Commissioning Policy

Arthroscopic Knee Surgery

Criteria Based Access

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Version: 2.1

Authorisation and document control

Name of policy:	Arthroscopic Knee Surgery
Job title of author:	Senior Commissioning Programme Manager, Elective Care
Name of sign off group:	Commissioning Policy Review Group

Equality and Engagement Impact Assessment	
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MSK CPG Clinical Leads	January 2024

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To be reviewed by (job title)	Commissioning Manager, Elective Care

Version control				
Version number	**Date**	**Summary of changes**	**Author/Editor**	**Approved by**
1.0	16/05/2017	Criteria updated following MSK CPG review	Commissioning Manager, Elective Care	ECCP

| 2.0 | 17/09/2020 | Minor wording changes | ECCP group | Executive Directors |
| 2.1 | 19/02/2024 | Policy moved to new policy template. No change to criteria | Senior Programme Manager, Elective Care | CPRG |

1.0   Background

A knee arthroscopy is a surgical technique whereby a small telescope is inserted into a joint to inspect, diagnose, and treat intra-articular problems.

Knee irrigation or washout involves flushing the joint with fluid which is introduced through small incisions in the knee. NICE and reviewed the evidence for how well knee washout works for people with osteoarthritis which has shown that knee washout for people with osteoarthritis did not reduce pain nor improve how well their knees worked. Arthroscopic washout is therefore not routinely funded by NHS Gloucestershire ICB.

Conservative treatments such as physiotherapy and exercise have been shown to be effective for patients with knee pain and should be fully explored before arthroscopic surgery is considered. However, where this fails to resolve issue and the patient is suffering from clear mechanical symptoms arthroscopic knee surgery may be appropriate.

2.0   Policy statement

Policy details
Arthroscopic knee surgery is not commissioned for diagnostic purpose or to provide arthroscopic washout alone as a treatment for chronic knee pain due to osteoarthritis (this procedure may be appropriate in conditions such as septic arthritis). Arthroscopic knee surgery for degenerative meniscal tears is funded where the following criteria are met: • 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   **AND** • The patient has clinical signs of a meniscal tear with clinically significant mechanical symptoms such as catching, locking, instability or giving way.

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 Total Knee Replacement policy -
https://www.nhsglos.nhs.uk/wp-content/uploads/2023/07/Total-Knee-Replacement.pdf

5.0   References

British Association for Surgery of the Knee (BASK), *Meniscal Surgery Guidelines*. 2018.
https://boneandjoint.org.uk/article/10.1302/0301-620X.101B6.BJJ-2019-0126.R1/pdf

National Institute for Health and Clinical Excellence, NICE Guideline NG157
https://www.nice.org.uk/guidance/ng157

Academy of Medical Royal Colleges, Evidence Based Interventions Guidance on Arthroscopic Surgery for Meniscal Tears,
https://ebi.aomrc.org.uk/interventions/arthroscopic-surgery-for-meniscal-tears/