



Australian Government  
Repatriation Medical Authority

Statement of Principles  
concerning

**OTITIC BAROTRAUMA**

**No. 35 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 otitic barotrauma No. 35 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. 27 of 2001 concerning otitic barotrauma; and
  - (b) determines in its place this Statement of Principles.

**Kind of injury, disease or death**

3.
  - (a) This Statement of Principles is about **otitic barotrauma** and **death from otitic barotrauma**.
  - (b) For the purposes of this Statement of Principles, "**otitic barotrauma**" means damage to the middle or inner ear arising from inequalities in the barometric pressure between the surrounding atmosphere and the air within the middle ear space, and which gives rise to clinical manifestations such as otalgia, tinnitus, hearing loss, perforation of the tympanic membrane, disruption of the ossicle chain, rupture of the round or oval window membranes with vertigo or perilymphatic fistula. Otitic barotrauma is also known as aerotitis media, aviator's ear, aviation otitis, barotitis media or ear squeeze.

- (c) Otitic barotrauma attracts ICD-10-AM code T70.0.
- (d) In the application of this Statement of Principles, the definition of "**otitic barotrauma**" is that given at paragraph 3(b) above.

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

- 4. The Repatriation Medical Authority is of the view that there is sound medical-scientific evidence that indicates that **otitic barotrauma** and **death from otitic barotrauma** 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 **otitic barotrauma** or **death from otitic barotrauma** with the circumstances of a person's relevant service is:
  - (a) experiencing a change in ambient barometric pressure as specified, within the 24 hours before the clinical onset of otitic barotrauma; or
  - (b) being exposed to a blast, including the blast from a lightning strike, within the 24 hours before the clinical onset of otitic barotrauma; or
  - (c) receiving mechanical ventilation involving a face mask within the 24 hours before the clinical onset of otitic barotrauma; or
  - (d) breathing 100 percent oxygen for at least 30 minutes within the 24 hours before the clinical onset of otitic barotrauma; or
  - (e) having eustachian tube dysfunction within the 24 hours before the clinical onset of otitic barotrauma; or
  - (f) experiencing a change in ambient barometric pressure as specified, within the 24 hours before the clinical worsening of otitic barotrauma; or
  - (g) being exposed to a blast, including the blast from a lightning strike, within the 24 hours before the clinical worsening of otitic barotrauma; or
  - (h) receiving mechanical ventilation involving a face mask within the 24 hours before the clinical worsening of otitic barotrauma; or
  - (i) breathing 100 percent oxygen for at least 30 minutes within the 24 hours before the clinical worsening of otitic barotrauma; or
  - (j) having eustachian tube dysfunction within the 24 hours before the clinical worsening of otitic barotrauma; or

- (k) inability to obtain appropriate clinical management for otitic barotrauma.

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

- 7. Paragraphs **6(f) to 6(k)** apply only to material contribution to, or aggravation of, otitic barotrauma where the person's otitic barotrauma 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 change in the ambient barometric pressure as specified"** means a significant reduction or increase in the pressure surrounding the person and occurring with any of the following:

- (a) ascending from a submerged craft or device, or a pressurised tunnel or a submarine escape training facility;
- (b) decompression or compression in a hypobaric or a hyperbaric chamber;
- (c) flying; or
- (d) underwater diving;

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

**"eustachian tube dysfunction"** means an inability to equalise pressure in the middle ear to the pressure surrounding the individual from any of several conditions including:

- (a) deviation of nasal septum;
- (b) rhinitis (including allergic rhinitis and non-allergic rhinitis);
- (c) sinusitis; or
- (d) upper respiratory tract infection;

**"ICD-10-AM code"** means a number assigned to a particular kind of injury or disease in The International Statistical Classification of Diseases and Related Health Problems, 10th Revision, Australian Modification (ICD-10-AM), Seventh Edition, effective date of 1 July 2010, copyrighted by the National Centre for Classification in Health, Sydney, NSW, and having ISBN 978 1 74210 154 5;

**"mechanical ventilation"** means an artificial method of ventilation in which air is forced into the lungs of a person via mechanical means, and includes anaesthetic and continuous positive airway pressure (CPAP) use;

**"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;

**"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.

**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 2 May 2012.

Dated this *twentieth* day of *April* 2012

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

KEN DONALD  
CHAIRPERSON