REVOKE

Statement of Principles

concerning

MALIGNANT NEOPLASM OF THE OESOPHAGUS

ICD CODES: 150, 151.0

Veterans’ Entitlements Act 1986
subsection 196B(3)

1. Being of the view that on the sound medical-scientific evidence available to the Repatriation Medical Authority, it is more probable than not that malignant neoplasm of the oesophagus and death from malignant neoplasm of the oesophagus can be related to eligible war service (other than operational service) rendered by veterans and defence service (other than hazardous service) rendered by members of the Forces, the Repatriation Medical Authority determines, under subsection 196B(3) of the Veterans’ Entitlements Act 1986 (the Act), that the factors that must exist before it can be said that, on the balance of probabilities, malignant neoplasm of the oesophagus or death from malignant neoplasm of the oesophagus is connected with the circumstances of that service, are:

(a) for squamous cell carcinoma of the oesophagus only:

(i) smoking ten or more cigarettes per day or the equivalent thereof in other tobacco products, for at least ten years, before the clinical onset of malignant neoplasm of the oesophagus; or
(ii) drinking at least 500 kilograms of alcohol before the clinical onset of malignant neoplasm of the oesophagus; or

(iii) ingestion of lye where ingestion occurred at least five years before the clinical onset of malignant neoplasm of the oesophagus; or

(b) for adenocarcinoma of the oesophagus only, suffering from Barrett's oesophagus for ten years immediately before the clinical onset of malignant neoplasm of the oesophagus; or

(c) inability to obtain appropriate clinical management for the malignant neoplasm of the oesophagus.

2. Subject to clause 3 (below) at least one of the factors set out in paragraphs 1(a) to 1(c) must be related to any service rendered by a person.

3. The factor set out in paragraph 1(c) applies only where:

(a) the person's malignant neoplasm of the oesophagus was contracted before 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 oesophagus and the particular service of a person is a relationship set out in paragraph 8(1)(e), 9(1)(e) or 70(5)(d) of the Act.

4. For the purposes of this Statement of Principles:

“adenocarcinoma of the oesophagus” means a primary carcinoma derived from oesophageal glandular tissue, attracting ICD code 151.0;

“Barrett's oesophagus” means that the normal squamous epithelium lining the oesophagus becomes replaced by metaplastic columnar epithelium. It may occur as a complication of chronic gastro-oesophageal reflux disease;

“ICD code” means a number assigned to a particular kind of injury or disease in the Australian Version of The International Classification of Diseases, 9th revision, Clinical Modification (ICD-9-CM), effective date of 1 July 1995, copyrighted by the National Coding Centre, Faculty of Health Sciences, University of Sydney, NSW, and having ISBN 0 642 22235 5;
“ingestion of lye” means swallowing any amount of lye. Lye means any alkaline solution resulting from vegetable ashes by leaching. Household lye is usually a crude mixture of sodium hydroxide with some sodium carbonate. Lye was commonly used for washing purposes and as a liquid drain cleaner;

“malignant neoplasm of the oesophagus” means a primary malignancy of the mucosa of the structure which begins proximally with the lower border of the hypopharynx and extends distally to the distal border of the lower oesophageal sphincter, attracting ICD code 150 or 151.0;

“squamous cell carcinoma of the oesophagus” means a primary malignant neoplasm arising from the squamous cells of the oesophagus, attracting ICD code 150.

Dated this Twenty-third day of November 1995

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

KEN DONALD CHAIRMAN