

## Statement of Principles

concerning

# **MALIGNANT NEOPLASM OF THE LARYNX**

**ICD CODE:161**

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 larynx and death from malignant neoplasm of the larynx** 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*, that the factors that must exist before it can be said that, on the balance of probabilities, **malignant neoplasm of the larynx or death from malignant neoplasm of the larynx** is connected with the circumstances of that service, are:
  - (a) smoking five pack years of tobacco products, where such smoking had not ceased more than 20 years before the clinical onset of malignant neoplasm of the larynx; or
  - (b) being exposed to an atmosphere with a visible tobacco smoke haze in an enclosed space for at least 20 hours per week for at least 12 years, at a time or times prior to the clinical onset of malignant neoplasm of the larynx; or
  - (c) being exposed to mustard gas, resulting in blisters, corneal ulcers, haemoptysis, or the need for hospitalisation, before the clinical onset of malignant neoplasm of the larynx; or

- (d) being exposed to respirable asbestos fibres in an enclosed area at a time when such fibres were being applied, removed, dislodged, cut, or drilled, before the clinical onset of malignant neoplasm of the larynx; or
  - (e) drinking at least 500 kilograms of absolute alcohol (contained within alcoholic drinks) before the clinical onset of malignant neoplasm of the larynx; or
  - (f) spraying or decanting insecticides or herbicides as an occupational requirement for at least ten years, at a time or times before the clinical onset of malignant neoplasm of the larynx; or
  - (g) inability to obtain appropriate clinical management for malignant neoplasm of the larynx.
2. Subject to clause 3 (below) at least one of the factors set out in paragraphs **1(a) to (g)** must be related to any service rendered by a person.
3. The factor set out in paragraph **1(g)** applies only where:
- (a) the person's **malignant neoplasm of the larynx** were suffered 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 larynx** 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:

**“absolute alcohol”** consumption calculations utilize the Australian Standard of 10 gm absolute alcohol per standard alcoholic drink;

**“ICD code”** means a number assigned to a particular kind of injury or disease in the tenth edition of the *International Classification of Diseases 9th Revision*, effective date of 1 October 1993, copyrighted by the US Commission on Professional and Hospital Activities, and having the Library of Congress number 77-94472;

**“malignant neoplasm of the larynx”** means a malignant proliferation of the cells of the larynx, attracting an ICD code of 161;

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

**“pack-year”** means 7300 cigarettes, or 1460 cigars or, 7.3 kg of pipe tobacco;

