Statement of Principles
concerning

RHEUMATIC HEART DISEASE

No. 19 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 rheumatic heart disease No. 19 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. 93 of 1995 concerning rheumatic heart disease;
   and
   (b) determines in its place this Statement of Principles.

Kind of injury, disease or death
3. (a) This Statement of Principles is about rheumatic heart disease and death from rheumatic heart disease.
   (b) For the purposes of this Statement of Principles, "rheumatic heart disease" means a clinically or echocardiographically documented cardiac disease, characterised by irreversible scarring and deformity of individual or multiple heart valves that is due to inflammation of valve tissues during acute rheumatic fever, and that causes valvular regurgitation or stenosis. This definition includes rheumatic stenosis and/or regurgitation of the mitral, aortic, pulmonary and/or tricuspid valves, chronic rheumatic myocarditis, chronic rheumatic pericarditis and rheumatic carditis of insidious onset. This definition excludes acute carditis that occurs during an initial episode or recurrent attack of acute rheumatic fever.
(c) Rheumatic heart disease attracts ICD-10-AM code I05, I06, I07, I08 or I09.

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

(a) having a primary or recurrent episode of acute rheumatic fever at least three months before the clinical onset of rheumatic heart disease; or

(b) having a group A beta-haemolytic streptococcal infection of the skin or the pharynx at least three months before the clinical onset of rheumatic heart disease; or

(c) having a recurrent episode of acute rheumatic fever within the ten years before the clinical worsening of rheumatic heart disease; or

(d) having a group A beta-haemolytic streptococcal infection of the skin or the pharynx within the ten years before the clinical worsening of rheumatic heart disease; or

(e) being pregnant at the time of the clinical worsening of rheumatic heart disease; or

(f) inability to obtain appropriate clinical management for rheumatic heart disease.
Factors that apply only to material contribution or aggravation

7. Paragraphs 6(c) to 6(f) apply only to material contribution to, or aggravation of, rheumatic heart disease where the person’s rheumatic heart disease 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 rheumatic heart disease" in relation to a person includes death from a terminal event or condition that was contributed to by the person’s rheumatic heart disease;

"group A beta-haemolytic streptococcal infection" means positive throat culture of group A beta-haemolytic Streptococci, or serological documentation of elevated or rising titres of anti-streptolysin O (ASO), anti-deoxyribonuclease B (anti-DNase B) or other streptococcal antibody, or rapid antigen test for group A Streptococci, usually occurring with clinical evidence of pharyngitis or pyoderma, and excludes colonisation of the affected site;

"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.

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 30 March 2011.

Dated this Seventeenth day of March 2011

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

KEN DONALD
CHAIRPERSON