



Commissioning Policy

Surgical Removal of Lipomata

Prior Approval (PA)

Date adopted: 10.12.2024. Version: v2

Authorisation and document control

Name of policy:	Surgical removal of lipomata
Job title of author:	Commissioning Manager – Elective Care
Name of sign off group:	Commissioning Policy Review Group (CPRG)

Equality and Engagement Impact Assessment

Date Equality and Engagement Impact Assessment	15/10/24
was completed:	

Consultation	
Name of group	Date considered
Clinical & care lead for elective care (ICB)	01/07/2024
Clinical lead for upper GI surgery (GHNHSFT)	20/09/2024

Authorisation		
Date approved		
10.12.2024		

Date of adoption	
Date of publication	October 2020
Review date.	December 2027
To be reviewed by Commissioning Manager – Elective Care	

Version control				
Version number	Date	Summary of changes	Author/Editor	Approved by
0.1	Sept 2020	Skin & Subcutaneous Policy split into three separate policies (1) Removal of benign Skin lesions (2) Surgical		ECCP Group

		removal of lipomata and (3) Cosmetic skin and subcutaneous procedures.		
0.2	Oct 2024	Policy amended to emphasise only removing large (>5cm) or significantly symptomatic lipomas causing functional impairment of daily life. Encouragement to remove lipomas in primary care has been removed from the policy. Policy moved to new template. Review date of December 2027 agreed.	Elective Care.	Commissioning Policy Review Group (CPRG)

1.0 Background

Lipomas are soft fatty lumps under the skin. They are harmless and do not usually require any treatment. In Gloucestershire removal is supported where the lipoma is particularly large (over 5cm) or where it is causing significant issues on a day-to-day basis that prevent the patient from undertaking normal activities.

National guidance recommends that "the excision of lipomas should only be undertaken by health professionals who have had the appropriate training in skin surgery, understand the anatomy of where the lipoma is found and are able to use surgical techniques that close the dead space following the removal of the lipoma".

Soft tissue subcutaneous lesions, particularly over 5cms, that are not clearly longstanding and asymptomatic may be a soft tissue sarcoma. NICE guidance suggests that a rapid access ultrasound scan is usually the most appropriate diagnostic test to check the nature of any suspicious lesions which then, if abnormal, should be referred on to a Specialist Sarcoma Centre. Health professionals should follow the local sarcoma pathway which provides advice on imaging and referral.

2.0 Policy statement

Policy category	Policy details
PA	 Gloucestershire ICB will only consider funding for secondary care treatment of lipomata where the following criteria are met: Obvious/proven lipoma that is large (>5cms) on the body or in a particularly difficult site e.g. sub-facial position. OR
	 The lipoma is causing continuous pressure symptoms in the course of daily activities such that there is functional impairment of daily life (details of the impact on daily activities to be included in the prior approval application). Prior Approval must be granted by Gloucestershire ICB before treatment.

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

- <u>Removal of benign skin lesions</u>
- Cosmetic procedures general principles
- Cosmetic skin and subcutaneous procedures

5.0 References

- Review of local IFR policies BSW, BNSSG and BOB.
- Primary Care Dermatology Society (PCDS): Lipoma <u>https://www.pcds.org.uk/clinical-guidance/lipoma</u>