Statement of Principles
concerning

EXTRINSIC ALLERGIC ALVEOLITIS

No. 87 of 2011

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 extrinsic allergic alveolitis No. 87 of 2011.

Determination

2. The Repatriation Medical Authority under subsection 196B(2) and (8) of the Veterans’ Entitlements Act 1986 (the VEA):
   (a) revokes Instrument No. 57 of 1997 concerning extrinsic allergic alveolitis; and
   (b) determines in its place this Statement of Principles.

Kind of injury, disease or death

3. (a) This Statement of Principles is about extrinsic allergic alveolitis and death from extrinsic allergic alveolitis.

   (b) For the purposes of this Statement of Principles, "extrinsic allergic alveolitis" (also known as hypersensitivity pneumonitis) means an immunologically mediated inflammation of the lung parenchyma involving mainly the alveoli and terminal bronchioles, which develops secondary to repeated inhalation, by a sensitised subject, of any one of a variety of antigens. Examples include farmer’s lung, bird-fancier’s lung, ventilation pneumonitis and woodworker’s lung. The inflammation often organises into granulomas and may progress to fibrosis in chronic
cases. This definition excludes hypersensitivity pneumonitis resulting from antigen exposure by means other than inhalation, such as ingested drugs.

(c) Extrinsic allergic alveolitis attracts ICD-10-AM code J67.
(d) In the application of this Statement of Principles, the definition of "extrinsic allergic alveolitis" 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 extrinsic allergic alveolitis and death from extrinsic allergic alveolitis 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 extrinsic allergic alveolitis or death from extrinsic allergic alveolitis with the circumstances of a person’s relevant service is:

(a) inhaling, from an antigenic source, the specific antigen responsible for the extrinsic allergic alveolitis, before the clinical onset of extrinsic allergic alveolitis; or

(b) inhaling, from an antigenic source, the specific antigen responsible for the extrinsic allergic alveolitis, within the 30 days before the clinical worsening of extrinsic allergic alveolitis; or

(c) inability to obtain appropriate clinical management for extrinsic allergic alveolitis.

Factors that apply only to material contribution or aggravation

7. Paragraphs 6(b) to 6(c) apply only to material contribution to, or aggravation of, extrinsic allergic alveolitis where the person’s extrinsic allergic alveolitis 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:

"antigen" means a substance which is capable of inducing an immune response and reacting with the specific antibody or specifically sensitised T-lymphocytes which are the products of that response. Antigens may be soluble substances, such as toxins and foreign proteins, or particulate such as bacteria and tissue cells. The major categories of antigens causing extrinsic allergic alveolitis are microbial agents, animal proteins and low molecular weight chemicals (haptens). Microbial contamination of various inhaled dusts is the commonest source of antigens;

"an antigenic source" means the source of the antigen responsible for causing extrinsic allergic alveolitis. Examples of antigenic sources include:

(a) animal dust, dander or hair particles;
(b) bird droppings or feathers;
(c) coffee bean dust;
(d) compost dust contaminated with micro-organisms;
(e) detergent powder;
(f) dried grasses and leaves used in thatching contaminated with micro-organisms;
(g) dust from tea plants;
(h) fertilizer contaminated with micro-organisms;
(i) fish meal dust;
(j) metalworking fluid contaminated with micro-organisms;
(k) mouldy barley;
(l) mouldy cheese;
(m) mouldy corkbark dust;
(n) mouldy grapes;
(o) mouldy hay, grain or silage;
(p) mouldy timber dust;
(q) mouldy straw dust;
(r) mouldy sugar cane dust;
(s) mouldy tobacco;
(t) mushroom compost contaminated with micro-organisms;
(u) paprika pods dust contaminated with micro-organisms;
(v) Pauli’s reagent containing sodium diazobenzenesulphate;
(w) pituitary snuff;
(x) polyurethane varnishes and lacquers containing toluene diisocyanate or methylene diphenyl diisocyanate;
(y) heated epoxy resin or dyes containing phthalic anhydride;
(z) sauna water contaminated with micro-organisms;
(aa) sewage sludge contaminated with micro-organisms;
(bb) spores from *Lycoperdon* puffballs;
(cc) urine from laboratory rats;
(dd) wheat flour infested with the wheat weevil; or
(ee) wood dust contaminated with micro-organisms;

"death from extrinsic allergic alveolitis" in relation to a person includes death from a terminal event or condition that was contributed to by the person’s extrinsic allergic alveolitis;

"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), Seventh Edition, effective date of 1 July 2010, copyrighted by the National Centre for Classification in Health, Sydney, NSW, and having ISBN 978 1 74210 154 5;

"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;

"the specific antigen responsible for the extrinsic allergic alveolitis" means the antigen which the available clinical or laboratory evidence implicates as the cause of extrinsic allergic alveolitis in the patient.

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 13 July 2011.
Dated this  \textit{first} day of  \textit{July} 2011

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

KEN DONALD
CHAIRPERSON