

Statement of Principles  
concerning

**MALIGNANT NEOPLASM OF THE  
OESOPHAGUS**

**No. 41 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 malignant neoplasm of the oesophagus No. 41 of 2007.

**Determination**

2. The Repatriation Medical Authority under subsection **196B(2)** and **(8)** of the *Veterans' Entitlements Act 1986* (the VEA):
  - (a) revokes Instrument No. 115 of 1996, as amended by Instrument No. 11 of 1998, concerning malignant neoplasm of the oesophagus; and
  - (b) determines in their place this Statement of Principles.

**Kind of injury, disease or death**

3.
  - (a) This Statement of Principles is about **malignant neoplasm of the oesophagus** and **death from malignant neoplasm of the oesophagus**.
  - (b) For the purposes of this Statement of Principles, "**malignant neoplasm of the oesophagus**" means a primary malignant neoplasm arising from the cells of the oesophagus. The oesophagus is defined as the structure which begins proximally with the lower border of the hypopharynx and extends distally to

the lower border of the oesophageal sphincter. This definition excludes soft tissue sarcoma, carcinoid tumour, non-Hodgkin's lymphoma, and Hodgkin's lymphoma.

- (c) Malignant neoplasm of the oesophagus attracts ICD-10-AM code C15.
- (d) In the application of this Statement of Principles, the definition of "**malignant neoplasm of the oesophagus**" 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 **malignant neoplasm of the oesophagus** and **death from malignant neoplasm of the oesophagus** 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 **malignant neoplasm of the oesophagus** or **death from malignant neoplasm of the oesophagus** with the circumstances of a person's relevant service is:
  - (a) for squamous cell or undifferentiated carcinoma of the oesophagus only:
    - (i) smoking at least 2.5 pack years of cigarettes, or the equivalent thereof in other tobacco products, before the clinical onset of malignant neoplasm of the oesophagus, where smoking commenced at least five years before the clinical onset of malignant neoplasm of the oesophagus; or
    - (ii) drinking at least 250 kilograms of alcohol before the clinical onset of malignant neoplasm of the oesophagus; or
    - (iii) having acute erosive oesophagitis as the result of alkali ingestion, at least five years before the clinical onset of malignant neoplasm of the oesophagus; or
    - (iv) having Plummer-Vinson syndrome at the time of the clinical onset of malignant neoplasm of the oesophagus; or

- (v) drinking maté on more days than not for at least five years before the clinical onset of malignant neoplasm of the oesophagus and where drinking maté has ceased, the clinical onset of malignant neoplasm of the oesophagus has occurred within 15 years of cessation; or
- (b) for adenocarcinoma or undifferentiated carcinoma of the oesophagus only:
  - (i) having gastro-oesophageal reflux disease for at least the five years before the clinical onset of malignant neoplasm of the oesophagus; or
  - (ii) being obese for at least the five years before the clinical onset of malignant neoplasm of the oesophagus; or
- (c) for adenocarcinoma of the oesophagus only, smoking at least five pack years of cigarettes, or the equivalent thereof in other tobacco products, before the clinical onset of malignant neoplasm of the oesophagus, where smoking commenced at least five years before the clinical onset of malignant neoplasm of the oesophagus; or
- (d) undergoing a course of therapeutic radiation to the region of the chest before the clinical onset of malignant neoplasm of the oesophagus, where the first exposure to therapeutic radiation occurred at least five years before the clinical onset of malignant neoplasm of the oesophagus; or
- (e) having achalasia at the time of the clinical onset of malignant neoplasm of the oesophagus; or
- (f) having pernicious anaemia for at least the five years before the clinical onset of malignant neoplasm of the oesophagus; or
- (g) consuming, on average, 100 grams or less per day of any combination of fruits and vegetables, for a continuous five year period at least 10 years before the clinical onset of malignant neoplasm of the oesophagus; or
- (h) inability to obtain appropriate clinical management for malignant neoplasm of the oesophagus.

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

7. Paragraph **6(h)** applies only to material contribution to, or aggravation of, malignant neoplasm of the oesophagus where the person's malignant neoplasm of the oesophagus 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;

**"achalasia"** means failure of the lower oesophageal sphincter to relax with swallowing, due to degeneration of ganglion cells in the oesophageal wall. The thoracic oesophagus also loses its normal peristaltic activity and becomes dilated;

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

**"being obese"** means an increase in body weight by way of fat accumulation which results in a Body Mass Index (BMI) of thirty or greater.

The  $BMI = W/H^2$  and where:

W is the person's weight in kilograms and

H is the person's height in metres;

**"death from malignant neoplasm of the oesophagus"** in relation to a person includes death from a terminal event or condition that was contributed to by the person's malignant neoplasm of the oesophagus;

**"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;

**"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;

**"pernicious anaemia"** means a type of megaloblastic anaemia usually seen in older adults, involving impaired intestinal absorption of vitamin B<sub>12</sub> due to lack of availability of intrinsic factor. It is characterised by pallor, achlorhydria, glossitis, gastric mucosal atrophy, weakness, antibodies against gastric parietal cells or intrinsic factor, and neurologic manifestations.

**"Plummer-Vinson syndrome"** means the triad of dysphagia, iron deficient anaemia, and oesophageal webs. It is also known as Paterson-Kelly syndrome, and sideropenic dysphagia;

**"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.

**Application**

**10.** This Instrument applies to all matters to which section 120A of the VEA or section 338 of the MRCA applies.

**Date of effect**

**11.** This Instrument takes effect from 9 May 2007.

Dated this **twenty-fourth** day of  
**April** 2007

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

**KEN DONALD  
CHAIRPERSON**