

Policy Category:

CBA

Who usually applies for funding?

Not applicable

Elective Hip Replacement Surgery

Commissioning decision	<p>The ICB will provide funding for hip replacement surgery for patients who meet the criteria defined within this policy.</p> <p>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.</p> <p>New GP referrals should normally be made via the MSK specialist triage service in line with the agreed local pathway.</p> <p>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.</p>
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Policy Statement:

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 has radiological features of severe or moderate OA (Grade 2 or above using the [Kellgren and Lawrence system](#)) or other significant pathology requiring hip replacement (e.g. Avascular necrosis (AVN), Congenital dislocation/dysplasia of the hip, inflammatory arthropathy, failed fracture management, metastatic cancer/malignancy, PVNS, synovial chondromatosis)

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*
- *Pain when walking short distances on level surfaces or standing for less than half an hour*

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- *Daily activities limited*

Definition of significant functional impairment

- *Functional capacity adequate to perform only a few normal activities and self-care*
- *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

Rationale:

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.

Evidence base:

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

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

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 [Atlas of Standard Radiographs of Arthritis | Rheumatology | Oxford Academic \(oup.com\)](#)
NG157 <https://www.nice.org.uk/guidance/ng157>

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

Date of publication	September 2020
Policy review date	December 2026

Policy sign off:

Reviewing Body	Date of review
Effective Clinical Commissioning Policy Group	17.09.2020
Quality and Governance Committee	Amendments agreed Oct 20

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Not applicable

Version Control:

Version No	Type of Change	Date	Description of Change
0.1			
0.2	Policy review date & evidence base update	4.4.2019	Policy review date changed to April 2022. Evidence base updated
0.3	Policy review date; title change, minor wording change.	17.9.2020 (ECCP meeting)	Policy review date changed to September 2023. Title changed to Elective from Primary agreed at MSK review. Minor wording changes ratified by M Walkingshaw & M Andrews-Evans Oct 20
0.4	Review date Link added Minor change	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