

Botulinum toxin for axillary hyperhidrosis

Commissioning decision	The ICB will provide funding for Botulinum toxin for axillary hyperhidrosis for patients who meet the criteria defined within this policy. Funding approval for eligible patients must be sought from the ICB via the Prior Approval process prior to initial treatment. Where treatment is successful there is no requirement to seek Prior Approval for subsequent injections where the treating clinician believes this will continue to deliver benefit'
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Policy Statement:

NHS Gloucestershire Integrated Care Board (ICB) will fund the use of botulinum toxin for axillary hyperhidrosis where:

- The patient suffers from severe **axillary** hyperhidrosis
AND
- Symptoms have lasted for at least 6 months
AND
- Conservative measures including high strength antiperspirants and topical aluminium chloride have failed
AND
- Symptoms are causing significant functional impairment which prevents the individual from fulfilling work/study/carer and/or domestic responsibilities.

Where treatment is successful there is no requirement to seek Prior Approval for subsequent injections where the treating clinician believes this will continue to deliver benefit

Botulinum toxin to treat axillary hyperhidrosis (excessive sweating) should not be offered to people with social anxiety disorder. This is because there is no good quality evidence showing benefit from botulinum toxin in the treatment of social anxiety disorder and it may be harmful.

Rationale:

Botulinum toxin is a licensed treatment for axillary hyperhidrosis. However, it should only be used in severe cases where alternative treatments have failed. Known adverse effects from the use of Botulinum toxin for hyperhidrosis include compensatory sweating (5-10% of patients) and injection-site pain or reactions (9-12% of patients). Transient muscle weakness and loss of fine motor control, as well as anaphylaxis, have also been reported.

Plain English Summary:

Hyperhidrosis is a condition characterised by abnormally increased sweating. It is usually treated through conservative measures including use of high strength antiperspirants aluminium chloride. In rare cases where conservative treatments are not effective botulinum toxin (botox) injections may be considered as a treatment option.

If your doctor believes that you meet the criteria set out in this policy, they can submit a Prior Approval application to the ICB in order to seek funding approval for your treatment. The ICB will review your case and if we agree that the criteria have been met, we will authorise funding.

Policy Category:
CBA & PA
Who usually applies for funding?
GP/Consultant

Botulinum toxin for hyperhidrosis to all other areas of the body may be considered on an individual basis where the clinician believes exceptional circumstances exist.

Individual cases will be reviewed at the ICB's Individual Funding Request Panel upon receipt of a completed application form from the patient's Clinician. Applications cannot be considered from patients personally.

Evidence base:

NICE Clinical Knowledge Summary - <http://cks.nice.org.uk/hyperhidrosis#!scenario>
 NICE do not do list Social Anxiety Disorder (CG159) published 2013

For further information please contact GLICB.IFR@nhs.net

Date of Publication	4 April 2016
Policy review date	September 2025

Policy sign off

Reviewing Body	Date of review
Effective Clinical Commissioning Policy Group	17 September 2015 31 August 2017
Integrated Governance and Quality Committee	3 March 2016

Version Control

Version No	Type of Change	Date	Description of Change
1		April 2016	Initial policy
2	Date		Review date changed to Aug 2019
3	Date. Minor wording	Sept 2019	Review date changed to Sept 2022. Minor wording change regarding subsequent injections.
4	Review date only	22.09.2022	Review date changed to September 2025. No changes to policy.