

Statement of Principles  
concerning

**MALIGNANT NEOPLASM OF THE  
BLADDER**

**No. 95 of 2007**

for the purposes of the

*Veterans' Entitlements Act 1986*  
and

*Military Rehabilitation and Compensation Act 2004*

**Title**

1. This Instrument may be cited as Statement of Principles concerning malignant neoplasm of the bladder No. 95 of 2007.

**Determination**

2. The Repatriation Medical Authority under subsection **196B(2)** and **(8)** of the *Veterans' Entitlements Act 1986* (the VEA):
  - (a) revokes Instrument No. 23 of 2000 concerning malignant neoplasm of the bladder; and
  - (b) determines in its place this Statement of Principles.

**Kind of injury, disease or death**

3.
  - (a) This Statement of Principles is about **malignant neoplasm of the bladder** and **death from malignant neoplasm of the bladder**.
  - (b) For the purposes of this Statement of Principles, "**malignant neoplasm of the bladder**" means a primary malignant neoplasm arising from the cells lining the bladder. This definition excludes soft tissue sarcoma, carcinoid tumour, non-Hodgkin's lymphoma and Hodgkin's lymphoma.

- (c) Malignant neoplasm of the bladder attracts ICD-10-AM code C67.
- (d) In the application of this Statement of Principles, the definition of "**malignant neoplasm of the bladder**" is that given at paragraph 3(b) above.

#### **Basis for determining the factors**

- 4. The Repatriation Medical Authority is of the view that there is sound medical-scientific evidence that indicates that **malignant neoplasm of the bladder** and **death from malignant neoplasm of the bladder** 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 *Military Rehabilitation and Compensation Act 2004* (the MRCA).

#### **Factors that must be related to service**

- 5. Subject to clause 7, at least one of the factors set out in clause 6 must be related to the relevant service rendered by the person.

#### **Factors**

- 6. The factor that must as a minimum exist before it can be said that a reasonable hypothesis has been raised connecting **malignant neoplasm of the bladder** or **death from malignant neoplasm of the bladder** with the circumstances of a person's relevant service is:
  - (a) having an infection of the bladder with *Schistosoma haematobium* before the clinical onset of malignant neoplasm of the bladder; or
  - (b) undergoing a course of therapeutic radiation to the region of the pelvis, where the first exposure to therapeutic radiation occurred at least five years before the clinical onset of malignant neoplasm of the bladder; or
  - (c) having received a cumulative equivalent dose of at least 0.05 Sievert of atomic radiation to the bladder where this dose was accumulated at least five years before the clinical onset of malignant neoplasm of the bladder; or
  - (d) inhaling, ingesting or having cutaneous contact with an aromatic amine, for a cumulative period of at least 250 days before the clinical onset of malignant neoplasm of the bladder; or

- (e) being treated with systemic cyclophosphamide or systemic ifosfamide, at least five years before the clinical onset of malignant neoplasm of the bladder; or
- (f) consuming a total of at least 100 grams of phenacetin in phenacetin-containing analgesics at least 5 years before the clinical onset of malignant neoplasm of the bladder; or
- (g) consuming a total of at least 100 grams of *Aristolochia fangchi* as a contaminant of herbal weight loss medication at least 5 years before the clinical onset of malignant neoplasm of the bladder; or
- (h) smoking at least 2.5 pack years of cigarettes or the equivalent thereof in other tobacco products, before the clinical onset of malignant neoplasm of the bladder; or
- (i) inhaling air containing polycyclic aromatic hydrocarbons at a concentration of at least 0.2 mg/m<sup>3</sup> for a cumulative period of at least 5000 hours before the clinical onset of malignant neoplasm of the bladder; or
- (j) being exposed to fumes containing high concentrations of polycyclic aromatic hydrocarbons for a cumulative period of at least 5000 hours before the clinical onset of malignant neoplasm of the bladder; or
- (k) being exposed to arsenic as specified before the clinical onset of malignant neoplasm of the bladder; or
- (l) having a kidney or bladder stone before the clinical onset of malignant neoplasm of the bladder; or
- (m) having an indwelling bladder catheter for a continuous period of at least ten years, excepting routine catheter changes, before the clinical onset of malignant neoplasm of the bladder; or
- (n) inhaling or having cutaneous contact with tetrachloroethylene or dry cleaning solvents, for a cumulative period of at least 5000 hours before the clinical onset of malignant neoplasm of the bladder; or
- (o) having a renal transplant at least one year before the clinical onset of malignant neoplasm of the bladder; or

- (p) undergoing dialysis for a chronic renal condition for at least the one year before the clinical onset of malignant neoplasm of the bladder; or
- (q) having diabetes mellitus for at least five years before the clinical onset of malignant neoplasm of the bladder; or
- (r) inability to obtain appropriate clinical management for malignant neoplasm of the bladder.

### **Factors that apply only to material contribution or aggravation**

- 7. Paragraph 6(r) applies only to material contribution to, or aggravation of, malignant neoplasm of the bladder where the person's malignant neoplasm of the bladder was suffered or contracted before or during (but not arising out of) the person's relevant service.

### **Inclusion of Statements of Principles**

- 8. In this Statement of Principles if a relevant factor applies and that factor includes an injury or disease in respect of which there is a Statement of Principles then the factors in that last mentioned Statement of Principles apply in accordance with the terms of that Statement of Principles as in force from time to time.

### **Other definitions**

- 9. For the purposes of this Statement of Principles:

**"a course of therapeutic radiation"** means one or more fractions (treatment portions) of ionising radiation administered with the aim of achieving palliation or cure with gamma rays, x-rays, alpha particles or beta particles;

**"an aromatic amine"** means an organic compound that contains one or more amino groups joined to an aromatic structure;

**"an enclosed space"** means a substantially enclosed area, for example the interior of a building, ship or aircraft, a covered workshop, or factory;

**"atomic radiation"** means ionising radiation excluding:

- (a) natural background radiation;
- (b) therapeutic radiation; and
- (c) radiation from diagnostic procedures;

**"being exposed to arsenic as specified"** means:

- (a) consuming drinking water with arsenic content higher than 0.05 ppm (50 µg/l) for a cumulative period of at least ten years; or
- (b) having clinical evidence of excessive chronic arsenic exposure;

**"being exposed to fumes containing high concentrations of polycyclic aromatic hydrocarbons"** means:

- (i) working with creosote;
- (ii) working with coal-tar pitch, coal-tar or asphalt;
- (iii) working in the coal gasification, coke production, carbon electrode manufacture or the coal-tar distillation industry;
- (iv) being exposed to coke oven emissions; or
- (v) inhaling diesel engine exhaust or combustion products in an enclosed space;

**"cumulative equivalent dose"** means the total equivalent dose of radiation from all types of ionising radiation. It accounts for the differences in biological effectiveness of various types of radiation and allows doses from different radiations to be combined. Each component is calculated by multiplying the absorbed dose in a particular tissue or organ for a given type of radiation by the radiation weighting factor for that radiation. The unit of equivalent dose is the Sievert;

**"death from malignant neoplasm of the bladder"** 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 bladder;

**"ICD-10-AM code"** means a number assigned to a particular kind of injury or disease in The International Statistical Classification of Diseases and Related Health Problems, 10th revision, Australian Modification (ICD-10-AM), Fifth Edition, effective date of 1 July 2006, copyrighted by the National Centre for Classification in Health, Sydney, NSW, and having ISBN 1 86487 772 3;

**"pack year of cigarettes or the equivalent thereof in other tobacco products"** means a calculation of consumption where one pack year of cigarettes equals twenty tailor made cigarettes per day for a period of one calendar year, or 7300 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 7300 cigarettes, or 7.3 kg of smoking tobacco by weight. Tobacco products means either cigarettes, pipe tobacco or cigars smoked, alone or in any combination;

**"polycyclic aromatic hydrocarbons"** means hydrocarbons with three or more condensed aromatic rings in which certain carbon atoms are common to two or three rings. A common example is benzo[a]pyrene. Polycyclic aromatic hydrocarbons occur in crude oil, shale oil, and coal tars, and can be formed during the combustion of organic material or during high temperature processing of crude oil, coal, coke, or other industrial carbon compounds;

**"relevant service"** means:

- (a) operational service under the VEA;
- (b) peacekeeping service under the VEA;
- (c) hazardous service under the VEA;
- (d) warlike service under the MRCA; or
- (e) non-warlike service under the MRCA;

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

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

### **Application**

- 10.** This Instrument applies to all matters to which section 120A of the VEA or section 338 of the MRCA applies.

### **Date of effect**

- 11.** This Instrument takes effect from 19 September 2007.

Dated this *fifth* day of *September* 2007

The Common Seal of the )  
Repatriation Medical Authority )  
was affixed to this instrument )  
in the presence of: )

KEN DONALD  
CHAIRPERSON