Statement of Principles
concerning
SYSTEMIC LUPUS ERYTHEMATOSUS
No. 85 of 2007
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 systemic lupus erythematosus No. 85 of 2007.

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 systemic lupus erythematosus and death from systemic lupus erythematosus.

(b) For the purposes of this Statement of Principles, "systemic lupus erythematosus" means a chronic inflammatory autoimmune disease characterised by the presence of antibodies directed against cell nuclei and variable clinical manifestations in multiple systems and organs. Common features include polyarthritis and arthralgia, photosensitivity, rash, serositis, and renal, haematological and neurological disorders. This definition excludes discoid lupus erythematosus and mixed connective tissue disease.

(c) Systemic lupus erythematosus attracts ICD-10-AM code M32, L93.1 or L93.2.
(d) In the application of this Statement of Principles, the definition of "systemic lupus erythematosus" is that given at paragraph 3(b) 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 systemic lupus erythematosus and death from systemic lupus erythematosus 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 systemic lupus erythematosus or death from systemic lupus erythematosus with the circumstances of a person’s relevant service is:

(a) inhaling respirable crystalline silica dust, at the time material containing crystalline silica was being:
   (i) produced;
   (ii) excavated;
   (iii) drilled; or
   (iv) used in manufacturing, cleaning or blasting,
   for a cumulative period of at least 2000 hours before the clinical onset of systemic lupus erythematosus; or

(b) where smoking has not ceased before the clinical onset of systemic lupus erythematosus, smoking at least ten pack years of cigarettes, or the equivalent thereof in other tobacco products, before the clinical onset of systemic lupus erythematosus; or

(c) being treated with a drug from the specified list at the time of the clinical onset of systemic lupus erythematosus; or
(d) being treated with a drug which is associated in the individual with:

(i) the development of the symptoms or signs of systemic lupus erythematosus during drug therapy;
(ii) the cessation of the symptoms or signs of systemic lupus erythematosus within weeks of discontinuing drug therapy;
(iii) an absence of clinical or laboratory evidence of systemic lupus erythematosus prior to beginning drug therapy; and
(iv) the presence of antihistone antibodies or antinuclear antibodies which reduce in titre on discontinuing drug therapy;

where treatment with the drug continued for at least the seven days before the clinical onset of systemic lupus erythematosus; or

(e) inhaling respirable crystalline silica dust, at the time material containing crystalline silica was being:

(i) produced;
(ii) excavated;
(iii) drilled; or
(iv) used in manufacturing, cleaning or blasting,

for a cumulative period of at least 2000 hours before the clinical worsening of systemic lupus erythematosus; or

(f) where smoking has not ceased before the clinical worsening of systemic lupus erythematosus, smoking at least ten pack years of cigarettes, or the equivalent thereof in other tobacco products, before the clinical worsening of systemic lupus erythematosus; or

(g) being treated with a drug from the specified list at the time of the clinical worsening of systemic lupus erythematosus; or

(h) being treated with a drug which is associated in the individual with an idiosyncratic drug reaction, as specified, where treatment with the drug continued for at least the seven days before the clinical worsening of systemic lupus erythematosus; or

(i) having hormone replacement therapy with oestrogen for at least the two years before the clinical worsening of systemic lupus erythematosus; or

(j) inability to obtain appropriate clinical management for systemic lupus erythematosus.
Factors that apply only to material contribution or aggravation

7. Paragraphs 6(e) to 6(j) apply only to material contribution to, or aggravation of, systemic lupus erythematosus where the person’s systemic lupus erythematosus 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 drug from the specified list" means:
(i) chlorpromazine;
(ii) hydralazine;
(iii) isoniazid;
(iv) methyldopa;
(v) minocycline;
(vi) procainamide; or
(vii) quinidine;

"death from systemic lupus erythematosus" in relation to a person includes death from a terminal event or condition that was contributed to by the person’s systemic lupus erythematosus;

"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), Fifth Edition, effective date of 1 July 2006, copyrighted by the National Centre for Classification in Health, Sydney, NSW, and having ISBN 1 86487 772 3;

"idiosyncratic drug reaction, as specified" means increase in the symptoms or signs of systemic lupus erythematosus during drug therapy and a decrease in the symptoms or signs of systemic lupus erythematosus within weeks of discontinuing drug therapy;

"pack years of cigarettes, or the equivalent thereof in other tobacco products" means a calculation of consumption where one pack year of cigarettes equals twenty tailor made cigarettes per day for a period of
one calendar year, or 7300 cigarettes. One tailor made cigarette approximates one gram of tobacco or one gram of cigar or pipe tobacco by weight. One pack year of tailor made cigarettes equates to 7300 cigarettes, or 7.3 kg of smoking tobacco by weight. Tobacco products means either cigarettes, pipe tobacco or cigars smoked, alone or in any combination;

"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;

"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.

Date of effect
10. This Instrument takes effect from 4 July 2007.

Dated this twentieth day of June 2007

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

KEN DONALD
CHAIRPERSON