

Gateway Ref: 17084

6<sup>th</sup> January 2012

To: Chief Executives of all Strategic Health Authority Clusters  
Chief Executives of all Primary Care Trust Clusters,  
Chief Executives of all NHS Trusts,  
Chief Executives of all NHS Foundation Trusts,  
Chief Executive of Monitor.

Dear Colleague

### **Re: PIP SILICONE GEL BREAST IMPLANTS**

The Secretary of State recently asked the NHS Medical Director, Sir Bruce Keogh to lead an Expert Advisory Group to review the available data in light of the concerns about PIP Breast Implants. The Expert Group have today reported and I am writing to inform you of their conclusions and to set out what, therefore, our expectations are for the care of NHS patients who have had these implants. The Chief Medical Officer has also written to General Practice and relevant health professionals. A copy of this letter can be found at <http://www.dh.gov.uk>

#### **The Expert Group's Report**

In summary, the group has concluded that the advice given by the MHRA still stands and that there is not enough evidence to recommend routine explantation of these breast implants. The group also agrees there is no link with cancer.

However, the group also acknowledges that many of the implants are made up of non-medical grade silicone and should not have been implanted in women in the first place and as such recognises that this is a worrying time for women with PIP implants and that they need to be properly supported by those who performed the implantations. The full report can be found online at <http://www.dh.gov.uk>

This is therefore a worrying time for patients who have had breast implants, both those who know they have had a PIP implant and those that could be concerned their implant might be a PIP.

#### **What this means for NHS Patients**

In any situation like this we have a duty of care to NHS patients and as such we need to ensure that they receive the support they can expect from the NHS.

That support should include the following model of care:

- All women who have received a PIP implant from the NHS will be contacted to inform them that they have a PIP implant and to provide relevant information and advice. If in the meantime NHS patients seek information about the make of their implant then this will be provided free of charge;
- Women who wish to will be able to seek a consultation with their GP, or with the surgical team who carried out the original implant, to seek clinical advice on the best way forward;
- If the woman chooses, this could include an examination by imaging to see if there is any evidence that the implant has ruptured;
- The NHS will support removal of PIP implants if, informed by an assessment of clinical need, risk or the impact of unresolved concerns, a woman with her doctor decides that it is right to do so. The NHS will replace the implants if the original operation was done by the NHS.

We want the private sector to offer the same service to its patients as the NHS is offering and we are working with them to best ensure an equivalent model of care is provided. If a clinic that implanted PIP implants no longer exists or refuses to care for their patient - where that patient is entitled to NHS services, the NHS will support the removal of PiP implants in line with the guidance above. Any NHS service in that respect would not include the replacement of private cosmetic implants.

I know that commissioners and providers will work together locally to ensure that the model of care set out above is operationalised and resourced appropriately. Thank you for your support in doing so.

Yours sincerely,

A handwritten signature in black ink, appearing to read 'D Nicholson', with a long horizontal flourish extending to the right.

**Sir David Nicholson KCB CBE**  
**NHS Chief Executive**