

Dilatation and Curettage (D&C) Commissioning Policy

<b>Intervention</b>	<b>Dilatation and Curettage (D&amp;C)</b>
<b>OPCS codes</b>	<p>Q10 Curettage of uterus</p> <p>Q101 Dilation of cervix uteri and curettage of products of conception from uterus</p> <p>Q103 Dilation of cervix uteri and curettage of uterus NEC</p> <p>Q108 Other specified curettage of uterus</p> <p>Q109 Unspecified curettage of uterus</p>
<b>For the treatment of:</b>	<b>Menorrhagia or for Diagnostic purposes</b>
<b>Background</b>	<p>Dilation and Curettage (D&amp;C) is a procedure performed under general anaesthetic in which the lining of the uterus (the endometrium) is biopsied (diagnostic D&amp;C) or removed (therapeutic D&amp;C) by scraping with a sharp metal instrument (curette) in a systematic fashion.</p> <p>This commissioning policy is needed because these surgical procedures are of limited clinical value and are currently not routinely commissioned. Such requests therefore have to be made on the grounds of clinical exceptionality via the Individual Funding Request Panel (IFR).</p>
<b>Commissioning position</b>	<p>NHS Scarborough &amp; Ryedale and Vale of York CCGs do NOT commission D&amp;C:</p> <ul style="list-style-type: none"> <li>• As a diagnostic tool for uterine bleeding disorders</li> <li>• As a treatment for heavy menstrual bleeding</li> <li>• As a therapeutic treatment for other uterine bleeding disorders</li> <li>• As a method of removing unwanted tissue, endometrial polyps or benign tumours from the womb or an IUD that has become embedded in the wall of the womb</li> </ul> <p>All requests for D&amp;C should be submitted to the IFR Panel.</p>
<b>Summary of evidence / rationale</b>	<p><b>Diagnostic D&amp;C:</b> Ultrasound (1st line) or hysteroscopy (with or without biopsy) (2nd line) are recommended as diagnostic techniques to investigate uterine bleeding disorders. Hysteroscopy and biopsy is also the preferred technique to remove polyps and other benign lesions, as it allows targeted removal. If a tissue sample is required and there is no lesion visible on a scan then an endometrial biopsy may be done.</p> <p><b>Therapeutic D&amp;C:</b> There is limited evidence on the effectiveness of D&amp;C in the management of menorrhagia. The one study that was identified by NICE showed that any effect was temporary. NICE guidance states that D&amp;C should not be used as a therapeutic treatment.</p>

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	<p><b>Evacuation of retained products of conception (ERPC):</b> where surgical evacuation after incomplete miscarriage or delivery is clinically indicated over medical management and watchful waiting, vacuum aspiration has superseded D&amp;C as it is quicker, safer, easier and less painful.</p> <p><b>Gestational trophoblastic disease:</b> Suction/vacuum curettage is the preferred method of evacuation irrespective of uterine size in patients with suspected hydatidiform mole who want to preserve fertility</p>
<b>Date effective from</b>	26 <sup>th</sup> March 2018
<b>Date published</b>	March 2018
<b>Review date</b>	March 2020

**References:**

1. Investigation of Post-Menopausal Bleeding. SIGN Publication No.61; 2002
2. National Institute for Health and Clinical Excellence. Heavy Menstrual Bleeding. Investigation and Treatment. London: NICE; 2007
3. NICE. Heavy Menstrual Bleeding. January 2007. Do Not Do – D&C alone should not be used as a diagnostic tool
4. NICE. Heavy Menstrual Bleeding. January 2007. Do Not Do – D&C alone should not be used as a therapeutic treatment.

Version	Created /actioned by	Nature of Amendment	Approved by	Date
1.0	Lead Clinician and Senior Service Imp Mngr	Re-drafting of STP and SR/VoY policies. No changes to previous commissioning positions highlighted. No consultation required.	n/a	01.02.18
2.0	Senior Service Improvement Manager	Share of new draft internally	Lead Clinicians – VoY and SR CCGs	01.02.18
FINAL	n/a	Approval of threshold	SRCCG Business Committee VoY Clinical Executive	07.03.18 21.03.18