



Australian Government
Repatriation Medical Authority

Statement of Principles
concerning
ANOSMIA
(Balance of Probabilities)
(No. 20 of 2021)

The Repatriation Medical Authority determines the following Statement of Principles under subsection 196B(3) of the *Veterans' Entitlements Act 1986*.

Dated 24 December 2020

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 *anosmia (Balance of Probabilities)* (No. 20 of 2021).

2 Commencement

This instrument commences on 25 January 2021.

3 Authority

This instrument is made under subsection 196B(3) of the *Veterans' Entitlements Act 1986*.

4 Repeal

The Statement of Principles concerning anosmia No. 119 of 2011 (Federal Register of Legislation No. F2011L01752) made under subsection 196B(3) of the VEA is repealed.

5 Application

This instrument applies to a claim to which section 120B of the VEA or section 339 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 anosmia and death from anosmia.

Meaning of anosmia

(2) For the purposes of this Statement of Principles, anosmia means an acquired, total and permanent loss of the ability to smell, due to a defect in the olfactory neuroepithelium, olfactory nerves or olfactory neural pathways in the brain.

Note: Loss of the ability to smell includes loss of the ability to detect odours, discriminate between odours or to identify odours.

(3) While anosmia attracts ICD-10-AM code R43.0, in applying this Statement of Principles the meaning of anosmia 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 anosmia

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

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

8 Basis for determining the factors

On the sound medical-scientific evidence available, the Repatriation Medical Authority is of the view that it is more probable than not that anosmia and death from anosmia can be related to relevant service rendered by veterans 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 exist before it can be said that, on the balance of probabilities, anosmia or death from anosmia is connected with the circumstances of a person's relevant service:

- (1) having sinusitis for at least the five years before the clinical onset of anosmia;
- (2) having perennial allergic rhinitis for at least the five years before the clinical onset of anosmia;

Note: *perennial allergic rhinitis* is defined in the Schedule 1 - Dictionary.

- (3) having an autoimmune disease from the specified list of autoimmune diseases at the time of the clinical onset of anosmia;

Note: *specified list of autoimmune diseases* is defined in the Schedule 1 - Dictionary.

- (4) having sarcoidosis at the time of the clinical onset of anosmia;
- (5) having Paget's disease of bone affecting the skull at the time of the clinical onset of anosmia;

- (6) having a neurological disease from the specified list of neurological diseases at the time of the clinical onset of anosmia;

Note: *specified list of neurological diseases* is defined in the Schedule 1 - Dictionary.

- (7) having hepatic encephalopathy at the time of the clinical onset of anosmia;
- (8) having chronic renal failure at the time of the clinical onset of anosmia;

Note: *chronic renal failure* is defined in the Schedule 1 - Dictionary.

- (9) having alcohol-induced major neurocognitive disorder, amnesic-confabulatory type, persistent or alcohol use disorder at the time of the clinical onset of anosmia;
- (10) having a condition or procedure from the specified list of conditions and procedures, which damages the olfactory neuroepithelium, the olfactory bulb or the olfactory neural pathways in the brain at the time of the clinical onset of anosmia;

Note: *specified list of conditions and procedures* is defined in the Schedule 1 - Dictionary.

- (11) being treated with a drug which is associated in the individual with:
 - (a) the development of anosmia within three weeks of commencing drug therapy, in the absence of clinical or laboratory evidence of anosmia prior to commencing drug therapy; and
 - (b) the persistence of anosmia after discontinuing drug therapy;
- (12) undergoing a course of therapeutic radiation for cancer, where the olfactory neuroepithelium, olfactory bulb, or olfactory neural pathways in the brain were in the field of radiation, within the 30 days before the clinical onset of anosmia;
- (13) receiving an intranasal application of a preparation containing zinc gluconate or zinc sulphate within the 48 hours before the clinical onset of anosmia;
- (14) taking intranasal cocaine such that there is destruction of the nasal septum, palate or paranasal sinuses before the clinical onset of anosmia;
- (15) inhaling fumes from cadmium or nickel for a cumulative period of at least 5,000 hours before the clinical onset of anosmia and where that exposure has ceased, the clinical onset of anosmia has occurred within one year of cessation;

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

- (16) inhaling fumes from acrylate or methylacrylate for a cumulative period of at least 5,000 hours before the clinical onset of anosmia and where that exposure has ceased, the clinical onset of anosmia has occurred within one year of cessation;

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

- (17) experiencing acute, symptomatic poisoning from a neurotoxic substance from the specified list of neurotoxic substances within the 30 days before the clinical onset of anosmia;

Note: *specified list of neurotoxic substances* is defined in the Schedule 1 - Dictionary.

- (18) where smoking has not ceased prior to the clinical onset of anosmia, having smoked at least 20 pack-years of tobacco products before the clinical onset of anosmia;

Note: *pack-year of tobacco products* is defined in the Schedule 1 - Dictionary.

- (19) having vitamin B12 deficiency at the time of the clinical onset of anosmia;
- (20) having envenomation by the Australian mulga snake (*Pseudoechis australis*) or the South African Berg adder (*Bitis atropos*) at the time of the clinical onset of anosmia.

10 Relationship to service

The existence in a person of any factor referred to in section 9, must be related to the relevant service rendered by the person.

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(3) 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:

anosmia—see subsection 7(2).

chronic renal failure means:

- (a) having a glomerular filtration rate of less than 15 mL/min/1.73 m² for a period of at least three months; or
- (b) a need for renal replacement therapy (dialysis or transplantation) for treatment of complications of decreased glomerular filtration rate which would otherwise increase the risk of morbidity and mortality; or
- (c) undergoing chronic dialysis.

fumes means combustion products, aerosols, vapours or dust arising through industrial processes or from workplace practices that involve the refining, manufacture or use of the stated material.

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

pack-year of tobacco products means:

- (a) 20 cigarettes per day for a period of one calendar year; or
- (b) 7,300 cigarettes in a period of one calendar year; or
- (c) 7,300 grams of smoking tobacco by weight, either in cigarettes, pipe tobacco or cigars, or a combination of same, in a period of one calendar year.

perennial allergic rhinitis means chronic or frequently recurrent rhinitis as distinct from rhinitis that is purely seasonal.

relevant service means:

- (a) eligible war service (other than operational service) under the VEA;
- (b) defence service (other than hazardous service and British nuclear test defence service) under the VEA; or
- (c) peacetime service under the MRCA.

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

specified list of autoimmune diseases means:

- (a) Behcet disease;
- (b) eosinophilic granulomatosis with polyangiitis (Churg-Strauss syndrome);
- (c) granulomatosis with polyangiitis (Wegener granulomatosis);
- (d) Sjogren syndrome;
- (e) systemic lupus erythematosus; or
- (f) systemic sclerosis.

specified list of conditions and procedures means:

- (a) a head injury;
- (b) an infection;
- (c) an injury to the cribriform plate;
- (d) a primary or secondary neoplasm; or
- (e) a surgical procedure.

specified list of neurological diseases means:

- (a) Alzheimer disease;
- (b) cerebrovascular accident;
- (c) frontotemporal dementia;
- (d) multiple sclerosis;
- (e) neurocognitive disorder with Lewy bodies;
- (f) neuromyelitis optica;
- (g) Parkinson's disease or secondary parkinsonism;
- (h) subarachnoid haemorrhage; or
- (i) temporal lobe epilepsy.

specified list of neurotoxic substances means:

- (a) ammonia;
- (b) barbituric acid;
- (c) chlorine; or
- (d) formaldehyde.

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*.