Statement of Principles
concerning
POLYARTERITIS NODOSA
No. 12 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 polyarteritis nodosa No. 12 of 2011.

Determination
2. The Repatriation Medical Authority under subsection 196B(3) and (8) of the Veterans’ Entitlements Act 1986 (the VEA):
(a) revokes Instrument No. 158 of 1996 concerning polyarteritis nodosa;
and
(b) determines in its place this Statement of Principles.

Kind of injury, disease or death
3. (a) This Statement of Principles is about polyarteritis nodosa and death from polyarteritis nodosa.

(b) For the purposes of this Statement of Principles, "polyarteritis nodosa" means a necrotising inflammation of medium-sized or small arteries, without vasculitis in arterioles, capillaries or venules or glomerulonephritis. This definition excludes microscopic polyangiitis, Churg-Strauss syndrome and polyangiitis overlap syndrome.

(c) Polyarteritis nodosa attracts ICD-10-AM code M30.0.

(d) In the application of this Statement of Principles, the definition of "polyarteritis nodosa" 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 polyarteritis nodosa and death from polyarteritis nodosa 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, polyarteritis nodosa or death from polyarteritis nodosa is connected with the circumstances of a person’s relevant service is:

(a) being infected with hepatitis B virus at the time of the clinical onset of polyarteritis nodosa; or

(b) being infected with human immunodeficiency virus at the time of the clinical onset of polyarteritis nodosa; or

(c) being infected with hepatitis B virus at the time of the clinical worsening of polyarteritis nodosa; or

(d) being infected with human immunodeficiency virus at the time of the clinical worsening of polyarteritis nodosa; or

(e) inability to obtain appropriate clinical management for polyarteritis nodosa.

Factors that apply only to material contribution or aggravation

7. Paragraphs 6(c) to 6(e) apply only to material contribution to, or aggravation of, polyarteritis nodosa where the person’s polyarteritis nodosa 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:

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

"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) 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 5 January 2011.

Dated this fourteenth day of December 2010

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

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KEN DONALD  
CHAIRPERSON