

Revocation

of

Statement of Principles
concerning

CHOLANGIOCARCINOMA

and

Determination

of

Statement of Principles
concerning

**MALIGNANT NEOPLASM OF THE BILE
DUCT**

ICD-9-CM CODES: 155.1, 156.1, 156.2

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.39 of 1995 (Statement of Principles concerning cholangiocarcinoma); and
 - (b) determines in its place the following Statement of Principles.

Kind of injury, disease or death

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

(b) For the purposes of this Statement of Principles:

“malignant neoplasm of the bile duct” means a primary malignant neoplasm arising in an intrahepatic or extrahepatic bile duct (including ampulla of Vater, and the cystic duct), attracting ICD-9-CM code 155.1, 156.1 or 156.2, but excluding soft tissue sarcoma, non-Hodgkin’s lymphoma and Hodgkin’s disease.

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 bile duct and death from malignant neoplasm of the bile duct** 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 **malignant neoplasm of the bile duct** or **death from malignant neoplasm of the bile duct** with the circumstances of a person’s relevant service are:

- (a) suffering from chronic hepatobiliary infestation by liver flukes before the clinical onset of malignant neoplasm of the bile duct; or
- (b) suffering from sclerosing cholangitis before the clinical onset of malignant neoplasm of the bile duct; or
- (c) suffering from ulcerative colitis before the clinical onset of malignant neoplasm of the bile duct; or
- (d) suffering from cholelithiasis before the clinical onset of malignant neoplasm of the bile duct; or
- (e) suffering from a chronic typhoid carrier state before the clinical onset of malignant neoplasm of the bile duct; or

- (f) having had an intravascular injection of thorotrast before the clinical onset of malignant neoplasm of the bile duct; or
- (g) inability to obtain appropriate clinical management for malignant neoplasm of the bile duct.

Factors that apply only to material contribution or aggravation

- 6. Paragraph 5(g) applies only to material contribution to, or aggravation of, malignant neoplasm of the bile duct where the person's malignant neoplasm of the bile duct 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.

Inclusion of Statements of Principles

- 7. In this Statement of Principles if a relevant factor applies and that factor includes an injury or disease in respect of which there is a Statement of Principles then the factors in that last mentioned Statement of Principles apply in accordance with the terms of that Statement of Principles.

Other definitions

- 8. For the purposes of this Statement of Principles:

“cholelithiasis” means calculus of the gall bladder or bile duct formed by accretion or concretion of bile constituents;

“chronic typhoid carrier state” means harbouring typhoid bacilli, as determined by examination of at least two specimens of stool taken no less than 24 hours apart, from a person who has not shown clinical evidence of typhoid fever within the 12 months immediately preceding the diagnosis of chronic typhoid carrier state;

“death from malignant neoplasm of the bile duct” in relation to a person includes death from a terminal event or condition that was contributed to by the person's malignant neoplasm of the bile duct;

“ICD-9-CM 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;

“liver flukes” means *Clonorchis sinensis*, *Opisthorchis viverrini* or *Opisthorchis felinus*;

“relevant service” means:

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

“sclerosing cholangitis” means a disorder characterised by a progressive, inflammatory, sclerosing and obliterative process in the bile ducts;

“terminal event” means the proximate or ultimate cause of death and includes:

- a) pneumonia;
- b) respiratory failure;
- c) cardiac arrest;
- d) circulatory failure; or
- e) cessation of brain function;

“thorotrast” means a contrast medium formerly used in radiography, which contained thorium dioxide, a radioactive emitter;

“ulcerative colitis” means a chronic inflammatory bowel disease which primarily affects the large bowel.

Application

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

Dated this *Twenty-seventh* day of *April* 1999

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

KEN DONALD
CHAIRMAN