

Policy Development Branch

SOP Bulletin No. 238

4 September 2023

THE FOLLOWING RMA SOPS TAKE EFFECT ON 26 SEPTEMBER 2023

New conditions	Tardive dyskinesia
Revocations & Replacements	Soft tissue sarcoma Malignant neoplasm of the small intestine Plantar fasciitis Malignant neoplasm of the breast Malignant neoplasm of the lung Charcot-Marie-Tooth disease
Amendments	Nil

NOTEWORTHY FEATURES

Soft tissue sarcoma

Revocation – 76 & 77 of 2023

Replaces 5 & 6 of 2015 amended in 2017

- The definition has been updated to describe possible types of tissues that fall within the scope of the SoP. The list is not exhaustive and other conditions may be covered if the definition is met.
- Additional inclusions and exclusions have been added, along with recommended ICD codes. Only non-articular cartilage sarcomas are covered by the soft tissue sarcoma SoPs. Malignant neoplasms occurring in bone and articular cartilage (osteosarcoma or chondrosarcoma) are covered by different SoPs.
- For the ionising radiation factors:
 - The latency periods has been revised- 3 years for RH an 5 years for BoP before the clinical onset of soft tissue sarcoma. It was previously 2 years for RH.
 - New factor (4) involving ‘undergoing a course of therapeutic radiation for cancer, where the affected region was in the field of radiation...’
 - New factor (7) specific to hepatic angiosarcoma only
- For the RH arsenic factor, the explanations of what it means to be ‘exposed to arsenic’ has been updated.
- The factor involving immunosuppressive drugs has been updated in terms of wording and it is no longer required that an individual needs to be ‘treated with an immunosuppressive drug for at least three months’ before the clinical onset. There is no longer a specified time period.
- For the HIV SoP factor, the BoP SoP now limits this to certain histological types of tumours and is described as being infected with HIV before the clinical onset of soft tissue sarcoma.
- The chronic lymphoedema factor for angiosarcoma has had its wording altered and there is now a specified period of duration of disease of ‘at least 6 months before the clinical onset of soft tissue sarcoma.’
- For the obesity factor, the duration required to be obese for BoP has changed from ‘at least 10 years within the 20 years’ to now ‘at least 5 years within the 20 years before the clinical onset of soft tissue sarcoma.’
- There are new factors involving arteriovenous fistula for dialysis, vascular grafts, endometriosis, and osteomyelitis.
- There are no specific clinical worsening factors apart from inability to obtain appropriate clinical management.

Tardive dyskinesia**New- 78 & 79 of 2023**

- The definition is based on DSM-5 criteria, with this new SoP defining tardive dyskinesia as a movement disorder triggered by dopamine receptor blocking drugs. A minimum dose and short latency period is required. Although based on the DSM-5 criteria, the diagnosis does not need to be provided by a psychiatrist.
- The SoP definition has a list of exclusions specified.
- The factors involve antipsychotic medications, other dopamine receptor antagonist medications, and anticholinergic drugs.
- There is an inability to obtain appropriate clinical management SoP factor involving onset only for RH and BoP.

Malignant neoplasm of the small intestine**Revocation – 80 & 81 of 2023**

Replaces 1 & 2 of 2015

- Malignant neoplasms of the small intestine are uncommon.
- The definition has been updated to the current RMA format and style but coverage remains the same.
- For the SoP factor relating to coeliac disease, a duration of disease has been specified with the update so that the factor now involves ‘having coeliac disease for at least 5 years before the clinical onset of malignant neoplasm of the small intestine.’
- There remains no other clinical worsening factors other than the inability to obtain appropriate clinical management.
- New RH (onset only) factors include having a cholecystectomy and diabetes mellitus for at least 5 years before the clinical onset of malignant neoplasm of the small intestine.

- The definition has been updated to explicitly exclude plantar fibromatosis which now has a separate SoP.
- For the trauma factor, the temporal period has been revised to be ‘within the seven days before clinical onset/worsening of plantar fasciitis’ rather than the previously described ‘between two and seven days.’
- The running factor has been updated to allow for a lower duration of running before the clinical onset/worsening of plantar fasciitis. It has been revised to be ‘at least the 2 months before the clinical onset/worsening’ compared to what was previously ‘3- 6 months.’
- The factor relating to ‘exercise involving repetitive weight bearing on the affected foot’ now requires a lower duration of exercise before the clinical onset/worsening. It has been changed to ‘at least 2 months before’ rather than ‘3- 6 months.’
- The factor relating to ‘increase in weight bearing activity’ has been updated to share the same format as other musculoskeletal overuse injuries factors but otherwise remains the same.
- The obesity factor has now been extended to include being overweight (BMI of 25 or greater).
- The systemic arthritis SoP factor has only had minor changes to the ordering of the list of systemic arthritic disease. As previously, rheumatoid arthritis is not on the list.
- The factor relating to ‘inappropriate footwear’ has been updated to describe it as ‘footwear with inadequate cushioning’ instead.

- The definition has been re-formatted but coverage remains the same.
- The ‘hormone replacement therapy’ factor now refers to ‘menopausal hormone therapy’ rather than ‘hormone replacement therapy’ and the time frame specified involving cessation of the ‘menopausal hormone therapy’ before the clinical onset of malignant neoplasm of the breast is now 5 years for both RH and BoP SoPs (previously it was 10 years for RH and 5 years for BoP).
- The factor relating to ‘combined oral contraceptives’ has been updated to differentiate the specific ‘continued period of use’ when using the medication (between 2 and 5 years or a period of at least 5 years). There are also slight differences to the RH and BoP SoP time frames specified when it comes to the onset of malignant neoplasm of the breast after cessation of the combined oral contraceptives.
- The diethylstilbestrol SoP factor has now had the 30 year restriction removed from BoP.
- The factors concerning digoxin and diabetes mellitus have now been removed from the BoP SoP.
- The factor concerning alcohol has now been restricted to females only in the BOP SoP.
- For both RH and BoP SoPs, the ‘being pregnant’ factor has had the latency period revised from ‘being pregnant within the ten years before the clinical onset of malignant neoplasm of the breast’ to ‘being pregnant within the 25 years before the clinical onset.’
- For both RH and BoP SoPs, the ‘later life first birth’ factor has been updated with the maximum latency period of ‘within the 30 years before the clinical onset of malignant neoplasm of the breast’ now removed.
- The smoking factor has been updated for both RH and BoP SoPs. It has now changed from being included in the RH SoP only to both RH and BoP SoPs. It has been limited to females only in the BoP SoP. The revised wording reflects the current consistent wording for smoking factors.
- The drinking alcohol factor has been revised to be consistent with current wording for alcohol factors. This factor has now been limited to females only and specifies duration of use before clinical onset. The maximum latency period has now also been extended to be ‘within 40 years’ rather than 20 years.
- For both RH and BoP SoPs, the ‘physical inactivity’ factor has been revised to be consistent with current wording and now has the duration being ‘at least 5 consecutive years’ for RH and 10 years for BoP before the clinical onset of malignant neoplasm of the breast. Before this, it has been 10 years for RH and 20 years for BoP.
- The obesity factor has been updated with its definition now including waist circumference.

- The diabetes mellitus factor and the digoxin factor have been removed from the BoP SoP. For the digoxin factor, the maximum latency period has been updated to be 'within 5 years' instead of 'within 10 years of cessation' before the clinical onset of malignant neoplasm of the breast.
- The wording has been updated for the factor relating to 'screening' to include only females aged 50 to 69 years old.
- New factors for RH only and onset only include hormone therapy for prostate cancer, transgender cross-sex hormone therapy, passive smoking, and exposure to ethylene oxide, and night shift work.

Malignant neoplasm of the lung

Revocation – 86 & 87 of 2023

Replaces 92 & 93 of 2014

- The format of the definition has been updated and there is now a list of included conditions and a list of excluded conditions. Coverage remains the same.
- The smoking factor has been updated with the current definition of pack-year.
- The factor relating to environmental tobacco smoke has been re-formatted to be consistent with current wording for smoking factors. No change to dose but definition of exposure to second-hand smoke now provided.
- The asbestos factor now has been updated in terms of wording and with the period and number of hours of asbestos exposure in an enclosed space before the clinical onset of malignant neoplasm of the lung.
- The factors relating to polycyclic aromatic hydrocarbons has been re-formatted and there has been a relaxing of the restrictions regarding soot.
- The diesel engine factor has had the part (b) of its definition removed (repairing or servicing diesel engines).
- The factor relating to radon gas has been reworded with its definitions combined and simplified.
- The painter factor has had its wording changed but no change to dose and time periods.
- There is a new factor relating to acute silicosis to be consistent with the factor in the SoP for fibrosing interstitial lung disease.
- The factors relating to inhalation of metals and metalloids has been updated with the specified list of metal or metalloids now including 'trivalent antimony and antimony compounds' for RH only. 'Cobalt metal with tungsten carbide' remains only relevant for RH.
- The factor relating to berylliosis has been updated in terms of wording and its definition.

- The cannabis factor has been updated with ‘joint-years of cannabis’ now changed to ‘one joint-year’ definition.
- The factor relating to outdoor air pollution now has a note added to define ambient chronically polluted air.
- ‘Iron and steel founding’ has been removed from the factor relating to rubber production and moved to a factor on polycyclic aromatic hydrocarbons.
- The factor relating to beta-carotene supplements has been removed from RH and BoP.
- The scleroderma factor has been changed to ‘systemic sclerosis’ to be consistent with current Systemic Sclerosis SoP.
- There are new factors for opium (RH and BoP), welding (RH and BoP), benzene (RH), Janus Kinase inhibitors (RH) and Epstein Barr virus infection for lymphoepithelial carcinoma of the lung (RH)
- There are no worsening factors which is consistent with the usual practice for malignant neoplasms.

Charcot-Marie-Tooth disease

Revocation – 88 & 89 of 2023

Current 21 & 22 of 2015

- There have been minor changes to the definition but coverage remains the same.
- There are two worsening only factors – drug and inability to obtain appropriate clinical management.
- All the drug sub-factors have been replaced with a generic drug factor.

Contact for this bulletin:

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