

Rehabilitation & Entitlements Policy Group

SOP Bulletin No. 166

01 July 2013

THE FOLLOWING RMA SOPs ARE TO TAKE EFFECT ON 03 JULY, 2013

New SOPs	Periodontal abscess
Revocations & Replacements	Colorectal adenoma Malignant neoplasm of the colorectum Familial adenomatous polyposis Sleep apnoea Erectile dysfunction Gingivitis Periodontitis
Amendments	Nil

NOTEWORTHY FEATURES

Colorectal adenoma	Revocation – 35 & 36 of '13 Replaces 62 and 63 of '02
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- There are new RH only onset factors for:
 - intake of red meat; intake of processed meat (both with threshold levels);
 - inability to consume (specified levels of): fibre in food; folate in food; and dairy milk; and
 - ulcerative colitis; Crohn's disease of the colorectum; diabetes; and (for adenoma of the colon only) acromegaly.
- There have been changes to the time periods applying to the smoking, alcohol and obesity factors (RH and BOP):

Malignant neoplasm of the colorectum	Revocation – 37 & 38 of '13 Replaces 1 and 2 of '04 as amended by 39 & 40 of '11
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- There are new RH onset factors for:
 - diabetes;
 - an inability to consume a threshold level of dairy milk;
 - asbestos exposure in an open environment (previous asbestos factor was for a closed environment only); and

- acromegaly (for MN of the colon only).
- There are new BOP onset factors for asbestos exposure in both open and closed environments.
- The limited physical activity factor now applies to MN of the colon only (RH and BOP).
- A shorter duration of obesity is now required for both RH and BOP factors, with the BOP factor now applying to MN of the colon only.
- For the alcohol factors the time requirements have been changed (BOP) or omitted (RH), but the total doses are unchanged.
- The BOP smoking factor now requires more pack years (up from 25 to 30) but allows a shorter latency (down from 35 to 20 yrs).
- There have been changes to the red meat and processed meat factors (RH only). Previously an increase in consumption was required. Now the factors specify a threshold level of intake.

Familial adenomatous polyposis

Revocation – 39 & 40 of '13
Replaces 60 and 61 of '02

- There are no significant changes.

Sleep apnoea

Revocation – 41 & 42 of '13
Replaces 13 and 14 of '05

- The definition has been amended, with a requirement added for minimum numbers of episodes of apnoea or hyponoia. A sleep study is needed for diagnosis of this condition.
- Obstructive sleep apnoea and central sleep apnoea sub-categories have been introduced and a number of factors (existing and new) now apply only to one of those categories. There are some further old and new factors that apply to sleep apnoea generally (i.e. obstructive, central or mixed sleep apnoea).
- The new onset and worsening factors are for: long-acting opioid intake; neuromuscular diseases as specified; and (for RH only) atypical antipsychotic drugs.
- The HIV and severe renal disease factors have been amended.

Erectile dysfunction

Revocation – 43 & 44 of '13
Replaces 17 and 18 of '05

- A number of previously separate factors for medical conditions have been consolidated into one factor (with a new associated definition). Sleep apnoea and systemic sclerosis have been added to the list and haemochromatosis has been replaced by iron overload.
- There is a reworded psychiatric disorders factor that has been combined with the previously separate factor for alcohol dependence.
- There are new factors for: ionising radiation; severe renal disease; renal transplant; and lower urinary tract disorders, along with a new stand alone factor for surgery to the prostate.

- A number of new drugs have been added to the specified list for the drugs factor.

Gingivitis

Revocation – 45 & 46 of ‘13
Replaces 3 and 4 of ‘02

- The previous SOP factors have been retained, but with some minor changes, including to the dose and cessation period for the smoking factor.
- There are new RH and BOP factors for: severe renal disease; autoimmune and mucocutaneous diseases; local irritant substances; and having an oral piercing.
- There are new RH only factors for depressive disorder and drug-induced gingival hyperplasia.
- The oral piercing factor highlights that the RMA will include a factor in a SOP even when it is not apparent how the exposure might be related to service. It is the role of the decision maker (not the RMA) to establish and be satisfied of the relationship to service.
- Worsening factors, corresponding to the onset factors, have been added to the SOP.

Periodontitis

Revocation – 47 & 48 of ‘13
Replaces 1 and 2 of ‘02

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Periodontal abscess

New – 49 & 50 of ‘13

- Periodontal abscess was previously included in the periodontitis SOP, but had its own sub-factors. It is now a separate SOP. Periodontitis is serious chronic inflammation that damages the soft tissue and bone that surrounds teeth. Periodontal abscess is an acute infectious process that can complicate periodontitis, but also has some other causes.
- New factors have been included in the periodontitis SOP for: having an oral piercing; severe renal disease; neutropaenia, agranulocytosis or leukaemia; obesity; alcohol; rheumatoid arthritis or ankylosing spondylitis and, for RH only, smoking cannabis.
- The factors in the new periodontal abscess SOP are for: periodontitis; dental pulp disease; foreign body; and trauma.

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