



**Australian Government**  
**Repatriation Medical Authority**

**Statement of Principles**  
**concerning**  
**MALIGNANT NEOPLASM OF THE OVARY**  
**(Reasonable Hypothesis)**  
**(No. 9 of 2018)**

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

Dated 22 December 2017

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

A handwritten signature in black ink, appearing to read 'Nicholas Saunders'.

Professor Nicholas Saunders AO  
Chairperson

# Contents

1	Name .....	3
2	Commencement .....	3
3	Authority .....	3
4	Revocation .....	3
5	Application.....	3
6	Definitions.....	3
7	Kind of injury, disease or death to which this Statement of Principles relates .....	3
8	Basis for determining the factors .....	4
9	Factors that must exist.....	4
10	Relationship to service .....	6
11	Factors referring to an injury or disease covered by another Statement of Principles.....	6
<b>Schedule 1 - Dictionary .....</b>		<b>7</b>
1	Definitions.....	7

**1 Name**

This is the Statement of Principles concerning *malignant neoplasm of the ovary (Reasonable Hypothesis)* (No. 9 of 2018).

**2 Commencement**

This instrument commences on 29 January 2018.

**3 Authority**

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

**4 Revocation**

The Statement of Principles concerning malignant neoplasm of the ovary No. 70 of 2009, as amended, made under subsections 196B(2) and (8) 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 malignant neoplasm of the ovary and death from malignant neoplasm of the ovary.

*Meaning of malignant neoplasm of the ovary*

- (2) For the purposes of this Statement of Principles, malignant neoplasm of the ovary:
- (a) means a primary malignant neoplasm arising from the cells of the ovary; and
  - (b) includes cell types of borderline malignant potential; and
  - (c) excludes soft tissue sarcoma, carcinoid tumour, non-Hodgkin's lymphoma and Hodgkin's lymphoma.

Note: Most primary malignant ovarian neoplasms are epithelial cancers (carcinomas). Other subtypes include malignant stromal and germ cell tumours.

- (3) While malignant neoplasm of the ovary attracts ICD-10-AM code C56 or D39.1, in applying this Statement of Principles the meaning of malignant neoplasm of the ovary 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), Tenth Edition, effective date of 1 July 2017, copyrighted by the Independent Hospital Pricing Authority, ISBN 978-1-76007-296-4.

*Death from malignant neoplasm of the ovary*

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

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 malignant neoplasm of the ovary and death from malignant neoplasm of the ovary 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: *MRCA*, *relevant service* and *VEA* are 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 malignant neoplasm of the ovary or death from malignant neoplasm of the ovary with the circumstances of a person's relevant service:

- (1) having endometriosis for at least five years before the clinical onset of malignant neoplasm of the ovary;
- (2) having received a cumulative equivalent dose of at least 0.1 sievert of ionising radiation to the ovary at least five years before the clinical onset of malignant neoplasm of the ovary;

Note: *cumulative equivalent dose* is defined in the Schedule 1 - Dictionary.

- (3) being obese for at least five years within the 20 years before the clinical onset of malignant neoplasm of the ovary;

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

- (4) inhaling respirable asbestos fibres in an enclosed space:
  - (a) for a cumulative period of at least 1 000 hours before the clinical onset of malignant neoplasm of the ovary; and
  - (b) at the time material containing respirable asbestos fibres was being applied, removed, dislodged, cut or drilled; and
  - (c) where the first inhalation of respirable asbestos fibres occurred at least five years before the clinical onset of malignant neoplasm of the ovary;
- (5) inhaling respirable asbestos fibres in an open environment:
  - (a) for a cumulative period of at least 3 000 hours before the clinical onset of malignant neoplasm of the ovary; and
  - (b) at the time material containing respirable asbestos fibres was being applied, removed, dislodged, cut or drilled; and
  - (c) where the first inhalation of respirable asbestos fibres occurred at least five years before the clinical onset of malignant neoplasm of the ovary;
- (6) for parous women only, an inability to breast feed for a cumulative period of at least six months before the clinical onset of malignant neoplasm of the ovary;

Note: The period of breastfeeding could be cumulative over a number of pregnancies.
- (7) an inability to undertake any physical activity greater than three METs for at least ten years within the 30 years before the clinical onset of malignant neoplasm of the ovary;

Note: **MET** is defined in the Schedule 1 - Dictionary.
- (8) an inability to consume an average of at least 150 grams per day of vegetables, for at least five consecutive years within the 20 years before the clinical onset of malignant neoplasm of the ovary;
- (9) applying talc to the perineal area on more days than not, for a period of at least five years, before the clinical onset of malignant neoplasm of the ovary;
- (10) for epithelial ovarian cancer only:
  - (a) being nulliparous at the time of the clinical onset of malignant neoplasm of the ovary; or

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

- (b) having hormone replacement therapy for at least five consecutive years before the clinical onset of malignant neoplasm of the ovary, and where the use of hormone replacement therapy has ceased, the clinical onset of malignant neoplasm of the ovary has occurred within ten years of that period;

Note: *hormone replacement therapy* is defined in the Schedule 1 - Dictionary.

- (11) for mucinous ovarian tumours only, smoking at least five pack-years of cigarettes, or the equivalent thereof in other tobacco products, before the clinical onset of malignant neoplasm of the ovary, and:

- (a) smoking commenced at least ten years before the clinical onset of malignant neoplasm of the ovary; and
- (b) where smoking has ceased, the clinical onset of malignant neoplasm of the ovary, has occurred within 30 years of cessation;

Note: *pack-years of cigarettes, or the equivalent thereof in other tobacco products* is defined in the Schedule 1 - Dictionary.

- (12) inability to obtain appropriate clinical management for malignant neoplasm of the ovary.

## **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 factor set out in subsection 9(11) applies only to material contribution to, or aggravation of, malignant neoplasm of the ovary where the person's malignant neoplasm of the ovary 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.

Note: ***BMI*** is also defined in the Schedule 1 - Dictionary.

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

W is the person's weight in kilograms; and

H is the person's height in metres.

***cumulative equivalent dose*** means the total dose of ionising radiation received by the particular organ or tissue from external exposure, internal exposure or both, apart from normal background radiation exposure in Australia, calculated in accordance with the methodology set out in *Guide to calculation of 'cumulative equivalent dose' for the purpose of applying ionising radiation factors contained in Statements of Principles determined under Part XIA of the Veterans' Entitlements Act 1986 (Cth)*, Australian Radiation Protection and Nuclear Safety Agency, as in force on 2 August 2017.

Note 1: Examples of circumstances that might lead to exposure to ionising radiation include being present during or subsequent to the testing or use of nuclear weapons, undergoing diagnostic or therapeutic medical procedures involving ionising radiation, and being a member of an aircrew, leading to increased levels of exposure to cosmic radiation.

Note 2: For the purpose of dose reconstruction, dose is calculated as an average over the mass of a specific tissue or organ. If a tissue is exposed to multiple sources of ionising radiation, the various dose estimates for each type of radiation must be combined.

***hormone replacement therapy*** means administration of estrogen preparations often in combination with progesterone to offset a hormone deficiency following surgically induced or naturally occurring menopause.

***malignant neoplasm of the ovary***—see subsection 7(2).

***MET*** means a unit of measurement of the level of physical exertion. 1 MET = 3.5 ml of oxygen/kg of body weight per minute, 1.0 kcal/kg of body weight per hour or resting metabolic rate.

***MRCAs*** means the *Military Rehabilitation and Compensation Act 2004*.

***nulliparous*** means never having experienced a gestation period of at least 20 weeks.

***pack-years of cigarettes, or the equivalent thereof in other tobacco products*** means a calculation of consumption where one pack-year of cigarettes equals 20 tailor-made cigarettes per day for a period of one calendar year, or 7 300 cigarettes. One tailor-made cigarette approximates one gram of tobacco or one gram of cigar or pipe tobacco by weight. One pack-year of tailor-made cigarettes equates to 7.3 kilograms of smoking tobacco by weight. Tobacco

products mean cigarettes, pipe tobacco or cigars, smoked alone or in any combination.

**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*.