

# Statement of Principles concerning GANGLION (Reasonable Hypothesis) (No. 71 of 2016)

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

Dated 26 August 2016

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

Professor Nicholas Saunders AO

Chairperson

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#### 1 Name

This is the Statement of Principles concerning *ganglion (Reasonable Hypothesis)* (No. 71 of 2016).

#### 2 Commencement

This instrument commences on 26 September 2016.

#### 3 Authority

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

#### 4 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.

#### 5 Definitions

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

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

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

#### Meaning of ganglion

- (2) For the purposes of this Statement of Principles, ganglion means:
  - (a) a benign, cystic lesion overlying a joint or tendon, consisting of a thin fibrous capsule enclosing clear mucinous fluid which occurs commonly in the wrist and may be accompanied by pain, weakness and loss of function; and
  - (b) excludes cyst of bursa, cyst of synovium and ganglion in yaws.
- (3) While ganglion attracts ICD-10-AM code M67.4, in applying this Statement of Principles the meaning of ganglion 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 ganglion

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

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

#### 7 Basis for determining the factors

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

#### 8 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 ganglion or death from ganglion with the circumstances of a person's relevant service:

(1) having acute trauma to the affected joint or tendon within the one year before the clinical onset of ganglion;

Note: acute trauma to the affected joint or tendon is defined in the Schedule 1 - Dictionary.

(2) inability to obtain appropriate clinical management for ganglion.

#### 9 Relationship to service

- (1) The existence in a person of any factor referred to in section 8, must be related to the relevant service rendered by the person.
- (2) The factor set out in subsection 8(2) applies only to material contribution to, or aggravation of, ganglion where the person's ganglion was suffered or contracted before or during (but did not arise out of) the person's relevant service.

# 10 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 8 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 5

#### 1 Definitions

In this instrument:

acute trauma to the affected joint or tendon means a discrete event involving the application of significant physical force to or through the affected joint or tendon, that causes damage to the joint or tendon and the development, within 24 hours of the event occurring, of symptoms and signs of pain, and tenderness, and either altered mobility or range of movement of the joint or tendon. These symptoms and signs must last for a period of at least seven days following their onset; save for where medical intervention for the trauma to that joint or tendon has occurred and that medical intervention involves either:

- (a) immobilisation of the joint, tendon or limb by splinting, or similar external agent; or
- (b) injection of corticosteroids or local anaesthetics into that joint or around the tendon; or
- (c) surgery to that joint or tendon.

*ganglion*—see subsection 6(2).

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.

*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.