Statement of Principles
concerning

MALIGNANT NEOPLASM OF THE CERVIX

No. 39 of 2012

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 cervix No. 39 of 2012.

Determination

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

(a) revokes Instrument No. 41 of 1997 concerning malignant neoplasm of the cervix; 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 cervix and death from malignant neoplasm of the cervix.

(b) For the purposes of this Statement of Principles, "malignant neoplasm of the cervix" means a primary invasive carcinoma or cervical intraepithelial neoplasia grade III (carcinoma in situ or severe cervical dysplasia) arising from the cells of the cervix uteri. This definition excludes cervical intraepithelial neoplasia grades I and II, mild or moderate cervical dysplasia, squamous intraepithelial lesion (SIL), melanoma in situ of the cervix, soft tissue sarcoma, non-Hodgkin's lymphoma and Hodgkin's lymphoma.
(c) Malignant neoplasm of the cervix attracts ICD-10-AM code C53, D06 or N87.2.

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

(a) using a combined oral contraceptive pill for a continuous period of at least three years where:

   (i) use of the combined oral contraceptive pill commenced at least five years before the clinical onset of malignant neoplasm of the cervix; and

   (ii) where use of the combined oral contraceptive pill has ceased, the clinical onset of malignant neoplasm of the cervix has occurred within 15 years of cessation; or

(b) 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 cervix, and where smoking has ceased, the clinical onset of malignant neoplasm of the cervix has occurred within 15 years of cessation; or

(c) acquiring persistent infection of the cervical epithelium with an oncogenic human papilloma virus before the clinical onset of malignant neoplasm of the cervix; or

(d) being infected with human immunodeficiency virus before the clinical onset of malignant neoplasm of the cervix; or

(e) being treated with systemic immunosuppressive therapy for organ transplantation or stem cell transplantation before the clinical onset of malignant neoplasm of the cervix; or

(f) being treated concurrently with systemic corticosteroids and immunomodulatory agents for systemic lupus erythematosus within the
five years before the clinical onset of malignant neoplasm of the cervix; or

(g) being prevented from accessing clinical screening for cervical intraepithelial neoplasia in accordance with contemporary medical standards at the time, within the ten years before the clinical onset of malignant neoplasm of the cervix, and where:

(i) if clinical screening has been resumed in the interim, there has been no normal test result; and

(ii) the opportunity for subsequent appropriate clinical screening has not been declined; or

(h) inability to obtain appropriate clinical management for malignant neoplasm of the cervix.

Factors that apply only to material contribution or aggravation

7. Paragraph 6(h) applies only to material contribution to, or aggravation of, malignant neoplasm of the cervix where the person’s malignant neoplasm of the cervix 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 oncogenic human papilloma virus (HPV)" means HPV type 16, 18, 26, 31, 33, 35, 39, 45, 51, 52, 56, 58, 59, 66, 68, 73 or 82;

"clinical screening for cervical intraepithelial neoplasia" means testing to detect premalignant cervical lesions by way of Pap smears on a regular basis;

"combined oral contraceptive pill" means an oral contraceptive compound containing both oestrogen and progestogen;

"death from malignant neoplasm of the cervix" 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 cervix;

"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;

"immunomodulatory agents" means methotrexate, azathioprine, 6-mercaptopurine, cyclosporine or a tumour necrosis factor alpha antagonist;
"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 7.3 kilograms 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) British nuclear test defence service under the VEA;
(e) warlike service under the MRCA; or
(f) 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 July 2012.

Dated this twenty-first day of June 2012

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

KEN DONALD
CHAIRPERSON