



Australian Government  
Repatriation Medical Authority

Statement of Principles  
concerning

**OPEN-ANGLE GLAUCOMA**

**No. 27 of 2012**

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 open-angle glaucoma No. 27 of 2012.

**Determination**

2. The Repatriation Medical Authority under subsection **196B(2)** and **(8)** of the *Veterans' Entitlements Act 1986* (the VEA):
  - (a) revokes Instrument No. 69 of 2001, as amended by Instrument No. 23 of 2006, concerning open-angle glaucoma; and
  - (b) determines in their place this Statement of Principles.

**Kind of injury, disease or death**

3.
  - (a) This Statement of Principles is about **open-angle glaucoma** and **death from open-angle glaucoma**.
  - (b) For the purposes of this Statement of Principles, "**open-angle glaucoma**" means a progressive neuropathy involving characteristic optic disc abnormalities and visual field defects, associated with an open iridocorneal angle and usually associated with raised intraocular pressure.

**Basis for determining the factors**

4. The Repatriation Medical Authority is of the view that there is sound medical-scientific evidence that indicates that **open-angle glaucoma** and **death from**

**open-angle glaucoma** 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 **open-angle glaucoma** or **death from open-angle glaucoma** with the circumstances of a person's relevant service is:
- (a) having glucocorticoid therapy as specified before the clinical onset of open-angle glaucoma, and where the glucocorticoid therapy as specified has ceased or decreased, the last dose of the therapy was received within the three months before the clinical onset of open-angle glaucoma; or
  - (b) having a specified disorder of the affected eye or orbit at the time of the clinical onset of open-angle glaucoma; or
  - (c) having neovascularisation of the iridocorneal angle of the affected eye due to a specified condition or procedure before the clinical onset of open-angle glaucoma; or
  - (d) having trauma as specified to the affected eye before the clinical onset of open-angle glaucoma; or
  - (e) having sympathetic ophthalmia at the time of the clinical onset of open-angle glaucoma; or
  - (f) having intraocular surgery to the affected eye before the clinical onset of open-angle glaucoma; or
  - (g) having non-intraocular surgery to the affected eye in the one month before the clinical onset of open-angle glaucoma; or
  - (h) having received a cumulative equivalent dose of at least 10 sieverts of ionising radiation to the affected eye before the clinical onset of open-angle glaucoma; or
  - (i) undergoing a course of therapeutic radiation for cancer, where the affected eye was in the field of radiation, before the clinical onset of open-angle glaucoma; or
  - (j) having Cushing's syndrome within the 12 months before the clinical onset of open-angle glaucoma; or
  - (k) having Graves' disease at the time of the clinical onset of open-angle glaucoma; or
  - (l) having hypothyroidism at the time of the clinical onset of open-angle glaucoma; or

- (m) having glucocorticoid therapy as specified before the clinical worsening of open-angle glaucoma, and where the glucocorticoid therapy as specified has ceased or decreased, the last dose of the therapy was received within the three months before the clinical worsening of open-angle glaucoma; or
- (n) having a specified disorder of the affected eye or orbit at the time of the clinical worsening of open-angle glaucoma; or
- (o) having neovascularisation of the iridocorneal angle of the affected eye due to a specified condition or procedure before the clinical worsening of open-angle glaucoma; or
- (p) having trauma as specified to the affected eye before the clinical worsening of open-angle glaucoma; or
- (q) having sympathetic ophthalmia at the time of the clinical worsening of open-angle glaucoma; or
- (r) having intraocular surgery to the affected eye before the clinical worsening of open-angle glaucoma; or
- (s) having non-intraocular surgery to the affected eye in the one month before the clinical worsening of open-angle glaucoma; or
- (t) having received a cumulative equivalent dose of at least 10 sieverts of ionising radiation to the affected eye before the clinical worsening of open-angle glaucoma; or
- (u) undergoing a course of therapeutic radiation for cancer, where the affected eye was in the field of radiation, before the clinical worsening of open-angle glaucoma; or
- (v) having Cushing's syndrome within the 12 months before the clinical worsening of open-angle glaucoma; or
- (w) having Graves' disease at the time of the clinical worsening of open-angle glaucoma; or
- (x) having hypothyroidism at the time of the clinical worsening of open-angle glaucoma; or
- (y) inability to obtain appropriate clinical management for open-angle glaucoma.

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

7. Paragraphs **6(m) to 6(y)** apply only to material contribution to, or aggravation of, open-angle glaucoma where the person's open-angle glaucoma 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 high or very high potency topical glucocorticoid"** means:

- (a) betamethasone dipropionate 0.05%;
- (b) betamethasone valerate 0.1%;
- (c) clobetasol propionate 0.05%;
- (d) diflucortolone valerate 0.1%;
- (e) fluocinolone acetonide 0.025%; or
- (f) another topical glucocorticoid of equivalent potency;

**"a specified condition or procedure"** means one of the following:

- (a) carotid endarterectomy on the affected side;
- (b) diabetic retinopathy of the affected eye;
- (c) intraocular surgery to the affected eye;
- (d) intraocular tumour involving the affected eye;
- (e) ipsilateral carotid artery occlusive disease;
- (f) radiotherapy involving the affected eye;
- (g) retinal detachment in the affected eye;
- (h) retinal vascular occlusive disease of the affected eye;
- (i) retinal vasculitis of the affected eye; or
- (j) any acquired condition causing posterior segment ischaemia of the affected eye;

**"a specified disorder"** means one of the following:

- (a) a benign or malignant tumour;
- (b) a cyst;
- (c) a vascular malformation or vascular thrombosis;
- (d) amyloidosis;
- (e) choroidal effusion;
- (f) elevated ipsilateral episcleral venous pressure;
- (g) intraocular haemorrhage (including ghost cells);
- (h) leakage of lens protein or lens particles (phacolytic glaucoma);
- (i) scleritis or episcleritis; or
- (j) uveitis;

**"cumulative equivalent dose"** means the total dose of ionising radiation received by the particular organ or tissue. The formula used to calculate the cumulative equivalent dose allows doses from multiple types of ionising radiation to be combined, by accounting for their differing biological effect. The unit of equivalent dose is the sievert. For the purposes of this Statement of Principles, the calculation of cumulative equivalent dose excludes doses received from normal background radiation, but includes therapeutic radiation, diagnostic radiation, cosmic radiation at high altitude, radiation from occupation-related sources and radiation from nuclear explosions or accidents;

**"death from open-angle glaucoma"** in relation to a person includes death from a terminal event or condition that was contributed to by the person's open-angle glaucoma;

**"equivalent glucocorticoid therapy"** means a glucocorticoid in the following table, at the doses specified in the table, or a therapeutically equivalent dose of another glucocorticoid:

<b>Glucocorticoid</b>	<b>Minimum cumulative dose (milligrams)</b>	<b>Minimum average rate (milligrams/day)</b>
Cortisone	1875	62.5
Prednisone	375	12.5
Prednisolone	375	12.5
Methylprednisolone	300	10
Triamcinolone	300	10
Paramethasone	150	5
Betamethasone	60	2
Dexamethasone	50	1.67

**"equivalent inhaled glucocorticoid"** means:

- (a) 8000 micrograms of triamcinolone;
- (b) 1600 micrograms of budesonide;
- (c) 1000 micrograms of fluticasone; or
- (d) a therapeutically equivalent dose of another inhaled glucocorticoid;

**"Graves' disease"** means an autoimmune disorder of the thyroid usually associated with hyperthyroidism, goitre and exophthalmus;

**"having glucocorticoid therapy as specified"** means:

- (a) taking:
  - (i) hydrocortisone, orally or by injection, to a cumulative dose of at least 5000 milligrams, or
  - (ii) equivalent glucocorticoid therapy, orally or by injection;
- (b) inhaling at least 2000 micrograms of beclomethasone, or equivalent inhaled glucocorticoid, daily, for at least one month;
- (c) using a topical ocular glucocorticoid to the affected eye, daily, for at least two weeks;
- (d) using an intranasal glucocorticoid, daily, for at least one month;
- (e) applying a high or very high potency topical glucocorticoid to at least 20 percent of total skin surface area, daily, for at least one month;
- (f) applying a topical glucocorticoid to the face, daily, for at least one month;
- (g) using glucocorticoid containing enemas, daily, for at least one month; or
- (h) having an intraocular or periocular glucocorticoid injection to the affected eye;

**"relevant service"** means:

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

**"sympathetic ophthalmia"** means the presence of uveitis in both eyes following:

- (a) intraocular surgery to one eye; or
- (b) trauma as specified to one eye;

**"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 as specified"** means penetrating, blunt, chemical, thermal or ionising radiation injury involving the affected eye that results in intraocular inflammation, intraocular bleeding or other intraocular tissue disruption;

**"uveitis"** means inflammation of the vascular middle coat of the eye ball, comprising the iris, ciliary body and choroid.

### **Application**

- 10.** This Instrument applies to all matters to which section 120A of the VEA or section 338 of the MRCA applies.

### **Date of effect**

- 11.** This Instrument takes effect from 7 March 2012.

Dated this *twenty-fourth* day of *February* 2012

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

KEN DONALD  
CHAIRPERSON