# Botulinum toxin for hyperhidrosis

|  |  |
| --- | --- |
| **Commissioning decision** | **The CCG will provide funding for Botulinum toxin for hyperhidrosis for patients who meet the criteria defined within this policy. Funding approval for eligible patients must be sought from the CCG via the Prior Approval process prior to initial treatment. Where treatment is successful there is no requirement to seek Prior Approval for subsequent injections where the treating clinician believes this will continue to deliver benefit’** |

**Policy Statement:**

|  |
| --- |
| Gloucestershire Clinical Commissioning Group will fund the use of botulinum toxin for hyperhidrosis where:* The patient suffers from severe axillary hyperhidrosis

**AND*** Symptoms have lasted for at least 6 months

**AND*** Conservative measures including high strength antiperspirants and topical aluminium chloride have failed

**AND*** Symptoms are causing significant functional impairment which prevents the individual from fulfilling work/study/carer and/or domestic responsibilities.

**Where treatment is successful there is no requirement to seek Prior Approval for subsequent injections where the treating clinician believes this will continue to deliver benefit**Botulinum toxin to treat hyperhidrosis (excessive sweating) should not be offered to people with social anxiety disorder. This is because there is no good quality evidence showing benefit from botulinum toxin in the treatment of social anxiety disorder and it may be harmful. |

# Rationale:

Botulinum toxin is a licensed treatment for axillary hyperhidrosis. However, it should only be used in severe cases where alternative treatments have failed. Known adverse effects from the use of Botulinum toxin for hyperhidrosis include compensatory sweating (5-10% of patients) and injection-site pain or reactions (9-12% of patients). Transient muscle weakness and loss of fine motor control, as well as anaphylaxis, have also been reported.

# Plain English Summary:

Hyperhidrosis is a condition characterised by abnormally increased sweating. It is usually treated through conservative measures including use of high strength antiperspirants aluminium chloride. In rare cases where conservative treatments are not effective botulinum toxin (botox) injections may be considered as a treatment option.

If your doctor believes that you meet the criteria set out in this policy they can submit a Prior Approval application to the CCG in order to seek funding approval for your treatment. The CCG will review your case and if we agree that the criteria have been met we will authorise funding.

# Evidence base:

NICE Clinical Knowledge Summary - <http://cks.nice.org.uk/hyperhidrosis#!scenario>

NICE do not do list Social Anxiety Disorder (CG159) published 2013

Link to application form – [Prior Approval application form](http://www.gloucestershireccg.nhs.uk/wp-content/uploads/2015/08/Botulinum-Toxin-for-Hyperhidrosis-Prior-Approval-Form.docx)

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

|  |  |
| --- | --- |
| **Date of Publication** | 4 April 2016 |
| **Policy review date** | September 2022 |

# Consultation

|  |  |
| --- | --- |
| **Consultee** | **Date** |
| Planned Care Programme Board | July 2015 |
| GHNHSFT Leads | May/June 2015 |
| GP Membership (via What’s New This Week) | July/August 2015 |
|  |  |
| Has the consultation included patient representatives? | Yes |

**Policy sign off**

|  |  |
| --- | --- |
| **Reviewing Body** | **Date of review** |
| Effective Clinical Commissioning Policy Group | 17 September 201531 August 2017 |
| Integrated Governance and Quality Committee | 3 March 2016 |

**Version Control**

|  |  |  |  |
| --- | --- | --- | --- |
| **Version No** | **Type of Change** | **Date**  | **Description of Change** |
| 1 |  | April 2016 | Initial policy |
| 2 | Date |  | Review date changed to Aug 2019 |
| 3 | Date. Minor wording | Sept 2019 | Review date changed to Sept 22. Minor wording change regarding subsequent injections. |