NHS
Mersey and West Lancashire
Teaching Hospitals
NHS Trust

Ref. No: 2660
Date: 01/07/26
Subject: Provision of Bracing Services for Pectus Deformities

REQUEST & RESPONSE

Please provide responses to each of the following questions. Where a question is not applicable to your organisation, please state "Not Applicable" and briefly explain why.

No.	Question	Response Format
1	Does your Trust/Health Board currently have an **orthotics** service?	Yes / No
2	Does your Trust/Health Board provide bracing (chest brace and/or vacuum bell) for **Pectus** deformities?	Yes / No
3	If you answered Yes to Question 2: Does your service provide bracing for **Pectus Carinatum**, **Pectus Excavatum**, or **both**?	Pectus Carinatum / Pectus Excavatum / Both / Not applicable
4	If you answered Yes to Question 2: Is the **orthotics service** responsible for the provision of the brace and/or vacuum bell?	Yes / No / Not applicable
5	If you answered No to Question 4: Which service is responsible for the provision of the brace and/or vacuum bell?	Free text / Not applicable
6	If you answered No to Question 2: Are there any plans for your Trust/Health Board to begin providing this service?	Yes / No / Not Applicable
7	Over the last 3 years, have you seen an increase in the number of referrals for bracing of Pectus conditions?	Yes / No / Don't know

Definitions and Clarifications

For the purposes of this request:

- **Orthotics service** refers to the provision of orthoses (external devices such as braces, splints, and insoles) and associated clinical services to patients with musculoskeletal, neurological, or other conditions.

- **Pectus Carinatum** refers to a chest wall deformity in which the sternum and ribs protrude outward (sometimes referred to as “pigeon chest”).
- **Pectus Excavatum** refers to a chest wall deformity in which the sternum and ribs grow abnormally, producing a caved-in or sunken appearance of the chest (sometimes referred to as “funnel chest”).
- **Bracing** refers to the use of an external orthotic device intended to apply corrective pressure to the chest wall to manage Pectus Carinatum or Pectus Excavatum. For the purposes of this request, bracing includes both *chest braces* and *vacuum bells*.
- **Provision** refers to the assessment and fitting of the device.
- **Referral** refers to a patient being formally referred to your orthotics service (or a contracted provider on your behalf) for assessment and/or treatment of a Pectus deformity, irrespective of whether bracing was ultimately provided.

Orthotics is a Merseycare Service, not MWL. Please redirect to https://www.merseycare.nhs.uk/