



Australian Government  
Repatriation Medical Authority

## Statement of Principles concerning

# SUBDURAL HAEMATOMA

## No. 33 of 2011

for the purposes of the

*Veterans' Entitlements Act 1986*  
and  
*Military Rehabilitation and Compensation Act 2004*

### Title

1. This Instrument may be cited as Statement of Principles concerning subdural haematoma No. 33 of 2011.

### Determination

2. This Statement of Principles is determined by the Repatriation Medical Authority under subsection **196B(2)** of the *Veterans' Entitlements Act 1986* (the VEA).

### Kind of injury, disease or death

3. (a) This Statement of Principles is about **subdural haematoma** and **death from subdural haematoma**.  
(b) For the purposes of this Statement of Principles, "**subdural haematoma**" means an accumulation of blood in the space between the dura mater and the arachnoid mater, due to tearing of the veins in that space. This definition includes both chronic and acute forms of subdural haematoma, and includes both intracranial and spinal subdural haematoma.

This definition excludes:

- (i) bleeding from a cerebral tumour where the bleeding extends into the subdural space; and

- (ii) bleeding from an intracerebral haemorrhage where the bleeding extends into the subdural space.

#### **Basis for determining the factors**

- 4. The Repatriation Medical Authority is of the view that there is sound medical-scientific evidence that indicates that **subdural haematoma** and **death from subdural haematoma** can be related to relevant service rendered by veterans, members of Peacekeeping Forces, or members of the Forces under the VEA, or members under the *Military Rehabilitation and Compensation Act 2004* (the MRCA).

#### **Factors that must be related to service**

- 5. Subject to clause 7, at least one of the factors set out in clause 6 must be related to the relevant service rendered by the person.

#### **Factors**

- 6. The factor that must as a minimum exist before it can be said that a reasonable hypothesis has been raised connecting **subdural haematoma** or **death from subdural haematoma** with the circumstances of a person's relevant service is:
  - (a) for intracranial subdural haematoma only:
    - (i) experiencing a head injury within the three months before the clinical onset of subdural haematoma; or
    - (ii) having a specified form of dementia at the time of the clinical onset of subdural haematoma; or
    - (iii) having alcohol dependence or alcohol abuse at the time of the clinical onset of subdural haematoma; or
    - (iv) having Paget's disease of bone, affecting the skull, at the time of the clinical onset of subdural haematoma; or
    - (v) having epilepsy and having an epileptic seizure within the three months before the clinical onset of subdural haematoma; or
  - (b) for spinal subdural haematoma only:
    - (i) experiencing trauma to the spinal region within the three months before the clinical onset of subdural haematoma; or
    - (ii) having ankylosing spondylitis at the time of the clinical onset of subdural haematoma; or
  - (c) undergoing a spinal procedure within the three months before the clinical onset of subdural haematoma; or
  - (d) experiencing a sudden change in intracranial pressure or spinal intravenous pressure, resulting from a specified activity, within the one week before the clinical onset of subdural haematoma; or

- (e) undergoing a course of treatment with a drug from the specified list within the one month before the clinical onset of subdural haematoma; or
- (f) having an acquired haematological disorder from the specified list at the time of the clinical onset of subdural haematoma; or
- (g) undergoing haemodialysis within the three months before the clinical onset of subdural haematoma; or
- (h) undergoing a course of treatment with a drug from the specified list within the one month before the clinical worsening of subdural haematoma; or
- (i) having an acquired haematological disorder from the specified list at the time of the clinical worsening of subdural haematoma; or
- (j) undergoing haemodialysis within the three months before the clinical worsening of subdural haematoma; or
- (k) inability to obtain appropriate clinical management for subdural haematoma.

**Factors that apply only to material contribution or aggravation**

7. Paragraphs **6(h) to 6(k)** apply only to material contribution to, or aggravation of, subdural haematoma where the person's subdural haematoma was suffered or contracted before or during (but not arising out of) the person's relevant service.

**Inclusion of Statements of Principles**

8. In this Statement of Principles if a relevant factor applies and that factor includes an injury or disease in respect of which there is a Statement of Principles then the factors in that last mentioned Statement of Principles apply in accordance with the terms of that Statement of Principles as in force from time to time.

**Other definitions**

9. For the purposes of this Statement of Principles:

**"a drug from the specified list"** means:

- (a) aspirin;
- (b) clopidogrel;
- (c) heparin (including low molecular weight heparin); or
- (d) warfarin;

**"a specified activity"** means:

- (a) childbirth;
- (b) lifting or carrying heavy weights; or
- (c) paroxysmal coughing;

**"a specified form of dementia"** means:

- (a) Alzheimer-type dementia;
- (b) dementia pugilistica;
- (c) Lewy body dementia;
- (d) Pick's disease (frontotemporal dementia); or
- (e) vascular dementia;

**"an acquired haematological disorder from the specified list"** means:

- (a) aplastic anaemia;
- (b) bleeding disorder secondary to snake bite;
- (c) bleeding disorder secondary to Vitamin K deficiency;
- (d) disseminated intravascular coagulation;
- (e) essential thrombocythaemia;
- (f) leukaemia;
- (g) plasma cell dyscrasias;
- (h) post-transfusion purpura;
- (i) qualitative platelet defects associated with coagulation defect;
- (j) severe liver disease;
- (k) thrombocytopaenia; or
- (l) thrombotic thrombocytopaenic purpura;

**"death from subdural haematoma"** in relation to a person includes death from a terminal event or condition that was contributed to by the person's subdural haematoma;

**"head injury"** means trauma to the head resulting from external forces, including blunt trauma, acceleration or deceleration forces, or blast force;

**"relevant service"** means:

- (a) operational service under the VEA;
- (b) peacekeeping service under the VEA;
- (c) hazardous service under the VEA;
- (d) warlike service under the MRCA; or
- (e) non-warlike service under the MRCA;

**"spinal procedure"** means lumbar puncture, spinal anaesthesia or surgery involving the spinal column;

**"terminal event"** means the proximate or ultimate cause of death and includes:

- (a) pneumonia;
- (b) respiratory failure;
- (c) cardiac arrest;
- (d) circulatory failure; or
- (e) cessation of brain function;

**"trauma to the spinal region"** means injury to the vertebral column, spinal cord or spinal meninges as a result of external force. In this definition, external force includes blunt trauma, acceleration or deceleration forces, blast force or a foreign body penetrating the spinal region.

**Date of effect**

**10.** This Instrument takes effect from 25 May 2011.

Dated this *ninth* day of *May* 2011

The Common Seal of the )  
Repatriation Medical Authority )  
was affixed to this instrument )  
in the presence of: )

KEN DONALD  
CHAIRPERSON