Determination

of

Statement of Principles

concerning

SYMPTOMATIC EPSTEIN-BARR VIRUS INFECTION

ICD CODE: 075

Veterans’ Entitlements Act 1986

1. This Statement of Principles is determined by the Repatriation Medical Authority under subsection 196B(2) of the Veterans’ Entitlements Act 1986 (the Act).

Kind of injury, disease or death

2  (a) This Statement of Principles is about symptomatic Epstein-Barr virus infection and death from symptomatic Epstein-Barr virus infection.

(b) For the purposes of this Statement of Principles, “symptomatic Epstein-Barr virus infection” means a clinical illness compatible with Epstein-Barr virus infection accompanied by serological evidence of recently acquired Epstein-Barr virus infection, attracting ICD code 075.

Basis for determining the factors

3. The Repatriation Medical Authority is of the view that there is sound medical-scientific evidence that indicates that symptomatic Epstein-Barr virus infection and death from symptomatic Epstein-Barr virus infection 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, at least one of the factors set out 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 symptomatic Epstein-Barr virus infection or death from symptomatic Epstein-Barr virus infection with the circumstances of a person’s relevant service are:

   (a) having physical contact involving exchange of oral secretions with an individual infected with Epstein-Barr virus, at least 21 days, but not more than 49 days, immediately before the clinical onset of symptomatic Epstein-Barr virus infection; or

   (b) having received a transfusion of blood or blood products, a bone marrow transplantation or other organ transplantation at least 21 days, but not more than 49 days, immediately before the clinical onset of symptomatic Epstein-Barr virus infection; or

   (c) suffering from an immunodeficiency state at the time of the clinical worsening of symptomatic Epstein-Barr virus infection; or

   (d) inability to obtain appropriate clinical management for symptomatic Epstein-Barr virus infection.

Factors that apply only to material contribution or aggravation

6. Paragraphs 5(c) to 5(d) apply only to material contribution to, or aggravation of, symptomatic Epstein-Barr virus infection where the person’s symptomatic Epstein-Barr virus infection 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:

   “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;
“immunodeficiency state” means a pathological state where the immune response has been attenuated. Acquired immunodeficiency state occurs during or immediately following the administration of a course of immunosuppressive drugs, or whole body irradiation, and in the presence of human immunodeficiency virus (HIV) infection, severe protein-calorie malnutrition, or a systemic malignancy;

“other organ transplantation” means transplantation of organs such as kidneys, liver, heart and lungs. It does not include transplantation of avascular donor tissue such as corneal grafts;

“relevant service” means:

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

Dated this **Fifth** day of **May** 1998

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

KEN DONALD
CHAIRMAN