Statement of Principles concerning

SOFT TISSUE SARCOMA

No. 14 of 2006

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 soft tissue sarcoma No. 14 of 2006.

Determination

2. The Repatriation Medical Authority under subsection 196B(3) and (8) of the Veterans’ Entitlements Act 1986 (the VEA):

(a) revokes Instrument No. 24 of 2001; and

(b) determines in its place this Statement of Principles.

Kind of injury, disease or death

3. (a) This Statement of Principles is about soft tissue sarcoma and death from soft tissue sarcoma.

(b) For the purposes of this Statement of Principles, “soft tissue sarcoma” means a malignant neoplasm derived from extraskeletal connective tissue, including fibrous, fat, smooth muscle, nerve, vascular, histiocytic and synovial tissue, and which can occur at any site in the body. This definition includes atypical fibroxanthoma, mullerian adenosarcoma and malignant mixed mullerian tumours, but excludes mesothelioma, Kaposi’s sarcoma, malignant neoplasm of the bone or articular cartilage
and malignant neoplasm of the lymphopoietic and haematopoietic tissue.

(c) Soft tissue sarcoma attracts ICD-10-AM code C22.3, C22.4, C30.0, C32.3, C47, C48, C49.

(d) In the application of this Statement of Principles, the definition of “soft tissue sarcoma” is that given at paragraph 3(b) above.

### Basis for determining the factors

4. On the sound medical-scientific evidence available, the Repatriation Medical Authority is of the view that it is more probable than not that soft tissue sarcoma and death from soft tissue sarcoma can be related to relevant service rendered by veterans 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 exist before it can be said that, on the balance of probabilities, soft tissue sarcoma or death from soft tissue sarcoma is connected with the circumstances of a person’s relevant service is:

   (a) inhaling, ingesting or having cutaneous contact with a chemical agent contaminated by 2,3,7,8-tetrachlorodibenzo-para-dioxin (TCDD) for a cumulative period of at least sixty days, at least five years before the clinical onset of soft tissue sarcoma; or

   (b) having received treatment with radium-224 at least five years before the clinical onset of soft tissue sarcoma; or

   (c) having received a course of therapeutic radiation to the affected region at least three years before the clinical onset of soft tissue sarcoma; or

   (d) having received a cumulative dose of at least 0.5 Sievert of ionising radiation to the affected site from internal deposition of a substance which emits alpha particles at least five years before the clinical onset of soft tissue sarcoma; or
(e) being treated with cyclophosphamide or drugs used for the purpose of suppressing the immune responses after organ transplantation for a continuous period of at least five months before the clinical onset of soft tissue sarcoma; or

(f) for angiosarcoma only, having received a course of therapeutic radiation to the affected region at least two years before the clinical onset of soft tissue sarcoma; or

(g) for angiosarcoma only, having lymphoedema of the affected region at the time of the clinical onset of soft tissue sarcoma; or

(h) for hepatic angiosarcoma only, inhaling a cumulative dose of at least 200 ppm-years of gaseous vinyl chloride at least five years before the clinical onset of soft tissue sarcoma; or

(i) for uterine sarcoma only, undergoing treatment with tamoxifen for a period of at least four months before the clinical onset of soft tissue sarcoma; or

(j) inability to obtain appropriate clinical management for soft tissue sarcoma.

Factors that apply only to material contribution or aggravation

7. Paragraph 6(j) applies only to material contribution to, or aggravation of, soft tissue sarcoma where the person’s soft tissue sarcoma 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 course of therapeutic radiation” means one or more fractions (treatment portions) of ionising radiation administered with the aim of achieving palliation or cure with gamma rays, x-rays, alpha particles or beta particles;
“angiosarcoma” means lymphangiosarcoma or haemangiosarcoma;

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

“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;

“inhaling, ingesting or having cutaneous contact with a chemical agent contaminated by 2,3,7,8-tetrachlorodibenzo-para-dioxin (TCDD)” means:
(a) decanting or spraying,
(b) cleaning or maintaining equipment used to apply,
(c) being sprayed with,
(d) handling or sawing timber treated with,
(e) being in an environment shrouded in dust from timber treated with, or
(f) using cutting oils contaminated with,

one of the following chemicals:
• 2,4,5-trichlorophenoxyacetic acid,
• 2,4,5-trichlorophenoxypropionic acid,
• 2,4,5-trichlorophenol,
• 2-(2,4,5-trichlorophenoxy)-ethyl 2,2-dichloropropionate,
• o,o-dimethyl-o-(2,4,5-trichlorophenyl)-phosphorothioate,
• pentachlorophenol,
• 2,3,4,6-tetrachlorophenol,
• 2,4,6-trichlorophenol,
• 1,3,4-trichloro-2-(4-nitrophenoxy)benzene,
• 2,4-dichloro-1-(4-nitrophenoxy)benzene, or
• 2,4-dichloro-1-(3-methoxy-4-nitrophenoxy)-benzene;

“lymphoedema” means chronic oedema due to accumulation of interstitial fluid as a result of stasis of lymph, which is secondary to obstruction of lymph vessels or disorders of the lymph nodes;

“ppm-years” means parts per million multiplied by years of exposure;
“relevant service” means:
(a) eligible war service (other than operational service) under the VEA; or
(b) defence service (other than hazardous service) under the VEA; or
(c) peacetime service under the MRCA;

“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
10. This Instrument applies to all matters to which section 120B of the VEA or section 339 of the MRCA applies.

Date of effect
11. This Instrument takes effect from 10 May 2006.

Dated this twenty-sixth day of April 2006

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

KEN DONALD
CHAIRPERSON