



Hertfordshire and  
West Essex Integrated  
Care System



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Integrated Care Board

# Evidence Based Intervention

## Dysthyroid Eye Disease

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## Policy:

This policy has been produced on behalf of local ICBs and covers ICB funding of thyroid eye disease, clarifying the responsibilities of ICBs and NHSE in the commissioning and funding of thyroid eye disease. The guidance does not cover NHSE funding but clarifies where their responsibilities lie.

Treatment of thyroid eye disease (TED) is only funded by ICB's in cases of mild disease (see classification below). For moderate or severe disease NHS England is the responsible commissioner. The treatment of mild disease is primarily medical, not surgical, therefore it is not anticipated that any surgery for thyroid eye disease would be routinely funded by local ICB's.

Spectacle lenses including specialist lenses are also an NHS England responsibility.

## Funding criteria:

Any requests for ICB funding of surgery would be exceptional and would only be considered as an individual funding request (IFR). See appendix A for OPCS codes.

The ICB funding responsibilities are for mild disease, with NHSE the commissioner for moderate or severe disease. Disease severity is assessed using the EUGOGO criteria, shown below.(1)

<i>Sign/symptom</i>	<b>Mild disease</b>	<b>Moderate/severe disease</b>
<b>Lid retraction</b>	<2 mm	≥2 mm
<b>Soft tissue involvement</b>	Mild	Moderate or severe
<b>Exophthalmos</b>	<3 mm	≥3 mm
<b>Diplopia</b>	None or transient <sup>a</sup>	Inconstant <sup>b</sup> or constant <sup>c</sup>
<b>Corneal involvement*</b>	None or mild	Moderate or severe

*a* **Transient diplopia:** in primary position when tired or first awakening

*b* **Inconstant diplopia:** at extremes of gaze

*c* **Constant diplopia:** continuous in primary position or when reading

\*Punctate keratopathy responsive to topical lubricants within 1 week would be classified mild. All other corneal involvement e.g. non-responsive punctate keratopathy, ulcer or perforation is considered moderate/severe.



## Clinical management

### **Management appropriate for mild disease:**

Management of mild disease is mostly self-management optimisation of the patient's thyroid status, eg:

- Smoking cessation
- Correction of thyroid function
- Artificial tears (obtained over the counter from community pharmacies)
- Prism lenses (NHSE responsibility)
- Self-help groups

### **Management appropriate for moderate to severe disease – (NB NHS England is responsible for commissioning)**

- IV steroids
- Orbital irradiation
- Orbital decompression
- Muscle surgery
- Eyelid surgery

### **References**

1. Bartalena L, Baldeschi L, Dickinson A, Eckstein A, Kendall-Taylor P, Marcocci C, et al. Consensus statement of the European Group on Graves' orbitopathy (EUGOGO) on management of GO. Eur J Endocrinol. 2008 Mar 1;158(3):273–85.

### **Appendix A - OPCS Codes**

C06.3 Decompression of orbit

C13.1 Blepharoplasty of both eyelids

C13.2 Blepharoplasty of upper eyelid

C13.3 Blepharoplasty of lower eyelid

C16.1 Central tarsorrhaphy

C16.2 Lateral tarsorrhaphy

C16.3 Medial tarsorrhaphy

C16.4 Tarsorrhaphy NEC

C16.5 Revision of tarsorrhaphy

C18.5 Tarsomullerectomy

C31.1 Recession of medial rectus muscle and resection of lateral rectus muscle of eye

C31.2 Bilateral recession of medial recti muscles of eyes



C31.3 Bilateral resection of medial recti muscles of eyes  
C31.4 Bilateral recession of lateral recti muscles of eyes  
C31.5 Bilateral resection of lateral recti muscles of eyes  
C31.6 Recession of lateral rectus muscle and resection of medial rectus muscle of eye  
C31.8 Other specified combined operations on muscles of eye  
C31.9 Unspecified combined operations on muscles of eye  
C32.1 Recession of medial rectus muscle of eye NEC  
C32.2 Recession of lateral rectus muscle of eye NEC  
C32.3 Recession of superior rectus muscle of eye  
C32.4 Recession of inferior rectus muscle of eye  
C32.5 Recession of superior oblique muscle of eye  
C32.6 Recession of inferior oblique muscle of eye  
C32.7 Recession of combinations of muscles of eye  
C32.8 Other specified recession of muscle of eye  
C32.9 Unspecified recession of muscle of eye  
C33.1 Resection of medial rectus muscle of eye NEC  
C33.2 Resection of lateral rectus muscle of eye NEC  
C33.3 Resection of superior rectus muscle of eye  
C33.4 Resection of inferior rectus muscle of eye  
C33.5 Resection of superior oblique muscle of eye  
C33.6 Resection of inferior oblique muscle of eye  
C33.7 Resection of combinations of muscles of eye  
C33.8 Other specified resection of muscle of eye  
C33.9 Unspecified resection of muscle of eye  
C34.1 Tenotomy of medial rectus muscle of eye  
C34.2 Tenotomy of lateral rectus muscle of eye  
C34.3 Tenotomy of superior rectus muscle of eye  
C34.4 Tenotomy of inferior rectus muscle of eye



C34.5 Tenotomy of superior oblique muscle of eye  
C34.6 Tenotomy of inferior oblique muscle of eye  
C34.7 Tenotomy of combinations of muscles of eye  
C34.8 Other specified partial division of tendon of muscle of eye  
C34.9 Unspecified partial division of tendon of muscle of eye  
C35.1 Transposition of muscle of eye NEC  
C35.2 Lengthening of muscle of eye by muscle slide  
C35.3 Insertion of adjustable suture into muscle of eye  
C35.8 Other specified other adjustment to muscle of eye  
C35.9 Unspecified other adjustment to muscle of eye  
C37.2 Freeing of adhesions of muscle of eye  
C37.4 Repair of muscle of eye NEC  
C37.8 Other specified other operations on muscle of eye  
C37.9 Unspecified other operations on muscle of eye  
X65.8 Other specified radiotherapy deliver




## Change History:

Version	Date	Reviewer(s)	Revision Description

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