



Commissioning Policy

Elective Hip Replacement Surgery
Criteria Based Access (CBA)

Date adopted: September 2020

Version: 0.5

Authorisation and document control

Name of policy:	Elective Hip Replacement Surgery
Job title of author:	Senior Commissioning Programme Manager
Name of sign off group:	

Equality and Engagement Impact Assessment	
Date Equality and Engagement Impact Assessment was completed:	

Consultation	
Name of group	Date considered
MSK Clinical Programme Group lead clinicians	

Authorisation	
Name of group	Date approved
Commissioning Policy Review Group	11.06.2024
System Quality Committee	

Date of adoption	
Date of publication	
Review date	December 2026
To be reviewed by (job title)	Commissioning Manager, Elective Care

Version control				
Version number	Date	Summary of changes	Author/Editor	Approved by
0.1				
0.2	04.04.2019	Policy review date changed to April 2022. Evidence base updated	Assistant IFR Manager	ECCP Group
0.3	17.09.2020 (ECCP meeting)	Policy review date changed to September 2023. Title changed to Elective from Primary	Assistant IFR Manager	ECCP Group

		agreed at MSK review. Minor wording changes ratified by M Walkingshaw & M Andrews-Evans October 2020.		
0.4	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	Assistant IFR Manager	ECCP Group
0.5	11.06.2024	Removal of Kellgren Lawrence link under Policy Statement as no longer necessary. No change to criteria or review date. Policy moved to new policy template	Manager/ Assistant IFR	CPRG

1.0 Background

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.

New GP referrals should normally be made via the MSK specialist triage service in line with the agreed local pathway.

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.

2.0 Policy statement

Policy	Policy details
category	
СВА	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) 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.
- Daily activities limited.

Definition of significant functional impairment

- Functional capacity adequate to perform only a few normal activities and selfcare.
- 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

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.

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 policy on hip arthroscopy https://www.nhsglos.nhs.uk/wp-content/uploads/2023/07/Hip-Arthroscopy.pdf

GICB policy on hip impingement surgery https://www.nhsglos.nhs.uk/wp-content/uploads/2023/07/Hip-resurfacing-techniques.pdf

5.0 References

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-quide-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. - <u>Pubmed citation</u>

Atlas of standard radiographs of arthritis Unesco and WHO <u>Atlas of Standard Radiographs of Arthritis | Rheumatology | Oxford Academic (oup.com)</u>
NG157 https://www.nice.org.uk/guidance/ng157