

## Hampshire and Isle of Wight Integrated Care Board Priorities Committee

<b>Policy title</b>	<b>HIOW Policy 5: Skin surface functional electrical stimulation (FES) for foot drop as a result of a condition of central neurological origin</b>
<b>Policy position</b>	<b>Criteria Based Access</b>
<b>Date of issue</b>	April 2023
<b>Update</b>	This policy will be updated in light of a substantial body of new evidence or new national guidance.

Evidence shows that for carefully selected patients with footdrop as a result of a condition of central neurological origin the use of FES appears to be clinically effective. For all other indications FES is an intervention NOT NORMALLY FUNDED due to a lack of high quality evidence of clinical and cost effectiveness.

Assessment for skin surface FES for foot drop will ONLY be funded for individuals when ALL of the following criteria are met:

- Foot drop as a result of an upper motor neurone lesion (brain or spinal cord injury at or above T12)
- Foot drop significantly affects walking and evident during gait
- No significant contracture or shortening at the ankle beyond plantar grade (foot flat on floor)
- Patient is able to move from sitting to standing independently
- Walking is the main form of mobility indoors; patient is not a wheelchair user indoors
- Patient is able to walk at least 10 metres without rest, with or without an aid
- Patient is motivated to improve walking ability
- Patient is able to attend regular reviews at FES centre: appointments for assessment and set-up then follow up at 6 weeks, 12 weeks, 6 months then annual.
- Patient is able to self-manage the use and application of FES: understand the aims of treatment, is able to operate the device and adjust / review the effectiveness and recognise problems that require review by the physiotherapist
- Patient has adequate hand dexterity to apply the device or adequate carer support

Precautions to consider before referral:

- Poorly controlled epilepsy or seizures. Where epilepsy is controlled by drugs, or there have been no fits experienced for a reasonable period, FES can be used with agreement from a Neurologist.
- Active medical implants such as cardiac pacemakers or other devices must be treated with caution and information sought from the device supplier about the use of electrical stimulation in their presence. Agreement from Medical Consultant i.e. Cardiologist may be required, and an additional clinical test may be required to determine the safety of FES.

## The following are contraindications for the use of FES

- History of significant autonomic dysreflexia in incomplete spinal cord injury above T6.
- Pregnancy. The effect of FES on the unborn child in pregnancy is not known.
- Patients with a cancerous tumour in the area of the electrical stimulation should be excluded as increased local blood flow may increase tumour growth.
- Patients with exposed orthopaedic metal work in the area of electrical stimulation.
- Poor skin condition as sores or irritation prevent the use of self-adhesive electrodes.

### References:

- National Hospital to Neurology and Neurosurgery, Therapy Services, University College London Hospitals NHS Foundation Trust 'FES referral criteria.'
- Salisbury FES Centre Referral Criteria
- NICE IPG278 Interventional procedures guidance (2009) Functional electrical stimulation for drop foot of central neurological origin

### OPCS-4 code:

Skin surface FES:

A70.7 Application of transcutaneous electrical nerve stimulator

Note: In addition, a site code from chapter Z is assigned depending on the nerve into which the stimulator is implanted or applied.

### ICD-10 code:

M21.37 Wrist or foot drop (acquired) ankle and foot

Version	Date	Reason for change
Version 1.0	2015	
Version 2.0	July 2018	No change.
Version 3.0	Agreed September 2022 (Ratified by the Board – January 2023)	Policy update. Inclusion of new criteria for referral for assessment, precautions and contraindications.

Exceptional circumstances may be considered where there is evidence of significant health impairment and there is also evidence of the intervention improving health status