

Statement of Principles
concerning

GUILLAIN-BARRE SYNDROME

No. 53 of 2005

for the purposes of the

Veterans' Entitlements Act 1986
and

Military Rehabilitation and Compensation Act 2004

Title

1. This Instrument may be cited as Statement of Principles concerning Guillain-Barre syndrome No. 53 of 2005.

Determination

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

Kind of injury, disease or death

3. (a) This Statement of Principles is about **Guillain-Barre syndrome** and **death from Guillain-Barre syndrome**.
(b) For the purposes of this Statement of Principles, "**Guillain-Barre syndrome**" means an acquired acute or subacute clinical disorder of the peripheral nervous system producing
 - (i) symptoms, and
 - (ii) signs or electrodiagnostic evidenceof impaired motor, sensory or autonomic functioning that is characterised by rapidly progressive symmetrical limb weakness, loss of tendon reflexes, mild sensory signs, variable autonomic dysfunction, and elevated protein concentration in cerebrospinal fluid.

- (c) This definition includes:
 - (i) acute inflammatory demyelinating polyneuropathy;
 - (ii) acute motor axonal neuropathy;
 - (iii) acute motor sensory axonal neuropathy; and
 - (iv) M. Fisher syndrome.
- (d) Guillain-Barre syndrome attracts ICD-10-AM code G61.0.
- (e) In the application of this Statement of Principles, the definition of “**Guillain-Barre syndrome**” is that given at paragraphs 3(b) and 3(c) above.

Basis for determining the factors

- 4. The Repatriation Medical Authority is of the view that there is sound medical-scientific evidence that indicates that **Guillain-Barre syndrome** and **death from Guillain-Barre syndrome** can be related to relevant service rendered by veterans, members of Peacekeeping Forces, or members of the Forces under the VEA, or members under the *Military Rehabilitation and Compensation Act 2004* (the MRCA).

Factors that must be related to service

- 5. Subject to clause 7, at least one of the factors set out in clause 6 must be related to the relevant service rendered by the person.

Factors

- 6. The factor that must as a minimum exist before it can be said that a reasonable hypothesis has been raised connecting **Guillain-Barre syndrome** or **death from Guillain-Barre syndrome** with the circumstances of a person’s relevant service is:
 - (a) becoming infected with *Campylobacter jejuni*, cytomegalovirus, Epstein-Barr virus or *Mycoplasma pneumoniae* within the thirty days before the clinical onset of Guillain-Barre syndrome; or
 - (b) being infected with human immunodeficiency virus (HIV) at the time of the clinical onset of Guillain-Barre syndrome; or
 - (c) having Hodgkin’s lymphoma or non-Hodgkin’s lymphoma at the time of the clinical onset of Guillain-Barre syndrome; or
 - (d) receiving a specified vaccine in the period between five days and fifty-six days before the clinical onset of Guillain-Barre syndrome; or

- (e) inability to obtain appropriate clinical management for Guillain-Barre syndrome.

Factors that apply only to material contribution or aggravation

- 7. Paragraph 6(e) applies only to material contribution to, or aggravation of, Guillain-Barre syndrome where the person's Guillain-Barre syndrome was suffered or contracted before or during (but not arising out of) the person's relevant service.

Inclusion of Statements of Principles

- 8. 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 as in force from time to time.

Other definitions

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

“a specified vaccine” means:

- (a) rabies vaccine;
- (b) influenza vaccine;
- (c) hepatitis B vaccine;
- (d) oral poliovirus vaccine; or
- (e) tetanus toxoid;

“death from Guillain-Barre syndrome” in relation to a person includes death from a terminal event or condition that was contributed to by the person's Guillain-Barre syndrome;

“ICD-10-AM code” means a number assigned to a particular kind of injury or disease in The International Statistical Classification of Diseases and Related Health Problems, 10th revision, Australian Modification (ICD-10-AM), Fourth Edition, effective date of 1 July 2004, copyrighted by the National Centre for Classification in Health, Sydney, NSW, and having ISBN 1 86487 594 1;

“relevant service” means:

- (a) operational service under the VEA;
- (b) peacekeeping service under the VEA;
- (c) hazardous service under the VEA;
- (d) warlike service under the MRCA; or
- (e) non-warlike service under the MRCA;

