

Rehabilitation & Entitlements Policy Group

SOP Bulletin No. 176

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THE FOLLOWING RMA SOPS TAKE EFFECT ON 2 JULY, 2014

New SOPs	Warts
Revocations & Replacements	Malignant neoplasm of the stomach Melioidosis Lumbar spondylosis Thoracic spondylosis Cervical spondylosis Hiatus hernia
Amendments	Myeloma

NOTEWORTHY FEATURES

Warts	New – 70 & 71 of '14
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- This new SOP is the outcome of an RMA non-SOP investigation into plantar warts. The SOP covers viral warts generally and not just plantar (on the sole of the foot) warts.

Malignant neoplasm of the stomach	Revocation – 58 & 59 of '14 Replaces 7 and 8 of '03 as amended by 65 & 66 of '11
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- The definition now excludes carcinoid tumours. With the other exclusions this SOP now effectively covers carcinomas only (90% of stomach cancers are adenocarcinomas).
 - The previous SOP had factors that were restricted to: “carcinoma of the stomach only”; and, “carcinoma of the fundus, body, antrum or pylorus of the stomach only”. The “carcinoma of the stomach only” restriction is now redundant and has been removed. The term “carcinoma of the fundus, body, antrum or pylorus of the stomach” has been replaced by the equivalent term “non-cardia gastric carcinoma”.
 - There are new RH only factors, for non-cardia gastric carcinoma only, for partial gastrectomy and alcohol.
 - There are a number of new general RH only dietary factors concerning: preserved vegetables; processed meat; Chinese style salted fish; fermented soy products, and; an inability to consume fruit and vegetables, as specified.
 - There are further new RH only factors for: taking tamoxifen; obesity, and; asbestos exposure.
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Melioidosis**Revocation – 60 & 61 of '14**

Replaces 27 and 28 of '03

- Some details on the clinical manifestations of this infection have been added to the definition.
- The previous SOP has two types of factors, covering: 1. exposure to the organism, and; 2. being vulnerable to developing clinical infection (having been exposed to the organism). In the new SOP the factors of the first type have been reorganised into a single factor, with associated definitions that give details on the pathways of exposure to the organism.

Lumbar spondylosis**Revocation – 62 & 63 of '14**Replaces 37 and 38 of '05
as amended multiple times

- The definition has been amended, with more detail, including an explicit requirement for imaging evidence (implicit before) and a specific exclusion for isolated bulging of an intervertebral disc.
- There are new factors (RH & BOP, onset & worsening) for leg length inequality, acromegaly and Paget's disease.
- For the trauma factor, the trauma now needs to have occurred at least one year before onset/worsening (previously anytime before). The same change has been made to the infection and fracture factors.
- The previous septic arthritis factor has been changed to a factor for infection of the affected joint and now also covers fungal infections.
- The factor for specified spinal conditions now covers some additional abnormalities.
- The previous carrying or lifting loads factor has been split into separate factors, for lifting loads, and for carrying loads.
- The flying as aircrew factor has a lower dose (hours) requirement and a longer maximum time to clinical onset.

Thoracic spondylosis**Revocation – 64 & 65 of '14**

Replaces 35 and 36 of '05

- The changes are as for lumbar spondylosis, with the exceptions that: there is no corresponding new factor for leg length inequality, and; there are no changes to the list of specified spinal conditions.

Cervical spondylosis**Revocation – 66 & 67 of '14**Replaces 33 and 34 of '05
as amended by 76 & 77 of '08

- There are changes to the definition as for lumbar spondylosis.
- There are new factors (RH & BOP, onset & worsening) for piloting a helicopter, acromegaly and Paget's disease.
- There are changes to the trauma, fracture and infection factors as for lumbar spondylosis (now at least one year before).
- The flying high performance aircraft factor has a longer maximum time to clinical onset.

Hiatus hernia**Revocation – 68 & 69 of '14**

Replaces 17 and 18 of '04

- The previous surgery factor has been expanded to now include bariatric (weight loss) surgery and types of pulmonary (lung) surgery. There is also a new stand alone surgery factor for partial or total gastrectomy (RH & BOP, onset & worsening).
- There are new RH only factors (onset & worsening) for: abruptly increased intra-abdominal pressure from weight lifting (as specified); scleroderma, and; osteoporosis with kyphosis.
- A previous worsening factor for gastro-oesophageal reflux disease has been removed.
- There is a new worsening factor (RH & BOP) for being pregnant.

Myeloma

Amendment – 72 & 73 of '14
Amends 69 and 70 of '12

- At the direction of the Specialist Medical Review Council, a new onset factor has been added to both RH and BOP SOPs for TCDD (dioxin) exposure. There are two other TCDD exposure related factors in the RH SOP but none in the BOP SOP. The dose in the new factor is an initial serum TCDD level of at least 1500 parts per trillion. This is a very high dose. Exposure of this magnitude could only have occurred in limited settings, as follows: people working long term in the manufacture of TCDD contaminated products; people highly exposed to TCDD in industrial accidents (particularly at Seveso, Italy); people deliberately or accidentally poisoned by very high level TCDD exposure (e.g. former Ukrainian president Viktor Yushchenko); the most highly exposed of the Ranch Hand veterans (US Air Force personnel who directly handled herbicides as part of the aerial spraying program in Vietnam); possibly a small number of the most highly exposed US Army Chemical Corps personnel in Vietnam, and; possibly (in exceptional cases) some long term civilian sprayers of phenoxyherbicides.
- As these SOPs were amended at the direction of the SMRC the date of effect is backdated to the date of gazettal of the SMRC declaration, which was 13/05/14.

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