Statement of Principles
concerning

MALIGNANT NEOPLASM OF THE OVARY

No. 70 of 2009

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 ovary No. 70 of 2009.

Determination

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

   (a) revokes Instrument No. 43 of 1997 concerning malignant neoplasm of the ovary; and

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

Kind of injury, disease or death

3. (a) This Statement of Principles is about malignant neoplasm of the ovary and death from malignant neoplasm of the ovary.

   (b) For the purposes of this Statement of Principles, "malignant neoplasm of the ovary" means a primary malignant neoplasm arising from the cells of the ovary and including cell types of borderline malignant potential. This definition excludes soft tissue sarcoma, carcinoid tumour, non-Hodgkin’s lymphoma and Hodgkin’s lymphoma.

   (c) Malignant neoplasm of the ovary attracts ICD-10-AM code C56 or D39.1.
(d) In the application of this Statement of Principles, the definition of "malignant neoplasm of the ovary" 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 ovary and death from malignant neoplasm of the ovary 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 ovary or death from malignant neoplasm of the ovary with the circumstances of a person’s relevant service is:

   (a) for epithelial ovarian cancer only,

      (i) being nulliparous at the time of the clinical onset of malignant neoplasm of the ovary; or

      (ii) having hormone replacement therapy for at least five consecutive years before the clinical onset of malignant neoplasm of the ovary, and where the use of hormone replacement therapy has ceased, the clinical onset of malignant neoplasm of the ovary has occurred within ten years of that period; or

   (b) being obese for at least five years before the clinical onset of malignant neoplasm of the ovary; or

   (c) for mucinous ovarian tumours 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 ovary; or

   (d) an inability to undertake any physical activity greater than three METs for at least ten consecutive years within the 30 years before the clinical onset of malignant neoplasm of the ovary; or
(e) an inability to consume at least 400 grams of vegetables per week for a period of at least five consecutive years within the 25 years before the clinical onset of malignant neoplasm of the ovary; or

(f) applying talc to the perineal area on more days than not, for a period of at least five years, before the clinical onset of malignant neoplasm of the ovary; or

(g) inhaling respirable asbestos fibres in an enclosed space for a cumulative period of at least 2000 hours before the clinical onset of malignant neoplasm of the ovary:
   (i) at the time material containing asbestos fibres was being applied, removed, dislodged, cut or drilled; and
   (ii) the first inhalation of asbestos fibres commenced at least ten years,

   before the clinical onset of malignant neoplasm of the ovary; or

(h) having endometriosis for at least five years before the clinical onset of malignant neoplasm of the ovary; or

(i) having received a cumulative equivalent dose of 0.05 Sievert of atomic radiation to the ovary where this dose was accumulated at least five years before the clinical onset of malignant neoplasm of the ovary; or

(j) having received a cumulative dose of at least 0.05 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 malignant neoplasm of the ovary; or

(k) inability to obtain appropriate clinical management for malignant neoplasm of the ovary.

Factors that apply only to material contribution or aggravation

7. Paragraph 6(k) applies only to material contribution to, or aggravation of, malignant neoplasm of the ovary where the person’s malignant neoplasm of the ovary 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:

"atomic radiation" means ionising radiation excluding:
(a) natural background radiation;
(b) therapeutic radiation; and
(c) radiation from diagnostic procedures;

"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 = \( \frac{W}{H^2} \) and where:
W is the person's weight in kilograms and
H is the person's height in metres;

"cumulative equivalent dose" means the total equivalent dose of radiation from all types of ionising radiation. It accounts for the differences in biological effectiveness of various types of radiation and allows doses from different radiations to be combined. Each component is calculated by multiplying the absorbed dose in a particular tissue or organ for a given type of radiation by the radiation weighting factor for that radiation. The unit of equivalent dose is the Sievert;

"death from malignant neoplasm of the ovary" 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 ovary;

"hormone replacement therapy" means administration of oestrogen preparations often in combination with progesterone to offset a hormone deficiency following surgically induced or naturally occurring menopause;

"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), Sixth Edition, effective date of 1 July 2008, copyrighted by the National Centre for Classification in Health, Sydney, NSW, and having ISBN 978 1 74210 016 6;
"MET" means 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;

"nulliparous" means never having experienced a gestation period of at least 20 weeks;

"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.

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 11 November 2009.
Dated this twenty-eighth day of October 2009

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

KEN DONALD
CHAIRPERSON