WG 2 (Preventive Medicine and Healthcare Policies)

Evaluating the Impact of Revised Surgical Approval Policies on Soldier Functionality in the IDF: A Nationwide, Historical Cohort Study

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Background:
Soldiers in the Israel Defense Forces (IDF) receive complete medical coverage without out-of-pocket expenses. Some procedures require approval by the Medical Services Branch. Shoulder arthroscopy is approved only for individuals experiencing two clinically confirmed shoulder dislocations requiring reduction or those with superior labrum anterior and posterior (SLAP) lesion type 3 or 4 on imaging. Similarly, functional endoscopic sinus surgery (FESS) and submucosal resection (SMR) are approved only for individuals with nasal congestion after three months of nasal corticosteroids and saline irrigation, provided allergic rhinitis requiring immunotherapy and for FESS, asthma has been ruled out.
Rationale:
Five years ago, before these policy changes, any surgery referral was automatically
approved. These changes aim to optimize resource use and avoid complications associated with unnecessary surgeries, yet their impact on soldier functionality remains unquantified. To identify data markers of functionality within the IDF and evaluate outcomes before and after the revised policies for shoulder arthroscopy and nasal surgeries (FESS and SMR).
Methods:
This historical cohort study using data from the entire IDF serving population, past and present. For shoulder arthroscopy, we will include individuals who underwent magnetic resonance arthroscopy, ensuring injury data availability. For FESS and SMR, patients will be grouped by referral timing relative to the policy changes, with controls defined as those referred before the changes who fully exhausted conservative treatment (per drug dispensing and allergy referral records). Outcomes will include hospitalization metrics, rest days, changes in occupational assignments, with at least one year of follow-up (up to 2024). A multivariate logistic regression model will evaluate the likelihood of experiencing each outcome returning to duty, controlling for sociodemographic and functional factors.
Preliminary findings:
Under the revised policies, 40–50% of surgery referrals are not approved by the IDF Medical Services Branch.
Statement of importance:
This study tests recent IDF health services policy changes by establishing reliable functionality markers and offers a framework for future revisions to enhance patient care and operational readiness.

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Clinical and Occupational Impact of Systemic and Biological Treatments on Soldiers with Psoriasis

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Background:
Psoriasis is a chronic inflammatory dermatological condition characterized by its systemic effects, which substantially undermining patients' quality of life. Pharmacological treatment of psoriasis can be classified into local and systemic therapies. There is limited data comparing different advanced biological therapies and the rate of treatment persistence and other healthcare services utilization outcomes.
Rationale:
Treatment persistence is often used as a surrogate marker for therapeutic success when assessing treatments for psoriasis, particularly advanced biological therapies. The Medical Corps of the Israel Defense Forces (IDF) has access to comprehensive data on patient diagnoses and medication dispensation, allowing for a robust analysis of treatment outcomes.
Methods:
This historical cohort study consists of soldiers with psoriasis treated with systemic and biological therapies between 2002-2025. Using electronic health records, we will include those with >=3 months on specific treatment. We would use dispensation data to assess the treatment persistence of each systemic psoriasis therapy. Analyses would be repeated by baseline characteristics such as age, sex, body mass index, and history of mental disorders. Additional outcomes would include the number of visits with primary care physicians, dermatologists' and other experts' consultations, mental health-related visits, and more.
Preliminary results:
Between 2014 and 2024, 2540 soldiers with a history of psoriasis were recruited (0.3% of all recruits; 1481 men). As of February 2025, there were 49 soldiers with psoriasis requiring biological treatment (17 active-duty and 32 career soldiers).
Statement of importance:
Given the limited data in Israel, this research will determine drugs' effectiveness and patients' tolerability of various biological treatments for psoriasis in the setting of military service, with direct implications for clinical practice and policymaking.