

REVOKED

Revocation and Determination

of

Statement of Principles

concerning

CEREBROVASCULAR ACCIDENT

ICD CODES: 431, 433.01, 433.11, 433.21, 433.31, 433.81, 433.91, 434.01, 434.11, 434.91, 435, 436, 437.1, 674.0

Veterans' Entitlements Act 1986

1. The Repatriation Medical Authority under subsection **196B(2)** of the *Veterans' Entitlements Act 1986* (the Act):
 - (a) revokes Instrument No.326 of 1995 and Instrument No.388 of 1995; and
 - (b) determines the following Statement of Principles.

Kind of injury, disease or death

2. (a) This Statement of Principles is about **cerebrovascular accident** and **death from cerebrovascular accident**.
 - (b) For the purposes of this Statement of Principles, "**cerebrovascular accident**" means cerebral ischaemia or intracerebral haemorrhage, attracting ICD code 431, 433.01, 433.11, 433.21, 433.31, 433.81, 433.91, 434.01, 434.11, 434.91, 435, 436, 437.1 or 674.0.

Basis for determining the factors

3. The Repatriation Medical Authority is of the view that there is sound medical-scientific evidence that indicates that **cerebrovascular accident** can be related to relevant service rendered by veterans, members of Peacekeeping Forces, or members of the Forces.

Factors that must be related to service

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

Factors

5. The factors that must as a minimum exist before it can be said that a reasonable hypothesis has been raised connecting **cerebrovascular accident** or **death from cerebrovascular accident** with the circumstances of a person's relevant service are:
 - (a) suffering from hypertension before the clinical onset of cerebrovascular accident; or
 - (b) suffering from an acute stress, causing a temporary aggravation of established hypertension, and within 14 days, experiencing the clinical onset of cerebrovascular accident; or
 - (c) an inability to undertake vigorous or moderate physical activity for a continuous period of at least five years immediately before the clinical onset of cerebrovascular accident; or
 - (d) regularly consuming alcohol of at least 250g/week for a continuous period of at least one year immediately before the clinical onset of cerebrovascular accident; or
 - (e) suffering from bacterial meningitis immediately before the clinical onset of cerebrovascular accident; or
 - (f) suffering from inflammatory vascular disease affecting the cerebral vessels immediately before the clinical onset of cerebrovascular accident; or
 - (g) being pregnant, undergoing childbirth, or being within the puerperal period at the time of the clinical onset of cerebrovascular accident; or
 - (h) using cocaine within the 72 hours immediately before the clinical onset of cerebrovascular accident; or
 - (j) for cerebral ischaemia only, smoking at least five cigarettes per day or the equivalent thereof, in other tobacco products, for at least five years before the clinical onset of cerebrovascular accident and where smoking has ceased, the clinical onset has occurred within 15 years of cessation; or

- (k) for cerebral ischaemia only, suffering from diabetes mellitus at the time of the clinical onset of cerebrovascular accident; or
- (m) for cerebral ischaemia only, the presence of a serum total cholesterol level equal to or greater than 8 mmol/L before the clinical onset of cerebrovascular accident; or
- (n) for cerebral ischaemia only, undergoing a course of combined oestrogen/progestogen oral contraception for a period of at least three weeks immediately before the clinical onset of cerebrovascular accident; or
- (o) for cerebral ischaemia only, the presence of a potential cardiac source of cerebral emboli immediately before the clinical onset of cerebrovascular accident; or
- (p) for cerebral ischaemia only, using heroin within 72 hours immediately before the clinical onset of cerebrovascular accident; or
- (q) for cerebral ischaemia only, the presence of carotid arterial disease immediately before the clinical onset of cerebrovascular accident; or
- (r) for cerebral ischaemia only, the presence of at least one of the conditions from the specified list of conditions leading to cerebral vasospasm immediately before the clinical onset of cerebrovascular accident; or
- (s) for cerebral ischaemia only, suffering from at least one of the haematological disorders from the specified list of haematological disorders immediately before the clinical onset of cerebrovascular accident; or
- (t) for vertebrobasilar ischaemia only, suffering trauma to the neck or the base of the skull within the 12 months immediately before the clinical onset of cerebrovascular accident; or
- (u) for vertebrobasilar ischaemia only, suffering from cervical spondylosis where the osteophytes are impinging on the vertebral artery at the time of the clinical onset of cerebrovascular accident; or

- (v) for intracerebral haemorrhage only, undergoing anticoagulant therapy at the time of the clinical onset of cerebrovascular accident; or
- (w) for intracerebral haemorrhage only, undergoing thrombolytic therapy at the time of the clinical onset of cerebrovascular accident; or
- (x) for intracerebral haemorrhage only, the presence of at least one of the conditions from the specified list of conditions leading to haemostatic failure immediately before the clinical onset of cerebrovascular accident; or
- (y) for intracerebral haemorrhage only, bleeding of an intracerebral space occupying lesion of the brain immediately before the clinical onset of cerebrovascular accident; or
- (z) inability to obtain appropriate clinical management for cerebrovascular accident.

Factors that apply only to material contribution or aggravation

6. Paragraph 5(z) applies only to material contribution to, or aggravation of, cerebrovascular accident where the person's cerebrovascular accident was suffered or contracted before or during (but not arising out of) the person's relevant service; paragraph 8(1)(e), 9(1)(e), 70(5)(d) or 70(5A)(d) of the Act refers.

Other definitions

7. For the purposes of this Statement of Principles:

“anticoagulant therapy” means therapeutic administration of any substance that prevents blood clotting, including a substance administered for prophylaxis or treatment of thromboembolic disorders, including heparin, warfarin, Dicumarol and congeners;

“bacterial meningitis” means inflammation of the meninges caused by bacteria, common types of which are *Haemophilus influenzae m.*, *meningococcal m.*, *pneumococcal m.*, and *tuberculous m.*, attracting ICD code 003.21, 013.0, 036.0, 090.42, 091.81, 094.2, 098.92 or 320;

“carotid arterial disease” means the occlusion or stenosis of the carotid artery due to atherosclerosis, dissection, thrombosis or any pathological process localised to that artery, attracting ICD code 433.10;

“cerebral ischaemia” means a reduction or interruption of blood supply to an area of the brain causing a transient ischaemic attack (TIA),

vertebrovascular ischaemia, cerebral infarction, or focal brain necrosis, attracting ICD code 433.01, 433.11, 433.21, 433.31, 433.81, 433.91, 434.01, 434.11, 434.91, 435, 436, 437.1, or 674.0;

“cerebrovascular accident” means cerebral ischaemia or intracerebral haemorrhage;

“cervical spondylosis” means a clinical syndrome characterised by local pain and stiffness, or pain and paraesthesia radiating into the arms, associated with degenerative changes in the cervical vertebrae, attracting ICD code 721.0, 721.1, 722.4, 722.71 or 722.91;

“diabetes mellitus” means an endocrine disease characterised by:

- (a) a fasting venous plasma glucose concentration of equal to or greater than 7.8 millimoles per litre on at least two separate occasions; or
- (b) a venous plasma glucose concentration equal to or greater than 11.1 millimoles per litre both within two hours and at two hours after ingestion of 75 grams of glucose;

attracting ICD code 250;

“DSM-IV” means the fourth edition of the American Psychiatric Association’s *Diagnostic and Statistical Manual of Mental Disorders*;

“hypertension” means:

- (a) a usual blood pressure reading where the systolic reading is greater than or equal to 140mmHg and/or where the diastolic reading is greater than or equal to 90mmHg; or
- (b) where treatment for hypertension is being administered,

attracting an ICD code in the range 401 to 405 or 437.2 or 642;

“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;

“inflammatory vascular disease” means one of several acute, subacute or chronic inflammatory disorders of the arterial or venous wall:

- (a) giant-cell arteritis, attracting ICD code 446.5; or
- (b) Takayasu's disease, attracting ICD code 446.7; or
- (c) systemic lupus erythematosus, attracting ICD code 710.0; or
- (d) Wegener's granulomatosis, attracting ICD code 446.4; or
- (e) allergic granulomatous angiitis, attracting ICD code 446.4; or
- (f) serum sickness, attracting ICD code 999.5; or
- (g) Sjogren's syndrome, attracting ICD code 710.2; or
- (h) Behcet's disease, attracting ICD code 136.1; or
- (j) polyarteritis nodosa, attracting ICD code 446.0;

“intracerebral haemorrhage” means bleeding within the cerebrum, attracting ICD code 431;

“intracerebral space occupying lesion” means any pathological entity occupying a delimited area within the brain, including:

- (a) primary or secondary malignant neoplasms of the brain; or
- (b) intracerebral abscess; or
- (c) tuberculoma of the brain; or
- (d) cerebral cysts; or
- (e) idiopathic space occupying lesion,

and attracting ICD code 013.2, 013.3, 191, 192.1, 198.3, 225.0, 237.5, 239.6, 324.0, or 348.0;

“potential cardiac source of cerebral emboli” means one of the following:

- (a) Paradoxical embolism from the venous system:
atrial septal defect, attracting ICD code 745.5; or
ventricular septal defect, attracting ICD code 745.4; or
patent foramen ovale, attracting ICD code 745.5; or
pulmonary arteriovenous fistula, attracting ICD code 417.0;
- (b) Left atrium:
atrial fibrillation, attracting ICD code 427.31; or
sinoatrial disease, attracting ICD code 426.6; or
myxoma, attracting ICD code 212.7; or
interatrial septal aneurysm, attracting ICD code 414.10;
- (c) Mitral valve:
rheumatic stenosis or regurgitation, attracting ICD code 394.0, 394.1, 394.2 or 396; or
infective endocarditis, attracting ICD code 036.42, 074.22, 098, 115.04, 115.14, 115.94, 112.81, 421.0, 421.1 or 093.21; or

non-bacterial thrombotic (marantic) endocarditis, attracting ICD code 391.1, 392.0, 397, 421.9 or 424; or
prosthetic valve, attracting ICD code 996.61; or
mitral annulus calcification, attracting ICD code 394.9; or
Libman-Sacks endocarditis, attracting ICD code 424.91; or
papillary fibroelastoma, attracting ICD code 425.3;

- (d) Left ventricular mural thrombus:
acute myocardial infarction, attracting ICD code 410; or
left ventricular aneurysm, attracting ICD code 414.10; or
dilating cardiomyopathy, attracting ICD code 425.4; or
atrial myxoma, attracting ICD code 212.7; or
blunt chest injury, attracting ICD code 860, 861 or 862;
- (e) Aortic valve:
rheumatic stenosis or regurgitation, attracting ICD code 395.0, 395.1, 395.2 or 396; or
infective endocarditis, attracting ICD code 036.42, 074.22, 098, 115.04, 115.14, 115.94, 112.81, 421.0, 421.1 or 093.21; or
non-bacterial thrombotic (marantic) endocarditis, attracting ICD code 391.1, 392.0, 397, 421.9 or 424; or
prosthetic valve, attracting ICD code 996.61; or
calcification and/or sclerosis, attracting ICD code 395.9; or
syphilis, attracting ICD code 093.22;
- (f) Cardiac surgery, instrumentation of coronary arteries and aorta;

“puerperal period” means the period of 42 days following end of the third stage of labour;

“relevant service” means:

- (a) operational service; or
- (b) peacekeeping service; or
- (c) hazardous service;

“specified list of conditions leading to cerebral vasospasm” means the following:

- (a) subarachnoid haemorrhage, attracting ICD code 430; or
- (b) migraine, attracting ICD code 346; or
- (c) eclampsia of pregnancy, attracting ICD code 642.6;

“specified list of conditions leading to haemostatic failure” means the following which is a list of conditions of the body in which impairment

of normal blood clotting mechanisms due to a defect in the platelet or plasma coagulation system predisposes to cerebral haemorrhage:

- (a) haemophilia and other coagulation disorders, attracting ICD code 286;
or
- (b) thrombocytopenia, attracting ICD code 287.3, 287.4 or 287.5; or
- (c) thrombotic thrombocytopenic purpura, attracting ICD code 446.6; or
- (d) polycythaemia rubra vera, attracting ICD code 238.4; or
- (e) essential thrombocythaemia, attracting ICD code 238.7; or
- (f) paraproteinaemias, attracting ICD code 273.1 or 273.2; or
- (g) disseminated intravascular coagulation, attracting ICD code 286.6; or
- (h) qualitative platelet defects, attracting ICD code 287.1; or
- (j) snake bite, attracting ICD code 989.5; or
- (k) other haemorrhagic conditions, attracting ICD code 287.8 or 287.9;
or
- (m) aplastic anaemia, attracting ICD code 284; or
- (n) multiple myeloma, attracting ICD code 203.0; or
- (o) dysproteinaemia, attracting ICD code 273.8; or
- (p) macroglobulinaemia, attracting ICD code 273.3;

“specified list of haematological disorders” means the following:

- (a) polycythaemia, attracting ICD code 238.4, 289.0 or 289.6; or
- (b) essential thrombocythaemia, attracting ICD code 238.7; or
- (c) sickle cell disease, attracting ICD code, 282.6; or
- (d) sickle cell trait, attracting ICD code 282.5; or
- (e) multiple myeloma, attracting ICD code 203.0; or
- (f) macroglobulinaemia, attracting ICD code 273.3; or
- (g) essential thrombocytosis, attracting ICD code 289.9; or
- (h) hyperviscosity syndrome, attracting ICD code 273.3; or
- (j) chronic myeloid leukaemia, attracting ICD code 205.1; or
- (k) myeloproliferative disease, attracting ICD code 238.7;

“suffering from an acute stress” means the following (derived from DSM-IV):

- (a) the person experienced, witnessed, or was confronted with an event that involved actual or threatened death or serious injury, or a threat to the person’s, or other people’s, physical integrity; and
- (b) the person’s response to that event involved intense fear, helplessness or horror;

“thrombolytic therapy” means therapeutic administration of exogenous plasminogen activating agents that dissolve the fibrous network of a blood clot, including streptokinase, urokinase and tissue plasminogen activator;

“trauma to the neck or the base of the skull” means a penetrating injury or a non-penetrating injury, involving extension or rotation of the neck, and includes any injury resulting in fracture or dislocation of the cervical spine;

“vertebrobasilar ischaemia” means infarction or ischaemia due to narrowing or occlusion of the vertebral or basilar arteries, attracting ICD code 433.01, 433.21 or 435;

“vigorous or moderate physical activity” means physical activity greater than 3 METs, where a “MET” is a unit of measurement of the level of physical exertion, or no greater than 2.5 k/cal per minute. 1 MET = 3.5 ml of oxygen/kg of body weight per minute or, 1.0 kcal/kg of body weight per hour, or resting metabolic rate. (A MET approximates to the energy required to rest quietly in bed. A 70 kg man would use about 3 METS when walking at 4 km per hour.)

Application

8. This Instrument applies to all matters to which section 120A of the Act applies.

Dated this *Eighteenth* day of *April* 1996

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

KEN DONALD
CHAIRMAN