Revocation and Determination

of

Statement of Principles

concerning

MALIGNANT NEOPLASM OF THE CERVIX

ICD CODES: 180, 233.1

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.127 of 1995; and

(b) determines the following Statement of Principles.

Kind of injury, disease or death

2. (a) This Statement of Principles is about malignant neoplasm of the cervix and death from malignant neoplasm of the cervix.

(b) For the purposes of this Statement of Principles, “malignant neoplasm of the cervix” means a primary invasive carcinoma or carcinoma in situ (also known as cervical intraepithelial neoplasia grade III), arising from the cells of the cervix uteri, attracting ICD code 180 or 233.1

Note: For the purposes of this Statement of Principles, this definition specifically excludes soft tissue sarcoma, non-Hodgkin's lymphoma and Hodgkin's disease.

Note to user (this note does not form part of the legal wording of the instrument):

In the event that a disease referred to in the note above (which is excluded from coverage by this Statement of Principles) is claimed, reference should be made to the relevant Statement of Principles (or Statements of Principles) which cover or refer to that disease (if any).
Basis for determining the factors

3. The Repatriation Medical Authority is of the view that there is sound medical-scientific evidence that indicates that malignant neoplasm of the cervix and death from malignant neoplasm of the cervix 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 malignant neoplasm of the cervix or death from malignant neoplasm of the cervix with the circumstances of a person’s relevant service are:

(a) using the combined oral contraceptive pill for a period of at least three years where:

(1) use of the combined oral contraceptive pill commenced at least five years before the clinical onset of malignant neoplasm of the cervix; and

(2) where use of the combined oral contraceptive pill has ceased, the clinical onset of malignant neoplasm of the cervix has occurred within 10 years of cessation; or

(b) smoking at least five pack-years of cigarettes, or smoking the equivalent thereof in other tobacco products, before the clinical onset of malignant neoplasm of the cervix, and, where smoking has ceased, the clinical onset has occurred within 15 years of cessation; or

(c) being infected with genital human papilloma virus (HPV) of the cervical epithelium before the clinical onset of malignant neoplasm of the cervix; or

(d) being infected with human immunodeficiency virus (HIV), with evidence of immunosuppression, at the time of the clinical onset of malignant neoplasm of the cervix; or

(e) receiving chronic systemic immunosuppressive drug therapy at the time of the clinical onset of malignant neoplasm of the cervix; or
(f) being infected with human immunodeficiency virus (HIV) with evidence of immunosuppression, at the time of the clinical worsening of malignant neoplasm of the cervix; or

(g) receiving chronic systemic immunosuppressive drug therapy at the time of the clinical worsening of malignant neoplasm of the cervix; or

(h) inability to obtain appropriate clinical management for malignant neoplasm of the cervix.

Factors that apply only to material contribution or aggravation

6. Paragraphs 5(f) to 5(h) apply only to material contribution to, or aggravation of, malignant neoplasm of the cervix where the person’s malignant neoplasm of the cervix 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:

“being infected with human immunodeficiency virus (HIV)” means serological evidence of infection with human immunodeficiency virus, attracting ICD code 042 or 079.53;

“being infected with genital human papilloma virus (HPV)” means clinical, biochemical or molecular evidence of cervical infection with a strain of HPV which causes genital warts, attracting ICD code 078.1. Infection by HPV can be presumed if a person has had a history of clinical disease caused by HPV or has engaged in sexual activity, where the likelihood of HPV infection was significantly increased (for example, sexual intercourse without barrier protection of the genitals, such as a sheath or condom increases the risk);

“chronic systemic immunosuppressive drug therapy” means the therapeutic administration of a drug such as cyclophosphamide, chlorambucil or azathioprine for organ transplantation;

“combined oral contraceptive pill” means a compound containing both oestrogen and progestogen, usually taken in order to block ovulation and prevent the occurrence of pregnancy;

“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;

“pack-year” means 7 300 cigarettes, or 1 460 cigars, or 7.3kg of pipe tobacco;

“relevant service” means:

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

Application

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

Dated this Second day of May 1997

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

KEN DONALD
CHAIRMAN