



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

**Statement of Principles**  
**concerning**  
**SHINGLES AND POSTHERPETIC**  
**NEURALGIA**  
**(Reasonable Hypothesis)**  
**(No. 27 of 2023)**

---

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

Dated 24 April 2023.

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

Professor Terence Campbell AM  
Chairperson

# Contents

1	Name .....	3
2	Commencement .....	3
3	Authority .....	3
4	Repeal .....	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.....	5
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 *shingles and postherpetic neuralgia (Reasonable Hypothesis)* (No. 27 of 2023).

## **2 Commencement**

This instrument commences on 23 May 2023.

## **3 Authority**

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

## **4 Repeal**

The Statement of Principles concerning herpes zoster No. 47 of 2015 (Federal Register of Legislation No. F2015L00253) made under subsection 196B(2) of the VEA is repealed.

## **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 shingles and postherpetic neuralgia and death from shingles and postherpetic neuralgia.

### *Meaning of shingles and postherpetic neuralgia*

- (2) For the purposes of this Statement of Principles, shingles and postherpetic neuralgia means a symptomatic reactivation of a dormant varicella-zoster virus infection, usually manifesting with neuritic pain and a vesicular eruption involving the skin or mucous membranes in a dermatomal pattern;

Note 1: Shingles is also known as herpes zoster.

Note 2: The dormant infection involves the peripheral nervous system ganglia. It can also involve the central nervous system, the eye and other organs.

- (3) While shingles and postherpetic neuralgia attracts ICD-10-AM code B02, in applying this Statement of Principles the meaning of shingles and postherpetic neuralgia 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 shingles and postherpetic neuralgia*

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

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 shingles and postherpetic neuralgia and death from shingles and postherpetic neuralgia 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 shingles and postherpetic neuralgia or death from shingles and postherpetic neuralgia with the circumstances of a person's relevant service:

- (1) having chickenpox before the clinical onset of shingles or postherpetic neuralgia;
- (2) for vaccine strain shingles only, having live attenuated varicella vaccine before the clinical onset of shingles or postherpetic neuralgia;

Note 1: Vaccine strain shingles is diagnosed by detecting the vaccine strain in the vesicular liquid.

Note 2: This factor applies to live attenuated varicella zoster vaccines.

- (3) being prevented from accessing appropriate varicella-zoster vaccination in accordance with contemporary medical standards of the time, between 1 and 5 years before the clinical onset of shingles or postherpetic neuralgia;
- (4) being in an immunocompromised state as specified at the time of the clinical onset of shingles or postherpetic neuralgia;

Note: *immunocompromised state as specified* is defined in the Schedule 1 – Dictionary.

- (5) having trauma, including surgery, involving:

- (a) the dermatome affected by shingles or postherpetic neuralgia; or
- (b) the nerve supply to the dermatome affected by shingles or postherpetic neuralgia;

within the 8 weeks before the clinical onset of shingles or postherpetic neuralgia;

Note: Examples of trauma include blunt or penetrating trauma.

- (6) having diabetes mellitus at the time of the clinical onset of shingles or postherpetic neuralgia;
- (7) having an autoimmune disease from the specified list of autoimmune diseases at the time of the clinical onset of shingles or postherpetic neuralgia;

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

- (8) having a depressive disorder at the time of the clinical onset of shingles or postherpetic neuralgia;
- (9) having a chronic medical condition from the specified list of chronic medical conditions before the clinical onset of shingles or postherpetic neuralgia;

Note: *specified list of chronic medical conditions* is defined in the Schedule 1 – Dictionary

- (10) having a moderate to severe traumatic brain injury before the clinical onset of shingles or postherpetic neuralgia;
- (11) having a splenectomy before the clinical onset of shingles or postherpetic neuralgia;
- (12) having an active symptomatic infection resulting in SARS-CoV-2 within the 6 months before the clinical onset of shingles or postherpetic neuralgia;

Note: *active symptomatic infection resulting in SARS-CoV-2* is defined in the Schedule 1 – Dictionary.

- (13) being in an immunocompromised state as specified at the time of the clinical worsening of shingles or postherpetic neuralgia;

Note: *immunocompromised state as specified* is defined in the Schedule 1 – Dictionary.

- (14) having diabetes mellitus at the time of the clinical worsening of shingles or postherpetic neuralgia;
- (15) inability to obtain appropriate clinical management for shingles and postherpetic neuralgia.

## 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(13) to 9(15) apply only to material contribution to, or aggravation of, shingles and postherpetic neuralgia where the person's shingles and postherpetic neuralgia 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:

***active symptomatic infection resulting in SARS-CoV-2*** means a symptomatic infection that is confirmed by a medical practitioner to be due to COVID-19.

***chronic renal failure*** means:

- (a) having a glomerular filtration rate of less than 15 mL/min/1.73 m<sup>2</sup> for a period of at least 3 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.

***immunocompromised state as specified*** means a condition of substantially lowered immune function, such as would occur in the following conditions or circumstances:

- (a) having infection with human immunodeficiency virus;
- (b) taking an immunosuppressive drug which causes substantial suppression of immune responses;
- (c) having a haematological or solid organ malignancy;
- (d) having chronic renal failure; or
- (e) undergoing solid organ, stem cell or bone marrow transplantation.

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

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

***persistent asthma of moderate severity*** means asthma having any of the following specified characteristics, alone or in combination, for a cumulative period of at least six months within a continuous one year period:

- (a) FEV1 (forced expiratory volume in one second) between 60% and 80% of the expected value;
- (b) wheeze, tightness, cough, dyspnoea or other symptoms occurring at least daily;
- (c) frequent flare-ups; or
- (d) the presence of night-time symptoms at least one night per week.

***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.

***shingles and postherpetic neuralgia***—see subsection 7(2).

***specified list of autoimmune diseases*** means:

- (a) coeliac disease;
- (b) dermatomyositis;
- (c) inflammatory bowel disease;
- (d) polymyositis;
- (e) psoriasis;
- (f) rheumatoid arthritis; or
- (g) systemic lupus erythematosus.

***specified list of chronic medical conditions*** means:

- (a) persistent asthma of moderate severity;
- (b) chronic obstructive pulmonary disease;
- (c) heart failure;
- (d) chronic angina; or
- (e) cerebrovascular accident.

Note: *persistent asthma of moderate severity* is 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*.