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## **MEDIA RELEASE**

### **Cataract patients across England being denied NHS surgery**

*Medical Technology Group investigation exposes lists of restricted NHS treatments*

Patients across England are being denied vital cataract surgery by their local Clinical Commissioning Groups, with over half including the procedure in lists of treatments they deem to be of limited clinical value, despite being proven to be effective.

Research by the Medical Technology Group (MTG) has revealed that 104 of the 195 CCGs in England restrict access to cataract surgery. These CCGs include it on lists of 'Procedures of Limited Clinical Value', normally reserved for complementary therapies or cosmetic procedures where there is little evidence to prove their cost effectiveness or clinical benefit.

National clinical guidelines published by the National Institute for Health and Care Excellence (NICE) in 2017 cite the cost effectiveness of cataract surgery, stating that it has 'a high success rate in improving visual function, with low morbidity and mortality'.

The result of CCGs' restrictions on cataract surgery is that patients across the country are being denied access to a procedure that they are entitled to, which could restore their eyesight and prevent accidents, such as trips and falls. The research also suggests patients are being treated differently depending on where they live. For example, Basildon and Brentwood CCG restricts access to cataract treatment while nearby Barking and Dagenham CCG offers the procedure to all patients.

Helen Lee, Eye Health Policy Manager for the Royal National Institute of Blind People (RNIB), commented: "Cataract removal is a crucial procedure that has a huge impact on the lives of patients and their families. We know that restrictions or delays to cataract surgery can severely impact people's ability to lead independent lives, making them twice as likely to experience falls and significantly reducing quality of life. It's shocking that access to this life-changing surgery is being unnecessarily restricted by so many CCGs.

“We firmly believe that all patients who will benefit from cataract removal should be entitled to it and we urge CCGs to ensure the NICE guidance is fully implemented. Eye health services should be prioritised, so patients get timely access to treatment, rather than waiting months – or even years – for sight-saving surgery.”

The MTG’s investigation, conducted in October 2018, reveals that CCGs across the country are also rationing access to other proven treatments by including them on lists of restricted treatments or by applying high thresholds. Often these treatments can make a significant difference to patients’ quality of life and deliver savings to the NHS in the long run.

The MTG study looked at three further treatments: surgical repair of hernias, glucose monitoring for diabetes patients, and hip and knee replacements. It found that:

- Most CCGs commission hernia repair, but many apply onerous conditions. Almost half of CCGs (95) limit access and many take a ‘watchful waiting’ approach, where time is allowed to pass while further tests are carried out. The result can mean an increase in emergency cases and worse patient outcomes.
- 78 CCGs include hip and knee replacements on their list of restricted treatments, despite the procedures being proven to be effective in keeping people mobile since over half a century.
- 12 CCGs refuse to provide patients with continuous glucose monitoring, a sensor that allows people with diabetes to monitor their glucose levels throughout the day. A further seven only provide it to patients after an Individual Funding Request, where they need to make a special case for the treatment.

Concerned that the treatment patients receive is being determined by where they live, not what they need, the MTG is launching Ration Watch, a campaign to highlight variation in local commissioning and call for changes to eradicate the postcode lottery.

Barbara Harpham, chair of the Medical Technology Group, said: “It’s simply not fair that patients up and down the country are being denied access to vital treatments because of where they live. This indiscriminate rationing by local NHS organisations must stop now and information about what treatments are or are not provided should be made freely available to patients. It should depend on your needs, not your postcode.”

ABHI, AdvaMed, AntiCoagulation Europe, ARMA, Arrhythmia Alliance, Arthritis Care, Atrial Fibrillation Association, BD, British Kidney Patient Association, Boston Scientific, British Cardiac Patients Association, Cardiomyopathy UK, Coloplast, Diabetes UK, Edwards Lifesciences, Eucomed, FABLE, FEMISA, Group B Strep Support, Heart Research UK, Heart Valve Voice, ICD Group, INPUT, Insightec, International Alliance of Patients' Organizations, Intuitive Surgical, JDRF, Nevro, Johnson & Johnson, Lindsay Leg Club Foundation, Medtronic, National Rheumatoid Arthritis Society, Pancreatic Cancer UK, Pelvic Pain Support Network, Pumping Marvellous, Roche Diagnostics, SADS UK, Smith & Nephew, Smiths Medical, St Jude Medical, STARS, Stryker, The Circulation Foundation, The Patients Association, The Somerville Foundation



The MTG's campaign is calling for a national body to scrutinise decisions by individual CCGs and ensure patient access to treatments is consistent across the country.

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For media enquiries, please contact:

The Medical Technology Group  
Colin Hallmark or Rod de St Croix  
0207 736 1888  
[info@3nine.co.uk](mailto:info@3nine.co.uk)

### **Notes to editors**

**Ration Watch** [www.rationwatch.co.uk/](http://www.rationwatch.co.uk/)

Ration Watch is a new campaign by the Medical Technology Group aimed at highlighting the issues around local commissioning and exposing examples of patients who have been denied life-enhancing treatments. The MTG is calling on NHS leaders to do more to ensure patient access is governed by what patients need, not where they live. The campaign's website will show evidence of rationing, as well as the damage it does to patients and the NHS.

### **Cataracts**

The RNIB estimates that there are around 677,000 people in the UK living with a cataract, 568,000 of which are in England. Cataracts are heavily linked to age, and more than half of the 568,000 affected will be people aged 80 years and over. People with the condition can experience severely impaired vision as the eye's lens becomes opaque. Cataracts can affect one or both eyes and are treated by surgery, during which the cloudy lens is removed and replaced by an artificial lens.

The Royal College of Ophthalmologists states that it is important that patients regain as much vision as possible and are able to use both eyes together. However, a survey it conducted among ophthalmic leads in 2017 found some CCGs apply even stricter access to patients needing surgery on a second eye, meaning patients can have a cataract removed from one eye, but are then left with impaired vision in the other.

### **About the research**

In October 2018 the Medical Technology Group conducted an analysis of all 195 Clinical Commissioning Groups and their use of lists of procedures of low clinical value. As part of this analysis they looked at the use of visual acuity thresholds for access to cataracts where

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these were included on the lists. Details of all policies identified are available on the Ration Watch website: <http://www.rationwatch.co.uk/ccgs/>

**About the Medical Technology Group** [www.mtg.org.uk](http://www.mtg.org.uk)

The Medical Technology Group (MTG) is a coalition of patient groups, research charities and medical device manufacturers working to make medical technologies available to everyone who needs them. Uptake of medical technology in the UK is not as good as it should be, given its great potential to provide value for money to the NHS, patients and taxpayers. The MTG believes that patients and clinicians need better information about medical technologies so that they can make informed choices about their medical care.