Statement of Principles
centering

MALIGNANT NEOPLASM OF THE
BLADDER

No. 96 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 malignant neoplasm of the bladder No. 96 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. 95 of 2007 concerning malignant neoplasm of the bladder; 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 bladder and death from malignant neoplasm of the bladder.
   (b) For the purposes of this Statement of Principles, "malignant neoplasm of the bladder" means a primary malignancy arising from epithelial tissues of the urinary bladder, including malignant neoplasm of the ureteric orifice of the bladder. This definition includes transitional cell carcinomas of urothelial origin and carcinoma-in situ, but excludes soft tissue sarcoma, non-Hodgkin's lymphoma and Hodgkin's lymphoma.
Malignant neoplasm of the bladder attracts ICD-10-AM code C67 or D09.0.

In the application of this Statement of Principles, the definition of "malignant neoplasm of the bladder" 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 bladder and death from malignant neoplasm of the bladder 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 bladder or death from malignant neoplasm of the bladder with the circumstances of a person’s relevant service is:

   (a) 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 bladder, where smoking commenced at least ten years before the clinical onset of malignant neoplasm of the bladder; or

   (b) having received a cumulative equivalent dose of at least 0.1 sievert of ionising radiation to the bladder at least five years before the clinical onset of malignant neoplasm of the bladder; or

   (c) inhaling fumes containing high concentrations of polycyclic aromatic hydrocarbons, or ingesting polycyclic aromatic hydrocarbons, in the specified circumstances for a cumulative period of at least 5000 hours before the clinical onset of malignant neoplasm of the bladder, where the first exposure occurred at least ten years before the clinical onset of malignant neoplasm of the bladder; or

   (d) being heavily exposed to diesel engine exhaust for a cumulative period of at least 15,000 hours, at least ten years before the clinical onset of malignant neoplasm of the bladder; or

   (e) inhaling fumes containing a high concentration of an aromatic amine from the specified list, or ingesting or having cutaneous contact with an aromatic amine from the specified list, excluding exposure to cigarette
smoking and hair dyes, for a cumulative period of at least 250 days within a continuous period of five years before the clinical onset of malignant neoplasm of the bladder, where the first exposure occurred at least ten years before the clinical onset of malignant neoplasm of the bladder; or

(f) inhaling fumes containing a high concentration of an aromatic amine while working in the rubber manufacturing industry, magenta production, or auramine production industries for a cumulative period of at least 5000 hours before the clinical onset of malignant neoplasm of the bladder, where the first exposure occurred at least ten years before the clinical onset of malignant neoplasm of the bladder; or

(g) working as a hairdresser or barber for a cumulative period of at least 10,000 hours before the clinical onset of malignant neoplasm of the bladder, where the first exposure occurred at least ten years before the clinical onset of malignant neoplasm of the bladder; or

(h) working as a painter for a cumulative period of at least 5000 hours before the clinical onset of malignant neoplasm of the bladder, where the first exposure occurred at least ten years before the clinical onset of malignant neoplasm of the bladder; or

(i) inhaling, ingesting or having cutaneous contact with tetrachloroethylene for a cumulative period of at least 5000 hours before the clinical onset of malignant neoplasm of the bladder, where the first exposure occurred at least ten years before the clinical onset of malignant neoplasm of the bladder; or

(j) being exposed to arsenic as specified before the clinical onset of malignant neoplasm of the bladder, where the first exposure to arsenic occurred at least ten years before the clinical onset of malignant neoplasm of the bladder; or

(k) ingesting aristolochic acid as specified at least five years before the clinical onset of malignant neoplasm of the bladder; or

(l) having renal stone disease or a bladder stone at least five years before the clinical onset of malignant neoplasm of the bladder; or

(m) having a chronic renal condition, of sufficient severity to require dialysis or renal transplantation, at least one year before the clinical onset of malignant neoplasm of the bladder; or

(n) consuming a total of at least 100 grams of phenacetin at least five years before the clinical onset of malignant neoplasm of the bladder; or
(o) being treated with systemic cyclophosphamide or systemic ifosfamide, at least five years before the clinical onset of malignant neoplasm of the bladder; or

(p) being treated with chlornaphazine at least five years before the clinical onset of malignant neoplasm of the bladder; or

(q) being treated with pioglitazone, or a medication containing pioglitazone, for a continuous period of at least one year, within the ten years before the clinical onset of malignant neoplasm of the bladder; or

(r) having diabetes mellitus for at least five years before the clinical onset of malignant neoplasm of the bladder; or

(s) having an infection of the bladder with *Schistosoma haematobium* before the clinical onset of malignant neoplasm of the bladder; or

(t) having an indwelling bladder catheter or other foreign body in the bladder for a continuous period of at least ten years, excepting routine catheter changes, before the clinical onset of malignant neoplasm of the bladder; or

(u) having neurogenic bladder dysfunction, or spinal cord injury (paraplegia or quadriplegia) within the one year before the clinical onset of malignant neoplasm of the bladder; or

(v) undergoing transurethral resection for treatment of benign prostatic hyperplasia at least five years before the clinical onset of malignant neoplasm of the bladder; or

(w) inability to obtain appropriate clinical management for malignant neoplasm of the bladder.

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

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

"an aromatic amine from the specified list" means:
(a) 2-naphthylamine;
(b) 4-aminobiphenyl;
(c) 4-chloro-ortho-toluidine;
(d) benzidine;
(e) benzidine-based dyes; or
(f) ortho-toluidine;

"an enclosed space" means a substantially enclosed area, for example the interior of a building, ship or aircraft, a covered workshop or factory;

"being exposed to arsenic as specified" means:
(a) consuming drinking water with an average arsenic concentration of at least 50 micrograms per litre for a cumulative period of at least ten years;
(b) consuming drinking water resulting in a cumulative total arsenic exposure equivalent to having consumed drinking water containing at least 50 micrograms per litre for at least ten years; or
(c) having clinical evidence of chronic arsenic toxicity;

"being heavily exposed to diesel engine exhaust" means:
(a) being an occupant in an enclosed diesel-powered vehicle cabin contaminated with diesel fumes;
(b) working in an enclosed space where diesel-powered engines or motors are being operated; or
(c) repairing and/or servicing diesel engines;

"cumulative equivalent dose" means the total dose of ionising radiation received by the particular organ or tissue. The formula used to calculate the cumulative equivalent dose allows doses from multiple types of ionising radiation to be combined, by accounting for their differing biological effect. The unit of equivalent dose is the sievert. For the purposes of this Statement of Principles, the calculation of cumulative equivalent dose excludes doses received from normal background radiation, but includes therapeutic radiation, diagnostic radiation, cosmic radiation at high altitude, radiation from occupation-related sources and radiation from nuclear explosions or accidents;

"death from malignant neoplasm of the bladder" 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 bladder;

"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),
"in the specified circumstances" means:
(a) while working with creosote;
(b) while working with coal-tar pitch, coal-tar or asphalt;
(c) while working in the coal gasification, fuel coke production, carbon electrode manufacturing or the coal-tar distillation industries;
(d) while being exposed to coke oven emissions;
(e) while being exposed to soot during chimney sweeping;
(f) while working in the aluminium production industry; or
(g) while working in iron or steel foundries;

"ingesting aristolochic acid as specified" means:
(a) consuming a total of at least 100 grams of plant material of the genus Aristolochia as a constituent of herbal medication; or
(b) consuming plant material of the genus Aristolochia or foods containing plant material of the genus Aristolochia, as part of the regular diet for a period of at least 15 months;

"neurogenic bladder dysfunction" means impairment of normal bladder functioning due to disease or injury of the central nervous system or peripheral nerves involved in the control of micturition, leading to an inability to pass urine;

"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 kilograms of smoking tobacco by weight. Tobacco products means either cigarettes, pipe tobacco or cigars smoked, alone or in any combination;

"phenacetin" means an aniline derivative that has analgesic and antipyretic properties, that was formerly used as a constituent of several over-the-counter compound analgesic medications, including Bex or Vincent's powder, Empirin Compound and Bromo seltzer. Phenacetin is also known as acetophenetidin, aceto-p-phenetidide, acetylphenetidin, phenacetinum, N-(4-ethoxyphenyl) acetamide, p-ethoxyacetanilide, or CAS 62-44-2;

"polycyclic aromatic hydrocarbons" means hydrocarbons with three or more condensed aromatic rings in which certain carbon atoms are common to two or three rings. Polycyclic aromatic hydrocarbons occur in crude oil, shale oil and coal tars, and can be formed during the combustion of organic material or during high temperature processing of crude oil, coal, coke or other industrial carbon compounds;
"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;

"working as a hairdresser or barber" means the cutting and styling of hair, including the application of hair colourants and other chemicals;

"working as a painter" means applying paints, including solvent- or water-based conventional paints, spray paints, varnishes, enamels, lacquers, water-emulsion and solution finishes, nonaqueous dispersions or organosols, plastisols, and powder coatings, during the course of activities such as building, maintenance and construction, interior and exterior decoration, artistic painting, and wood and metal painting. This definition includes mixed activities in which application of paints occurs with other tasks such as wallpapering and plastering. This definition includes activities that are preparatory to painting, such as mixing paints, maintaining painting equipment, and background preparation of surfaces for application of paint.

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 31 August 2011.

Dated this nineteenth day of August 2011

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

KEN DONALD
CHAIRPERSON