



Western Australian Coding Rule

0318/10 Capsular contracture of breast implant

ACCD Coding Rule ***Capsular contracture of breast implant*** (Ref No: Q2846) was retired on 30 June 2017. ICD-10-AM/ACHI/ACS Tenth Edition (effective 1 July 2017) provides guidelines for procedural complications in ACS 1904 *Procedural complications*.



Western Australian Coding Rule

0514/08 Capsular contracture of breast implant

WA Coding Rule 1013/07 *Capsular contracture of breast* is superseded by ACCD Coding Rule ***Capsular contracture of breast implant*** (Ref No: Q2846) effective 1 July 2014; (log in to view on the [ACCD CLIP portal](#)).

DECISION

WA Coding Rule 1013/07 *Capsular contracture of breast* is retired.

[Effective 1 Jul 2014, ICD-10-AM/ACHI/ACS 8th Ed.]



Western Australian Coding Rule

1013/07 Capsular contracture of breast

Q.

Could you please provide advice on the correct diagnosis code for capsular contracture of the breast, treated with capsulectomy and replacement of breast implant?

A.

Breast capsular contracture is a known post-procedural complication of implant insertion.

Any surgical implant (foreign body) stimulates the body's immune system to form a fibrous capsule around the implant as a form of biological protection e.g. breast implants, pacemakers, orthopaedic prostheses. This encapsulation is normal and called a "tissue capsule". In some cases, (due to infection, implant malfunction, haematoma or for no known reason) the collagen fibres contract and the capsule shrinks and squeezes the implant. This is "capsular contracture". In breast implants the breast may become firm and painful with changed appearance. There are various degrees of contracture. Treatment is of the cause, if known, e.g. antibiotics. However usually surgery is required, e.g. capsulotomy where the capsule is cut to release the implant; or capsulectomy where the entire capsule is removed.

There are various aspects of capsular contracture (e.g. infection, pain, malposition of implant) which are classified in different ways. Some or all of these elements may be present, so each case should be assessed individually. If the documentation is unclear, or only 'capsular contracture' is documented, the treating clinician should be asked to clarify the complication(s) necessitating capsular surgery:

- Infection or inflammation of breast implant = T85.78 *Infection and inflammatory reaction due to other internal prosthetic devices, implants and grafts*
- Mechanical complication of implant, includes: breakdown, displacement, leakage, malposition, obstruction, perforation, or protrusion = T85.4 *Mechanical complication of breast prosthesis and implant*
- Other specified complication of breast implant, includes: embolism, fibrosis, haemorrhage, pain, stenosis, or thrombosis = T85.88 *Other complications of internal prosthetic device, implant and graft NEC*

If clinical consultation is not available ACS 1904 *Procedural complications* and ACS 0013 'Other' and 'Unspecified' codes should be followed and capsular contracture of breast should be coded:



- T85.88 *Other complications of internal prosthetic device (Index pathway: Complication, breast implant, specified NEC)*
- Y83.1 *Surgical operation with implant of artificial internal device*
- Y92.22 *Health service area*
- U73.8 *Other specified activity*

DECISION

This query will be sent to the NCCH for further advice. In the interim, capsular contracture of breast should be queried with the clinician. If this is not possible, assign:

- T85.88 *Other complications of internal prosthetic device***
- Y83.1 *Surgical operation with implant of artificial internal device***
- Y92.22 *Health service area***
- U73.8 *Other specified activity***

[Effective 18 Oct 2013, ICD-10-AM/ACHI/ACS 8th Ed.]