

Avdelningen för register och statistik
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Kodning av hälsotillstånd relaterade till elektroniska cigaretter

Hälsotillstånd relaterade till elektroniska cigaretter kan fr.o.m. idag kodas i ICD-10-SE med **U07.0 Kod som kan tas i bruk med kort varsel**.

Kodtexten fr.o.m. 1/1 2020 blir: **U07.0 Hälsotillstånd relaterat till bruk av elektroniska cigaretter (Vaping related disorder)**.

Bakgrunden är att WHO den 24 september genomförde motsvarande förändring i den internationella klassifikationen ICD-10. Anledningen är den senaste tidens rapporter om insjuknande och dödsfall som rapporterats efter användning av elektroniska cigaretter. WHO-Family of Classifications har delgivit medlemsländerna följande information om bakgrunden till beslutet

“In reaction to the recent occurrence of vaping related disorder, and in consultation with the WHO Framework convention on Tobacco control, the WHOFIC Network CSAC was convened to discuss a code for vaping related illness for immediate use. Please find the details of the discussion, below.”

“Vaping related disorder is coded in ICD-10 with U07.0, (and in ICD-11 with RA00.0). The code is valid for use as of today.”

“Background

Several illnesses and deaths have been reported following use of vaping devices. Following discussion with the WHO framework convention on Tobacco Control, it would be relevant to be able to track relevant cases, until more detail is known. The coding recommendation will be part of an official communication to member states that is being prepared and that covers other aspects of the situation.

The exact etiopathomechanism of the disorder and the mechanism leading to the lung damage are unclear. Other organs might be affected as well. The substance or substance combination that has created the damage is not identified yet.

Rationale and decisions

With respect to the lack of clarity of the mechanisms, the term ‘disorder’ would be preferred.

With respect to the possible affection of other organ systems, there would be no specific reference to the lung, at this time.

The preferred title would be “Vaping related disorder”

The range for emergency codes to be included in all IT systems ends at U08. Category U07 is the first one to be free. In view of the remaining limited range of codes in the systems, it was decided to code “Vaping related disorder” to the 4-character category U07.0.

It is understood that categories up to U49 can be used for international emergencies and CSAC will discuss to expand the range of categories that are present in IT systems to U09.

All cases presenting vaping related disorder would be coded in ICD-10 U07.0 and in ICD-11 RA00.0 Other codes could be used in combination to describe in more detail the presentation of an individual case.

In discussion, the following description was agreed. There may be some modification to match most recent findings.

1. Disorder resulting from inhaling a vaporized solution (aerosol) which frequently contains flavourants, usually dissolved into Propylene Glycol or Glycerin, or both, and may or may not contain doses of nicotine, and other substances and additives with the use of electronic nicotine delivery systems (ENDS) or electronic non-nicotine delivery systems (ENNDS).
2. In the affected individual, infections as cause of the damage are unlikely or should have been excluded.
3. Relevant findings include proof of presence of pulmonary infiltrate, such as opacities, on plain film chest radiograph or ground-glass opacities on chest CT.

Synonyms: dabbing related lung damage, dabbing related disorder, electronic cigarette related lung damage, electronic cigarette related disorder (for the index add both terms but replacing the word ‘damage’ with the word ‘injury’)

Additional comments:

ICD-10 has already some related codes for inhalation related lung damage (J32.-), but external causes are utterly unspecific (X45 alcohol,- index ethylene glycol; X44 – index glycerin) and do not take into account that the e-liquid is a mixture of a series of ingredients.

A similar problem exists in ICD-11 where we also have CA81 with the same subdivision as in ICD-10, in addition there is NB32.32 ‘Inhalation injury of lung’ amidst the traumatic injuries. We can code separately all included substances (e.g. ethylene glycol = XM1762) but none of the mixtures.

Depending on outcomes of ongoing research, some specific code could be assigned later.”