

## **Statement of Principles**

# concerning SARCOIDOSIS (Reasonable Hypothesis) (No. 59 of 2016)

The Repatriation Medical Authority determines the following Statement of Principles under subsection 196B(2) of the *Veterans' Entitlements Act 1986*.

Dated 24 June 2016

The Common Seal of the Repatriation Medical Authority was affixed to this instrument at the direction of:

In a Jan

Professor Nicholas Saunders AO Chairperson

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### 1 Name

This is the Statement of Principles concerning *sarcoidosis (Reasonable Hypothesis)* (No. 59 of 2016).

### 2 Commencement

This instrument commences on 25 July 2016.

### 3 Authority

This instrument is made under subsection 196B(2) of the Veterans' Entitlements Act 1986.

### 4 Revocation

The Statement of Principles concerning sarcoidosis No. 115 of 2007 made under subsection 196B(2) of the VEA is revoked.

### 5 Application

This instrument applies to a claim to which section 120A of the VEA or section 338 of the *Military Rehabilitation and Compensation Act 2004* applies.

### 6 Definitions

The terms defined in the Schedule 1 - Dictionary have the meaning given when used in this instrument.

# 7 Kind of injury, disease or death to which this Statement of Principles relates

(1) This Statement of Principles is about sarcoidosis and death from sarcoidosis.

### Meaning of sarcoidosis

- (2) For the purposes of this Statement of Principles, sarcoidosis means a chronic, multisystem disorder characterised in affected organs by an accumulation of T lymphocytes and mononuclear phagocytes, non-caseating epithelioid granulomas, and derangement of the normal tissue architecture.
- (3) While sarcoidosis attracts ICD-10-AM code D86, in applying this Statement of Principles the meaning of sarcoidosis is that given in subsection (2).
- (4) For subsection (3), a reference to an ICD-10-AM code is a reference to the code assigned to a particular kind of injury or disease in *The International Statistical Classification of Diseases and Related Health Problems, Tenth Revision, Australian Modification* (ICD-10-AM),

Ninth Edition, effective date of 1 July 2015, copyrighted by the Independent Hospital Pricing Authority, ISBN 978-1-76007-020-5.

### Death from sarcoidosis

(5) For the purposes of this Statement of Principles, sarcoidosis, in relation to a person, includes death from a terminal event or condition that was contributed to by the person's sarcoidosis.

Note: *terminal event* is defined in the Schedule 1 – Dictionary.

#### 8 Basis for determining the factors

The Repatriation Medical Authority is of the view that there is sound medical-scientific evidence that indicates that sarcoidosis and death from sarcoidosis 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 MRCA.

Note: *relevant service* is defined in the Schedule 1 – Dictionary.

#### 9 Factors that must exist

At least one of the following factors must as a minimum exist before it can be said that a reasonable hypothesis has been raised connecting sarcoidosis or death from sarcoidosis with the circumstances of a person's relevant service:

- (1) being treated with interferon within the two years before the clinical onset of sarcoidosis;
- (2) being treated for human immunodeficiency virus infection with antiretroviral drugs at the time of the clinical onset of sarcoidosis;
- being treated with a tumour necrosis factor-α inhibitor at the time of the clinical onset of sarcoidosis;
- (4) being obese for at least five years within the 20 years before the clinical onset of sarcoidosis;

Note: *being obese* is defined in the Schedule 1 - Dictionary.

- (5) having received an organ or tissue transplant from a donor with sarcoidosis within the two years before the clinical onset of sarcoidosis;
- (6) being treated with interferon within the two years before the clinical worsening of sarcoidosis;
- (7) being treated for human immunodeficiency virus infection with antiretroviral drugs at the time of the clinical worsening of sarcoidosis;
- (8) being treated with a tumour necrosis factor-α inhibitor at the time of the clinical worsening of sarcoidosis;

(9) being obese for at least five years within the 20 years before the clinical worsening of sarcoidosis;

Note: *being obese* is defined in the Schedule 1 - Dictionary.

(10) inability to obtain appropriate clinical management for sarcoidosis.

### **10** Relationship to service

- (1) The existence in a person of any factor referred to in section 9, must be related to the relevant service rendered by the person.
- (2) The factors set out in subsections 9(6) to 9(10) apply only to material contribution to, or aggravation of, sarcoidosis where the person's sarcoidosis was suffered or contracted before or during (but did not arise out of) the person's relevant service.

# 11 Factors referring to an injury or disease covered by another Statement of Principles

In this Statement of Principles:

- (1) if a factor referred to in section 9 applies in relation to a person; and
- (2) that factor refers to an injury or disease in respect of which a Statement of Principles has been determined under subsection 196B(2) of the VEA;

then the factors in that Statement of Principles apply in accordance with the terms of that Statement of Principles as in force from time to time.

## **Schedule 1 - Dictionary**

Note: See Section 6

### 1 Definitions

In this instrument:

being obese means having a Body Mass Index (BMI) of 30 or greater.

*BMI* means  $W/H^2$  and where:

W is the person's weight in kilograms; and H is the person's height in metres.

MRCA means the Military Rehabilitation and Compensation Act 2004.

*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.

Note: MRCA and VEA are also defined in the Schedule 1 - Dictionary.

*sarcoidosis*—see subsection 7(2).

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

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

VEA means the Veterans' Entitlements Act 1986.