <a href="Rheumatology">Rheumatology</a> | Oxford Academic (oup.com)</a> <a href="NG157">NG157</a> https://www.nice.org.uk/guidance/ng157