Western Australian Coding Rule

0414/10 CADASIL (Cerebral Autosomal Dominant Arteriopathy with Subcortical Infarcts and Leukoencephalopathy)

WA Coding Rule 0112/06 CADASIL (Cerebral Autosomal Dominant Arteriopathy with Subcortical Infarcts and Leukoencephalopathy) is superseded by ACCD Coding Rule CADASIL (Ref No: Q2799) effective 1 April 2014; (log in to view on the ACCD CLIP portal).

DECISION

WA Coding Rule 0112/06 CADASIL (Cerebral Autosomal Dominant Arteriopathy with Subcortical Infarcts and Leukoencephalopathy) is retired.

[Effective 1 Apr 2014, ICD-10-AM/ACHI/ACS 8th Ed.]
Western Australian Coding Rule

0112/06 CADASIL (Cerebral Autosomal Dominant Arteriopathy with Subcortical Infarcts and Leukoencephalopathy)

Q. Can you please confirm if past coding advice for CADASIL is still correct?

A. Past advice (WA decision W1683) is still correct. CADASIL is the first known genetic form of vascular dementia with an identified gene. More than 400 families from countries around the world have already been identified as carriers of the gene.

CADASIL is an autosomal dominant disorder whose gene, Notch3, is located on chromosome 19. The symptoms of CADASIL are attributed to mutations in this gene.

CADASIL is a hereditary cause of stroke, dementia, migraine with aura, and mood disorders. Symptoms of this disorder appear from the mid-twenties to around 45 years of age and affected individuals typically die by age 65.

It is important to note that because there is no treatment for CADASIL, a similar counselling protocol to Huntington's disease should be followed for presymptomatic patients.

http://www.neurocast.com

Coding of CADASIL should be coded as you would code a syndrome, however, three core codes should be coded at each admission: F01.2 Subcortical vascular dementia and I67.8 Other specified cerebrovascular disease and Q93.8 Other deletions from the autosomes.

Other conditions should be coded if present and meet ACS 0002. They may include codes such as F32.9x, G43.x, I69.3, I69.4, I64 or I63.x.

DECISION

Coding of CADASIL should be coded as you would code a syndrome, however, three core codes should be coded at each admission: F01.2 Subcortical vascular dementia and I67.8 Other specified cerebrovascular disease and Q93.8 Other deletions from the autosomes.

[Effective 18 Jan 2012, ICD-10-AM/ACHI/ACS 7th Ed.]