

# REVOKED

## Revocation and Determination

of

## Statement of Principles concerning

# DIABETES MELLITUS

ICD CODES: 250

### *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.174 of 1995; and
  - (b) determines the following Statement of Principles.

#### **Kind of injury, disease or death**

2. (a) This Statement of Principles is about **diabetes mellitus** and **death from diabetes mellitus**.
    - (b) For the purposes of this Statement of Principles, "**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.

### **Basis for determining the factors**

3. The Repatriation Medical Authority is of the view that there is sound medical-scientific evidence that indicates that **diabetes mellitus** 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 **diabetes mellitus** or **death from diabetes mellitus** with the circumstances of a person's relevant service are:
  - (a) in relation to *type 1* diabetes mellitus, being infected with rubella virus or Coxsackie B virus before the clinical onset of diabetes mellitus; or
  - (b) in relation to *type 2* diabetes mellitus, being obese for a period of at least ten years before the clinical onset of diabetes mellitus; or
  - (c) in relation to *type 2* diabetes mellitus, smoking at least 10 cigarettes per day for at least 20 years, and continuing to do so within the 10 years immediately before the clinical onset of diabetes mellitus; or
  - (d) suffering from gestational diabetes before the clinical onset of diabetes mellitus; or
  - (e) suffering from acute pancreatitis or chronic pancreatitis before the clinical onset of diabetes mellitus; or
  - (f) suffering from pancreatic cancer before the clinical onset of diabetes mellitus; or
  - (g) undergoing surgery to the pancreas before the clinical onset of diabetes mellitus; or
  - (h) suffering from cystic fibrosis before the clinical onset of diabetes mellitus; or
  - (j) suffering from haemochromatosis before the clinical onset of diabetes mellitus; or

- (k) suffering from Cushing's syndrome before the clinical onset of diabetes mellitus; or
- (m) suffering from acromegaly before the clinical onset of diabetes mellitus; or
- (n) suffering from phaeochromocytoma before the clinical onset of diabetes mellitus; or
- (o) being treated with any of the drugs from specified list No.1 of drugs no more than six months before the clinical onset of diabetes mellitus; or
- (p) being treated with immunosuppressive drugs, for organ transplantation, before the clinical onset of diabetes mellitus; or
- (q) in relation to *type 1* diabetes mellitus, being infected with rubella virus or Coxsackie B virus before the clinical worsening of diabetes mellitus; or
- (r) in relation to *type 2* diabetes mellitus, being obese for a period of at least ten years before the clinical worsening of diabetes mellitus; or
- (s) in relation to *type 2* diabetes mellitus, smoking at least 10 cigarettes per day for at least 20 years, and continuing to do so within the 10 years immediately before the clinical worsening of diabetes mellitus; or
- (t) being pregnant before the clinical worsening of diabetes mellitus; or
- (u) suffering from acute pancreatitis or chronic pancreatitis before the clinical worsening of diabetes mellitus; or
- (v) suffering from pancreatic cancer before the clinical worsening of diabetes mellitus; or
- (w) undergoing surgery to the pancreas before the clinical worsening of diabetes mellitus; or
- (x) suffering from cystic fibrosis before the clinical worsening of diabetes mellitus; or

- (y) suffering from haemochromatosis before the clinical worsening of diabetes mellitus; or
- (z) suffering from Cushing's syndrome before the clinical worsening of diabetes mellitus; or
- (za) suffering from acromegaly before the clinical worsening of diabetes mellitus; or
- (zb) suffering from phaeochromocytoma before the clinical worsening of diabetes mellitus; or
- (zc) being treated with any of the drugs from specified list No.1 of drugs no more than six months before the clinical worsening of diabetes mellitus; or
- (zd) being treated with either of the drugs from specified list No.2 of drugs no more than six months before the clinical worsening of diabetes mellitus; or
- (ze) being treated with immunosuppressive drugs, for organ transplantation, before the clinical worsening of diabetes mellitus; or
- (zf) inability to obtain appropriate clinical management for diabetes mellitus.

**Factors that apply only to material contribution or aggravation**

6. Paragraphs 5(q) to 5(zf) apply only to material contribution to, or aggravation of, diabetes mellitus where the person's diabetes mellitus 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:

**“acromegaly”** means a chronic disease of adults due to hypersecretion of the pituitary growth hormone and characterised by enlargement of many parts of the skeleton especially the distal portions, the nose, ears, jaws, fingers and toes, attracting ICD code 253.0;

**“acute pancreatitis”** means an acute inflammatory condition due to auto-digestion of pancreatic tissue by its own enzymes, attracting ICD code 577.0 or 577.2, typically presenting with abdominal pain, and usually associated with raised pancreatic enzymes in blood or urine;

**“being obese”** means having a Body Mass Index (BMI) greater than 30, where:

$$\text{BMI} = \frac{W}{H^2}$$

and where:

**W** is the person’s weight in kilograms; and

**H** is the person’s height in metres.

(for example, a person would be obese if the person weighed 120 kg and was 1.8 metres in height:  $\text{BMI} = 120 \div (1.8 \times 1.8) = 37.04$ )

**Note** : the sources for this definition are:

NH & MRC report of the 98th session, Canberra AGPS 1984;

NH & MRC report of the 100th session, Canberra AGPS 1985;

NHF Australia, Risk Factor Prevalence Study Survey 3, Canberra NHF & AIH, 1990.

**“being pregnant”** means having the condition of a developing embryo or foetus in the body;

**“being treated”** means five or more administrations of the drug within a 125 day period;

**“chronic pancreatitis”** means a chronic inflammatory condition typically presenting with chronic abdominal pain and a progressive fibrosis of the pancreas with loss of exocrine (steatorrhoea) and endocrine (diabetes mellitus) function, attracting ICD code 577.1;

**“Coxsackie B virus”** means one of a heterogeneous group of viruses of the genus *Enterovirus*, that in humans has a tendency to affect the meninges and occasionally the cerebrum, but which can cause a wide spectrum of clinical illness;

**“Cushing's syndrome”** means the production of glucocorticoids in the adrenal gland or increased blood levels of glucocorticoids administered as therapy, attracting ICD code 255.0;

**“cystic fibrosis”** means a generalised, autosomal recessive disorder, in which there is widespread dysfunction of the exocrine glands, characterised by signs of chronic pulmonary disease, pancreatic deficiency, abnormally high levels of electrolytes in the sweat, and occasionally by biliary cirrhosis, attracting ICD code 277.0;

**“gestational diabetes”** means carbohydrate intolerance of variable severity with onset or first recognition during pregnancy, attracting ICD code 648.8;

**“haemochromatosis”** means a disorder due to deposition of haemosiderin in the parenchymal cells, causing tissue damage and dysfunction of the liver, pancreas, heart, and pituitary, attracting ICD code 275.0;

**“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;

**“immunosuppressive drugs”** means drugs or agents capable of suppressing immune responses;

**“pancreatic cancer”** means a malignant neoplasm of the cells of the pancreas, attracting ICD code 157;

**“phaeochromocytoma”** means a usually benign, well-encapsulated, lobular, vascular tumour of chromaffin tissue of the adrenal medulla or sympathetic ganglion, attracting ICD code 194.0 or 194.6 (malignant) or 227.0 or 227.6 (benign), depending on the site;

**“relevant service”** means:

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

**“rubella virus”** means a member of the Togavirus family which causes rubella (German measles);

**“specified list No.1 of drugs”** means:

- (a)  $\beta$ -blockers; or
- (b) Glucocorticoids; or
- (c) Thiazide Diuretics;
- (d) Certain Drugs structurally similar to Thiazide Diuretics (Chlorthalidone, Quinethazone, Indapamide, Mefruside, Metolazone, Clopamide, Clorexolone and Zipamide); or
- (e) Loop Diuretics; or
- (f) Certain Drugs similar to Loop Diuretics (Azozemide, Muzolinine and Tielinic Acid); or
- (g) Phenytoin; or
- (h) Growth hormone; or
- (j) Encainide; or
- (k) Didanosine;

**“specified list No.2 of drugs”** means:

- (a) Oral contraceptives; or
- (b) Diazoxide;

**“type 1 diabetes mellitus”** means insulin dependent diabetes mellitus. Insulin dependence is not equivalent to insulin therapy. Rather, it means that the patient is at risk for ketoacidosis in the absence of insulin.

**“type 2 diabetes mellitus”** means non-insulin dependent diabetes mellitus.

Note: The National Diabetes Group Classification is detailed in the table:

CLASS	CLINICAL CHARACTERISTICS	DIAGNOSTIC CRITERIA
insulin dependent diabetes mellitus (IDDM, type 1)	Ketosis prone; dependent on insulin for survival; usual onset in youth; absolute insulin deficiency; anti-islet cell antibodies often present at diagnosis	unequivocal elevation of blood glucose with polyuria, polydipsia, weight loss and weakness
non-insulin dependent diabetes mellitus (NIDDM, type 2)	Ketosis resistant, usual onset after 40 years of age; majority obese; insulin resistance often present with inadequate insulin secretion	same criteria for IDDM blood glucose levels as per definition of diabetes mellitus

### Application

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

Dated this *Fourteenth* day of *March* 1996

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

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)  
KEN DONALD  
CHAIRMAN