

**Revocation and Determination**  
of  
**Statement of Principles**  
concerning  
**ATRIAL FIBRILLATION**

*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.9 of 1996; 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 **atrial fibrillation** and **death from atrial fibrillation**.
  - (b) For the purposes of this Statement of Principles, **“atrial fibrillation”** means a paroxysmal, persistent or permanent arrhythmia arising in the atria of the heart, causing disorganised atrial activity and an irregularly irregular ventricular response.
  - (c) In the application of this Statement of Principles, the definition of **“atrial fibrillation”** is that given at para 2(b) above.

**Basis for determining the factors**

3. The Repatriation Medical Authority is of the view that there is sound medical-scientific evidence that indicates that **atrial fibrillation** and **death from atrial fibrillation** 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 **atrial fibrillation** or **death from atrial fibrillation** with the circumstances of a person's relevant service are:
  - (a) suffering from valvular heart disease at the time of the clinical onset of atrial fibrillation; or
  - (b) suffering from ischaemic heart disease at the time of the clinical onset of atrial fibrillation; or
  - (c) suffering from myocarditis within the 30 days immediately before the clinical onset of atrial fibrillation; or
  - (d) suffering from cardiomyopathy at the time of the clinical onset of atrial fibrillation; or
  - (e) suffering from congenital heart disease at the time of the clinical onset of atrial fibrillation; or
  - (f) suffering from congestive cardiac failure within the 30 days immediately before the clinical onset of atrial fibrillation; or
  - (g) the presence of hypertension at the time of the clinical onset of atrial fibrillation; or
  - (h) suffering from pericarditis within the 30 days immediately before the clinical onset of atrial fibrillation; or
  - (i) suffering from hyperthyroidism at the time of the clinical onset of atrial fibrillation; or
  - (j) drinking at least 250 kilograms of alcohol within a 10 year period within the 15 years immediately before the clinical onset of atrial fibrillation; or
  - (k) undergoing cardiac or thoracic surgery within the 30 days immediately before the clinical onset of atrial fibrillation; or

- (l) suffering from chronic bronchitis with pulmonary obstruction at the time of the clinical onset of atrial fibrillation; or
- (m) suffering from emphysema at the time of the clinical onset of atrial fibrillation; or
- (n) undertaking strenuous physical activity for an average duration of at least three hours per week for a minimum of 40 weeks per year during each year for at least five consecutive years before the clinical onset of atrial fibrillation and, where strenuous physical activity has ceased, the clinical onset has occurred within five years of cessation; or
- (o) inability to obtain appropriate clinical management for atrial fibrillation.

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

- 6. Paragraph 5(o) applies only to material contribution to, or aggravation of, atrial fibrillation where the person's atrial fibrillation 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:

“**alcohol**” is measured by the alcohol consumption calculations utilising the Australian Standard of 10 grams of alcohol per standard alcoholic drink;

“**chronic bronchitis with pulmonary obstruction**” means a respiratory tract disorder with:

- (a) excessive mucus production sufficient to cause cough and sputum production with expectoration for at least three months of each of at least two consecutive years which is not attributable to other respiratory diseases; and
- (b) chronic expiratory obstruction on spirometric evaluation;

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

**“hyperthyroidism”** means thyrotoxicosis or subclinical hyperthyroidism;

**“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
- (d) cessation of brain function.

**“strenuous physical activity”** means physical activity greater than 11 METS, where a “MET” is a unit of measurement of the level of physical exertion. 1 MET = 3.5 ml of oxygen/kg of body weight per minute or, 1.0 kcal/kg of body weight per hour, or resting metabolic rate.

### **Application**

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

Dated this *Twenty-ninth* day of *May* 2003

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

KEN DONALD  
CHAIRMAN