



Australian Government
Repatriation Medical Authority

Statement of Principles
concerning
**CHRONIC VENOUS INSUFFICIENCY OF
THE LOWER LIMB**

No. 29 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 chronic venous insufficiency of the lower limb No. 29 of 2012.

Determination

2. This Statement of Principles is determined by the Repatriation Medical Authority under subsection **196B(2)** of the *Veterans' Entitlements Act 1986* (the VEA).

Kind of injury, disease or death

3. (a) This Statement of Principles is about **chronic venous insufficiency of the lower limb** and **death from chronic venous insufficiency of the lower limb**.
(b) For the purposes of this Statement of Principles, "**chronic venous insufficiency of the lower limb**" means chronic impairment of venous blood flow or venous return affecting one or both of the lower limbs. Clinical manifestations may include oedema, skin trophic changes and ulcers affecting the lower limb; and/or symptoms attributable to venous dysfunction, such as aching, heaviness, feelings of swelling and itching. This definition includes lipodermatosclerosis, but excludes varicose veins of the lower limb.

- (c) Chronic venous insufficiency of the lower limb attracts ICD-10-AM code I87.0 or I87.2.
- (d) In the application of this Statement of Principles, the definition of "**chronic venous insufficiency of the lower limb**" 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 **chronic venous insufficiency of the lower limb** and **death from chronic venous insufficiency of the lower limb** 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 **chronic venous insufficiency of the lower limb** or **death from chronic venous insufficiency of the lower limb** with the circumstances of a person's relevant service is:
 - (a) having deep vein thrombosis within a deep vein draining the affected lower limb before the clinical onset of chronic venous insufficiency of the lower limb; or
 - (b) having chronic complete or partial obstruction of a vein draining the affected lower limb before the clinical onset of chronic venous insufficiency of the lower limb; or
 - (c) being pregnant at the time of the clinical onset of chronic venous insufficiency of the lower limb; or
 - (d) having varicose veins of the affected lower limb at the time of the clinical onset of chronic venous insufficiency of the lower limb; or
 - (e) non-ambulatory standing for at least four hours per day, on more days than not, for a continuous period of at least the five years before the clinical onset of chronic venous insufficiency of the lower limb; or
 - (f) having chronic dysfunction of the calf muscle pump in the affected lower limb due to musculoskeletal or neurological disease or injury at the time of the clinical onset of chronic venous insufficiency of the lower limb; or
 - (g) being obese at the time of the clinical onset of chronic venous insufficiency of the lower limb; or

- (h) having an acquired arteriovenous fistula involving the blood vessels supplying the affected lower limb at the time of the clinical onset of chronic venous insufficiency of the lower limb; or
- (i) having trauma to a valve in a vein of the affected lower limb causing dysfunction or incompetence of that valve, before the clinical onset of chronic venous insufficiency of the lower limb; or
- (j) having deep vein thrombosis within a deep vein draining the affected lower limb before the clinical worsening of chronic venous insufficiency of the lower limb; or
- (k) having chronic complete or partial obstruction of a vein draining the affected lower limb before the clinical worsening of chronic venous insufficiency of the lower limb; or
- (l) being pregnant at the time of the clinical worsening of chronic venous insufficiency of the lower limb; or
- (m) having varicose veins of the affected lower limb at the time of the clinical worsening of chronic venous insufficiency of the lower limb; or
- (n) non-ambulatory standing for at least four hours per day, on more days than not, for a continuous period of at least the five years before the clinical worsening of chronic venous insufficiency of the lower limb; or
- (o) having chronic dysfunction of the calf muscle pump in the affected lower limb due to musculoskeletal or neurological disease or injury at the time of the clinical worsening of chronic venous insufficiency of the lower limb; or
- (p) being obese at the time of the clinical worsening of chronic venous insufficiency of the lower limb; or
- (q) having an acquired arteriovenous fistula involving the blood vessels supplying the affected lower limb at the time of the clinical worsening of chronic venous insufficiency of the lower limb; or
- (r) having trauma to a valve in a vein of the affected lower limb causing dysfunction or incompetence of that valve, before the clinical worsening of chronic venous insufficiency of the lower limb; or
- (s) inability to obtain appropriate clinical management for chronic venous insufficiency of the lower limb.

Factors that apply only to material contribution or aggravation

7. Paragraphs **6(j) to 6(s)** apply only to material contribution to, or aggravation of, chronic venous insufficiency of the lower limb where the person's chronic venous insufficiency of the lower limb 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:

"a deep vein draining the affected lower limb" means a vein contained within the deep fascia of the limb or pelvis (such as the veins of the calf pump, popliteal veins, femoral veins and iliac veins), which drains the affected limb;

"being obese" means an increase in body weight by way of fat accumulation which results in a Body Mass Index (BMI) of thirty or greater.

The $BMI = W/H^2$ and where:

W is the person's weight in kilograms and

H is the person's height in metres;

"death from chronic venous insufficiency of the lower limb" in relation to a person includes death from a terminal event or condition that was contributed to by the person's chronic venous insufficiency of the lower limb;

"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) 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.

Date of effect

10. This Instrument takes effect from 7 March 2012.

Dated this *twenty-fourth* day of *February* 2012

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

KEN DONALD
CHAIRPERSON