

Aesthetic Surgery (Other)

Version 2.8 (3 April 2025)

Criteria

1. This commissioning statement does not apply to individuals under the age of 18 years.
2. Prosthetic testicle insertion is commissioned for congenital absence of the testis and for reconstruction where orchidectomy is carried out as part of life saving surgery.
3. Haemangiomas - surgical intervention and / or laser therapy is commissioned for those haemangiomas effecting the eyes and nose where haemangiomas have failed to resolve naturally and they are causing significant deformity or impacting on functioning interventions.
4. Rhinophyma - The commissioned first line treatment of this condition of the nasal skin is medical. Severe cases or those that do not respond to medical treatment may be considered for surgery or laser treatment.
5. Surgical treatment for vitiligo is not routinely commissioned. The usual treatment for hypopigmentation / vitiligo is Cosmetic Camouflage.
6. Face Lifts / Brow Lifts (including Rhytidectomy) - These are not routinely commissioned to treat the natural processes of ageing. Where there is significant deformity or an impact on normal functioning, then a request can be made via Individual Funding Request if the clinician feels there is a good case for clinical exceptionality. For brow lifts to treat visual field problems, please refer to the GM Correction of dermatochalasis commissioning statement.
7. Liposuction is not routinely commissioned. Applications for non-aesthetic use of liposuction can be made via Individual Funding Request if the clinician feels there is a good case of clinical exceptionality.
8. Any procedures carried out for purely aesthetic reasons are not routinely commissioned, this includes the treatment of birthmarks (for Haemangiomas please see specific criteria below).
9. Vaginoplasty for aesthetic reasons only, is not routinely commissioned. Vaginoplasty as part of the gender transition pathway is commissioned by NHS England, however surgery for late complications or problems with the outcome of vaginoplasty is commissioned where clinically indicated.
10. Bilateral limb lengthening / shortening solely to increase or decrease height is not commissioned. Please also note the exclusions below.

11. Surgical correction of pectus deformities falls under the remit of NHS England Specialised commissioning. Please see: [NHS England Policy: Surgery for pectus deformity](#)
12. Botulinum toxin is commissioned for Frey's syndrome or Blepharospasm. Please also note the exclusions below
13. Botulinum toxin is not available for the treatment of ageing or excessive wrinkles.

Exclusions

1. Operations on congenital anomalies of the face and skull are excluded from this commissioning statement.
2. Aesthetic procedures undertaken to correct the consequences of trauma or to correct deformity following surgery (unless that surgery was undertaken for aesthetic surgery) are excluded from this commissioning statement.
3. Aesthetic procedures undertaken as part of the treatment localised fat atrophy or pathological hypertrophy (for example: multiple lipomatosis, lipodystrophies) or as an adjunct to other surgical procedures are excluded from this commissioning statement.
4. Limb lengthening surgery to address deficiency or inequality in leg length resulting in a limp or limiting functional ability is excluded from this commissioning statement.
5. Botulinum toxin used as an agreed and recognised part of a care pathway e.g. cerebral palsy or stroke management is excluded from this commissioning statement.

Notes for clinicians:

1. Body contouring procedures, including panniculectomy (apronectomy) please refer to the [GM Body Contouring Commissioning Statement](#)
2. Botulinum toxin for hyperhidrosis is covered by the [GM Hyperhidrosis Commissioning Statement](#)
3. Botulinum toxin for migraine is covered by the [GM Headache Commissioning Statement](#)
4. When referring to secondary care for treatment, please ensure you include enough detail for secondary care clinicians to triage against, otherwise referrals could be rejected.
5. Treating clinicians can submit an Individual Funding Request, also known as an IFR, outside of this guidance if they feel there is a good case for exceptionality. More information on determining clinical exceptionality can be found in the [Greater Manchester IFR Operational Policy](#).