Revocation and Determination

of

Statement of Principles
concerning

PANIC DISORDER

ICD-9-CM CODES: 300.01, 300.21

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.31 of 1998; 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 panic disorder and death from panic disorder.

(b) For the purposes of this Statement of Principles, “panic disorder”, means a psychiatric condition characterised by the following diagnostic criteria:

(A) the person has experienced both:

(1) recurrent unexpected panic attacks; and

(2) (i) has experienced at least four panic attacks in four weeks, or

(ii) in the case of fewer panic attacks, at least one of the panic attacks has been followed by 30
days (or more) of one (or more) of the following:

(a) persistent concern about having additional panic attacks; or
(b) worry about the implications of the panic attack or its consequences; or
(c) a significant change in behaviour related to the panic attacks; where

(B) the panic attacks can occur in the presence or absence of agoraphobia; and

(C) the panic attacks are not due to the direct physiological effects of a substance or a general medical condition; and

(D) the panic attacks are not better accounted for by another mental disorder, such as social phobia, specific phobia, obsessive-compulsive disorder, post traumatic stress disorder, or separation anxiety disorder,

attracting ICD-9-CM code 300.01 or 300.21.

Basis for determining the factors

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

(a) experiencing a severe stressor within the two years immediately before the clinical onset of panic disorder; or

(b) experiencing a severe stressor within the two years immediately before the clinical worsening of panic disorder; or
(c) inability to obtain appropriate clinical management for panic disorder.

Factors that apply only to material contribution or aggravation

6. Paragraphs 5(b) to 5(c) apply only to material contribution to, or aggravation of, panic disorder where the person’s panic disorder 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:

“death from panic disorder” in relation to a person includes death from a terminal event or condition that was contributed to by the person’s panic disorder;

“DSM-IV” means the fourth edition of the American Psychiatric Association’s Diagnostic and Statistical Manual of Mental Disorders;

“experiencing a severe stressor” means the person experienced, witnessed, or was confronted with an event or events that involved actual or threat of death or serious injury, or a threat to the person’s, or another person’s, physical integrity.

In the setting of service in the Defence Forces, or other service where the Veterans’ Entitlement Act applies, events that qualify as stressors include:

(i) threat of serious injury or death; or
(ii) engagement with the enemy; or
(iii) witnessing casualties or participation in or observation of casualty clearance, atrocities or abusive violence;
“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;

“panic attack” means a condition, as defined in DSM-IV, meeting the following criteria:

the person has experienced a discrete period of intense fear or discomfort, in which four (or more) of the following symptoms developed abruptly and reached a peak within 10 minutes:

   (1) palpitations, pounding heart, or accelerated heart rate; or
   (2) sweating; or
   (3) trembling or shaking; or
   (4) sensations of shortness of breath or smothering; or
   (5) feeling of choking; or
   (6) chest pain or discomfort; or
   (7) nausea or abdominal distress; or
   (8) feeling dizzy, unsteady, light headed or faint; or
   (9) derealisation (feelings of unreality) or depersonalisation (being detached from oneself); or
   (10) fear of losing control or going crazy; or
   (11) fear of dying; or
   (12) paresthesias (numbness or tingling sensations); or
   (13) chills or hot flushes;

“relevant service” means:

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

“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.
Application

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

Dated this Fourteenth day of January 1999

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

KEN DONALD
CHAIRMAN