

REVOKED

Statement of Principles  
concerning  
**MALIGNANT NEOPLASM OF THE LUNG**

ICD CODE: 162

Veterans' Entitlements Act 1986  
subsection 196B(2)

1. Being of the view that there is sound medical-scientific evidence that indicates that **malignant neoplasm of the lung and death from malignant neoplasm of the lung** can be related to operational service rendered by veterans, peacekeeping service rendered by members of Peacekeeping forces and hazardous service rendered by members of the Forces, the Repatriation Medical Authority determines, under subsection 196B(2) of the *Veterans' Entitlements Act 1986*, that the factors that must as a minimum exist before it can be said that a reasonable hypothesis has been raised connecting **malignant neoplasm of the lung or death from malignant neoplasm of the lung** with the circumstances of that service, are:
  - (a) in relation to any of the following kinds of malignant neoplasia of the lung:
    - (i) squamous cell carcinoma of the lung; or
    - (ii) oat cell carcinoma of the lung; or
    - (iii) small cell carcinoma of the lung; or
    - (iv) malignant neoplasm of undetermined histology; or
    - (v) large cell carcinoma of the lung,

smoking at least one half of a pack-year prior to the clinical onset of the disease; or

- (b) in relation to adenocarcinoma of the lung, smoking at least three pack years prior to the clinical onset of the disease; or
- (c) in relation to a malignant neoplasm of the lung other than typical carcinoid tumour of the lung, smoking 50 grams of pipe tobacco per week for at least three years, at a time or times prior to the clinical onset of the disease; or
- (d) in relation to a malignant neoplasm of the lung other than typical carcinoid tumour of the lung, smoking at least four cigars per week for at least three years, at a time or times prior to the clinical onset of the disease; or
- (e) in relation to a malignant neoplasm of the lung other than typical carcinoid tumour of the lung, immersion in an atmosphere with a visible tobacco smoke haze in an enclosed space for at least 20 hours per week for at least five years, at a time or times prior to the clinical onset of the disease; or
- (f) exposure to respirable asbestos fibres in an enclosed area at a time when such fibres were being applied, removed, dislodged, cut or drilled, prior to the clinical onset of malignant neoplasm of the lung; or
- (g) working in an industrial setting directly attending to, or working within 100 metres of, a coke oven for at least 180 days, at a time or times prior to the clinical onset of malignant neoplasm of the lung; or
- (h) spraying or decanting insecticides or herbicides as an occupational requirement for at least 60 days, at a time or times prior to the clinical onset of malignant neoplasm of the lung; or
- (j) exposure to mustard gas, resulting in blisters, corneal ulcers, haemoptysis or the need for hospitalisation, prior to the clinical onset of malignant neoplasm of the lung; or
- (k) care of birds as an occupational requirement for at least one year prior to the clinical onset of malignant neoplasm of the lung; or
- (m) having been within four kilometres of the epicentre of the atomic bomb explosions on Hiroshima or Nagasaki within seven days of the explosion on that city; or

- (n) receipt of a course of therapeutic radiation at least three years prior to the person seeking treatment for malignant neoplasm of the lung; or
  - (o) suffering from asthma, chronic bronchitis, emphysema, pneumonia or pulmonary tuberculosis prior to the clinical onset of malignant neoplasm of the lung; or
  - (p) inability to obtain appropriate clinical management for the malignant neoplasm of the lung.
2. Subject to clause 3 (below) at least one of the factors set out in paragraphs 1(a) to 1(p) must be related to any service rendered by a person.
  3. The factor set out in paragraph 1(p) applies only where:
    - (a) the person’s malignant neoplasm of the lung was contracted prior to a period, or part of a period, of service to which the factor is related; and
    - (b) the relationship suggested between the malignant neoplasm of the lung and the particular service of a person is a relationship set out in paragraph 8(1)(e), 9(1)(e), 70(5)(d), or 70(5A)(d) of the Act.
  4. For the purposes of this Statement of Principles:

**“adenocarcinoma of the lung”** means a malignant neoplasm arising from the cells of the lung, in which the dominant histological pattern is one in which cells demonstrate aciner or papillary differentiation, with at least some cells producing mucus, and which attracts an ICD morphology code of M8140/2, M8140/3, or M8140/6;

**“asthma”** means a condition in which there are paroxysmal attacks of bronchospasm resulting in difficulty breathing, and which attracts an ICD code of 493;

**“chronic bronchitis”** means a condition in which there is a cough productive of sputum during at least 90 days of the year for at least two years, and which attracts an ICD code of 491;

**“emphysema”** means a condition characterised by abnormal enlargement of air spaces accompanied by destruction of air space walls, and attracts an ICD code of 492;

**“ICD code”** means a number assigned to a particular kind of injury or disease in the *International Classification of Diseases* 9th Revision, US Department of Health and Human Services, Pub. No 80-1260;

**“ICD morphology code”** means a number assigned to the morphology of a particular neoplasm in Appendix A of the *International Classification of Diseases* 9th Revision, US Department of Health and Human Services, Pub. No 80-1260;

**“large cell carcinoma of the lung”** means a malignant neoplasm arising from the cells of the lung, in which the major histological pattern is of large cells, which may be arranged in sheets, not displaying features of any other histological type of cancer, and which attracts an ICD morphology code of M8012/3;

**“malignant neoplasm of the lung”** means a malignant neoplasm of the bronchus, trachea or lung tissue (but not the pleura), and which attracts an ICD code of 162;

**“mustard gas”** means dichlorodiethylsulphide, and is also known as sulphur mustard and yellow cross liquid;

**“oat cell carcinoma of the lung”** means a malignant neoplasm arising from the cells of the lung, in which the major histological pattern is of small cells displaying features such as ribbon or stream growth patterns and the formation of rosettes and pseudo rosettes, and which attracts an ICD morphology code of M8042/3;

**“pack-year”** means 7300 cigarettes;

**“pulmonary tuberculosis”** means an infection of the lung with the bacterium *Mycobacterium tuberculosis*, which attracts an ICD code of 11, 12.2 or 18;

**“respirable asbestos fibre”** means asbestos fibres, mainly less than 3 micrometres in diameter and greater than 8 micrometres in length;

**“small cell carcinoma of the lung”** means a malignant neoplasm arising from the cells of the lung, in which the major histological pattern is of sheets of darkly staining cells with a high nuclear to cytoplasmic ratio, which attracts an ICD morphology code of M8041/3, but not being an oat cell carcinoma of the lung;

**“squamous cell carcinoma of the lung”** means a malignant neoplasm arising from the cells of the lung, in which the major histological pattern is of epithelial pearl formation, individual cell keratinization or intercellular bridging, and which attracts an ICD morphology code of

