

Determination

of

Statement of Principles
concerning

POLYARTERITIS NODOSA

ICD CODE: 446.0

Veterans' Entitlements Act 1986

1. This Statement of Principles is determined by the Repatriation Medical Authority under subsection **196B(3)** of the *Veterans' Entitlements Act 1986* (the Act).

Kind of injury, disease or death

2. (a) This Statement of Principles is about **polyarteritis nodosa** and **death from polyarteritis nodosa**.

(b) For the purposes of this Statement of Principles, “**polyarteritis nodosa**” means a systemic necrotising vasculitis which includes classic polyarteritis nodosa, microscopic polyangiitis, Churg-Strauss syndrome and polyangiitis overlap syndrome, attracting ICD code 446.0.

Basis for determining the factors

3. On the sound medical-scientific evidence available, the Repatriation Medical Authority is of the view that it is more probable than not that **polyarteritis nodosa and death from polyarteritis nodosa** can be related to relevant service rendered by veterans 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 exist before it can be said that, on the balance of probabilities, **polyarteritis nodosa** or **death from polyarteritis nodosa** is connected with the circumstances of a person's relevant service are:
 - (a) for classic polyarteritis nodosa and microscopic polyangiitis only, evidence of infection with hepatitis B before the clinical onset of polyarteritis nodosa; or
 - (b) inability to obtain appropriate clinical management for polyarteritis nodosa.

Factors that apply only to material contribution or aggravation

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

Other definitions

7. For the purposes of this Statement of Principles:

“classic polyarteritis nodosa” means a systemic necrotising vasculitis characterised by necrotising inflammation of medium-sized or small arteries without glomerulonephritis or vasculitis in arterioles, capillaries or venules;

“evidence of infection with hepatitis B” means evidence of such on serological testing, that is, evidence of hepatitis B surface antigen (HBsAg), hepatitis B e antigen, hepatitis B core antibody and/or hepatitis B surface antibody, attracting ICD code 070.2 or 070.3;

“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 1996, copyrighted by the National Coding Centre, Faculty of Health Sciences, University of Sydney, NSW, and having ISBN 0 642 24447 2;

“microscopic polyangiitis” also known as microscopic polyarteritis means a systemic necrotising vasculitis characterised by necrotising vasculitis, with few or no immune deposits, affecting small vessels (that is, capillaries, venules or arterioles). Necrotising arteritis involving small and medium sized arteries may be present. Necrotising glomerulonephritis is very common. Pulmonary capillaritis often occurs;

“relevant service” means:

- (a) eligible war service (other than operational service); or
- (b) defence service (other than hazardous service);

Dated this *Ninth* day of *December* 1996

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

KEN DONALD
CHAIRMAN