



Evidence Based Intervention

Transcranial Magnetic Stimulation

(TMS and rTMS)

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Policy: Transcranial Magnetic Stimulation (TMS and rTMS)

The Hertfordshire & West Essex ICB does not fund Transcranial Magnetic Stimulation (TMS) or associated treatment modalities such as repetitive TMS (rTMS) for any indication, including but not limited to severe/treatment resistant depression and headache. This includes circumstances where there may be contraindications for alternative treatment options, such as individuals unable to tolerate general anaesthesia for Electroconvulsive therapy (ECT).

Rationale

The Hertfordshire and West Essex ICB has determined Transcranial Magnetic Stimulation to be of low priority for funding. Current commissioned treatment pathways for severe/treatment resistant depression include non-pharmaceutical treatment options such as Electroconvulsive therapy (ECT) and psychological therapies.

Current guidance and the strongest existing evidence supports the use of ECT as a treatment option for treatment resistant/severe depression (unless contraindicated) and the use of psychological therapies. While some evidence suggest that rTMS may be more effective than ECT for some patients with treatment resistant depression, other evidence suggests ECT may be more effective when compared against rTMS in patients with any type of depression, and result in a higher clinical response and greater likelihood of remission. Guidance does not support the use of rTMS over ECT.

Existing evidence does not currently support the use of rTMS or TMS treatment for any other condition.

Patients who are not eligible for treatment under this policy may be considered on an individual basis where their GP or consultant believes exceptional circumstances exist that warrant deviation from the rule of this policy. Individual cases will be reviewed as per the ICB policy.

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