



Evidence Based Intervention

Faecal Microbiota Transplants

July 2022 v1.0

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Policy:

This policy is based on the Southampton, Hampshire, Isle of Wight and Portsmouth Clinical Commissioning Groups Priorities Committee Policy.

The Priorities Forum reviewed the evidence of clinical and cost effectiveness of Faecal microbiota transplants (FMT) and recommends:

- Commissioning FMT for recurrent or refractory Clostridium Difficile infection up to a maximum of two transplants.
- FMT for any other indication is not routinely funded.

Supporting Information

- The majority of the weight of evidence presented has been provided from activities and positive national endorsement from both Public Health England and NICE Interventional Procedure Guidance.
- Realistic cost of £600 per patient based on the Department of Health guidance including the cost of screening, hospital admission, x-ray, nasogastric tube, laxatives and vancomycin.
- There is interest in the use of FMT for the treatment of other disorders. FMT is already recognised as an emerging treatment for recurrent Clostridium Difficile infections in patients where antibiotic and other lines of treatment have failed, and the role of intestinal microbiota is recognised as being involved in the pathogenesis of inflammatory bowel disease.

Change History:

| Version | Date | Reviewer(s) | Revision Description |
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