

Policy statement:	Hyperhidrosis (Botox)
Status:	Individual Prior Approval

M&SECCGs commissions specialist treatment for hyperhidrosis only when carried out in line with the following pathway: <http://midessexccg.nhs.uk/your-health-services/medicines-optimisation/clinical-pathways-and-medication-guidelines/chapter-13-skin-3/1593-hyperhydrosis-pathway-jan-2016/file>

Patients with generalised hyperhidrosis should not be referred to secondary care but managed in accordance with the above pathway.

Patients with localised hyperhidrosis should not be referred to specialist without having tried

- self-funded topical strong antiperspirants **AND**
- self-funded iontophoresis with tap water for at least six months.

Tap-water iontophoresis is non-invasive and is appropriate for axillary, palmar, plantar and craniofacial hyperhidrosis.

Iontophoresis with glycopyrronium bromide is not funded as the level of evidence for adding glycopyrronium bromide solution is weak and costs in primary care is prohibitive

Patient Information Leaflet- <http://midessexccg.nhs.uk/your-health-services/medicines-optimisation/clinical-pathways-and-medication-guidelines/chapter-13-skin-3/795-excessive-sweating-self-management-leaflet-may-2015-1/file>

M&SECCGs do not commission Endoscopic Thoracic Sympathectomy (ETS) due to weak evidence and significant risk of morbidity

Individual prior approval for funding for use of botulinum toxin is required. Treatments must not be repeated more frequently than once every 6 months.

Funding for patients not meeting the above criteria will only be granted in clinically exceptional circumstances.

Individual funding requests should only be made where the patient demonstrates clinical exceptionality.

Further information on applying for funding in exceptional clinical circumstances can be found on the CCGs' website.