

**Policy Category:**

**CBA&PA**

**Who usually applies for funding?**

**GP/Consultant**



### Male breast reduction for gynaecomastia

<b>Commissioning decision</b>	<b>The ICB will provide funding for male breast reductions for gynaecomastia 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 treatment.</b>
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**Policy Statement:**

Surgery will be funded for gynaecomastia (growth of glandular tissue in male breast) where:

- The reduction in breast tissue will be significant (i.e. 250g or more), with Simon Grade 3 or more (see evidence section)  
**OR**
- There is gross asymmetry

In addition the patient must:

- Be post-pubertal  
**AND**
- Be  $\geq 18$  years of age and the condition persistent for 2 years  
**AND**
- Have a BMI of  $\leq 25$   
**AND**
- Have been investigated for possible endocrinological and/or drug related causes (see evidence section)

**Rationale:**

Most cases of gynaecomastia are idiopathic. It can also occur during puberty, when it tends to resolve as the post-pubertal fat distribution is complete. It can also occur secondary to medication such as oestrogens, gonadotrophins, digoxin, spironolactone and cimetidine, as well as anabolic steroids.

Rarely it may be caused by an underlying endocrine abnormality or a drug related cause including the abuse of anabolic steroids. It is important that male breast cancer is not mistaken for gynaecomastia and, if there is any doubt, an urgent consultation with an appropriate specialist should be obtained.

**Plain English Summary:**

Gynaecomastia is a common condition that causes boy's and men's breasts to swell and become larger than normal. It is most common in teenage boys and older men. Signs vary from a small amount of extra tissue around the nipples to more prominent breasts. It can affect one or both breasts. Sometimes, the breast tissue can be tender or painful, but this isn't always the case.

Gynaecomastia can be caused by an imbalance between the sex hormones testosterone and oestrogen. Oestrogen causes breast tissue to grow. While all men produce some oestrogen, they usually have much higher levels of testosterone, which stops the oestrogen from causing breast tissue to grow. If the balance of hormones in his body changes, this can cause a man's breasts to grow. Sometimes, the cause of this imbalance is unknown. The

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growth in breast tissue is not due to extra body fat from being overweight, so losing weight or doing more exercise will not improve the condition.

In rare cases, gynaecomastia can be caused by:

- side effects of medication, such as anti-ulcer drugs or medication for heart disease
- illegal drugs, such as cannabis or anabolic steroids
- drinking too much alcohol
- a health abnormality, such as kidney failure or liver disease
- Klinefelter's syndrome, a rare genetic disorder
- lumps or infection in the testicles

There are two types of treatment for gynaecomastia:

- surgery to remove the excess breast tissue
- medication to adjust a hormone imbalance

Procedures such as breast reduction surgery are not usually available on the NHS unless there is a clear medical need. 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 surgery. The ICB will review your case and if we agree that the criteria have been met, we will authorise funding.

**Evidence base:**

Lanitis S, Starren E, Read J, Heymann T, Tekkis P, Hadjiminis DJ, Al Mufti R  
*Surgical management of Gynaecomastia: outcomes from our experience*

Gynaecomastia – Practice Clinical Updates

<http://www.bmj.com/content/bmj/354/bmj.i4833.full.pdf>

Diagnosis and assessment and drug related causes

[www.patient.co.uk/doctor/gynaecomastia](http://www.patient.co.uk/doctor/gynaecomastia)

Gynaecomastia classification and treatment options – evidence basis

<http://northwestcsu.nhs.uk/BrickwallResource/GetResource/c1753ce3-ee54-449b-bb04-201ea9b69c57>

Prostate Cancer - dealing with the side effects of treatment – enlarged breasts.

<https://www.nice.org.uk/guidance/cg175/ifp/chapter/Dealing-with-the-side-effects-of-treatment>

Simon et al. (Simon BE, Hoffman S, Kahn S. Classification and surgical correction of gynecomastia *Plast Reconstr Surg* . 1973;51:48) divided gynecomastia into four grades as follows:

- **Grade 1:** Small enlargement, no skin excess
- **Grade 2a:** Moderate enlargement, no skin excess
- **Grade 2b:** Moderate enlargement with extra skin
- **Grade 3:** Marked enlargement with extra skin

For further information please contact [GLICB.IFR@nhs.net](mailto:GLICB.IFR@nhs.net)

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<b>Date of publication</b>	1 <sup>st</sup> August 2015 (Minor amendment 7 <sup>th</sup> February 2017)
<b>Policy review date</b>	November 2023

**Policy sign off**

<b>Reviewing Body</b>	<b>Date of review</b>
Effective Clinical Commissioning Policy Group	8 <sup>th</sup> November 2016
Integrated Governance and Quality Committee	18 <sup>th</sup> June 2015

**Version Control**

<b>Version No</b>	<b>Type of Change</b>	<b>Date</b>	<b>Description of Change</b>
1		1.8.15	
2	Date & link added	18.10.18	Review date changed to Nov 2023. Link to Prostate Cancer (dealing with side effects of treatment) added