Amendment Statement of Principles
concerning
SUBSTANCE USE DISORDER
No. 31 of 2014
for the purposes of the
Veterans’ Entitlements Act 1986
and
Military Rehabilitation and Compensation Act 2004

1. This Instrument may be cited as Amendment Statement of Principles concerning substance use disorder No. 31 of 2014.

   (A) changing the name of this Instrument to "Statement of Principles concerning substance use disorder No. 3 of 2009";
   (B) replacing the phrases "drug dependence and drug abuse" and "drug dependence or drug abuse" with the words "substance use disorder" wherever these phrases appear in this instrument, with the exception of clause 2(a);
   (C) replacing the definition of "drug dependence and drug abuse" in clause 3 with the definition of "substance use disorder" as follows:

"substance use disorder" means a mental disorder that meets the following diagnostic criteria (derived from DSM-5):

A problematic pattern of substance use leading to clinically significant impairment or distress, as manifested by at least four of the following criteria, occurring within a 12-month period:

(1) Substances are often taken in larger amounts or over a longer period than was intended.

(2) There is a persistent desire or unsuccessful efforts to cut down or control substance use.
A great deal of time is spent in activities necessary to obtain the substance, use the substance, or recover from its effects.

Craving, or a strong desire or urge to use substances.

Recurrent substance use resulting in a failure to fulfill major role obligations at work, school, or home.

Continued substance use despite having persistent or recurrent social or interpersonal problems caused or exacerbated by the effects of substances.

Important social, occupational, or recreational activities are given up or reduced because of substance use.

Recurrent substance use in situations in which it is physically hazardous.

Continued substance use despite knowledge of having a persistent or recurrent physical or psychological problem that is likely to have been caused or exacerbated by the substance.

Tolerance, as defined by either of the following:

(i) A need for markedly increased amounts of substances to achieve intoxication or desired effect; or

(ii) A markedly diminished effect with continued use of the same amount of an substance.

[Note: This criterion is not considered to be met for those individuals taking substances solely under appropriate medical supervision.]

For substances other than hallucinogens or inhalants, withdrawal, as manifested by either of the following:

(i) The characteristic substance withdrawal syndrome; or

(ii) Substances (or a closely related substance) are taken to relieve or avoid withdrawal symptoms.

[Note: This criterion is not considered to be met for those individuals taking substances solely under appropriate medical supervision.]

The definition for substance use disorder excludes alcohol use disorder and acute substance intoxication in the absence of substance use disorder.

(D) revising existing factor "(e)" in clause 6 as follows:

"(e) having a medical or psychiatric condition for which a substance was medically prescribed, at the time of the clinical onset of substance use disorder, where the substance use disorder involves one or more agents from the same pharmacological class as the prescribed medication; or"

(E) revising the existing definition of "a clinically significant psychiatric condition" in clause 9 as follows:

"a clinically significant psychiatric condition" means a specified disorder of mental health, which is of sufficient severity to warrant...
ongoing management, which may involve regular visits (for example, at least monthly) to a psychiatrist, counsellor or general practitioner;(;F) inserting definitions of "a specified disorder of mental health", "DSM-5" and "substance" in clause 9 as follows:

"a specified disorder of mental health" means:

(a) a bipolar disorder or related disorder;
(b) a depressive disorder;
(c) a disruptive, impulse-control or conduct disorder;
(d) a dissociative disorder;
(e) a feeding disorder or eating disorder;
(f) a neurocognitive disorder;
(g) a neurodevelopmental disorder;
(h) a paraphilic disorder;
(i) a personality disorder;
(j) a schizophrenia spectrum disorder or other psychotic disorder;
(k) a sexual dysfunction;
(l) a sleep-wake disorder;
(m) a somatic symptom disorder or related disorder;
(n) a trauma and stressor-related disorder;
(o) an anxiety disorder;
(p) an obsessive compulsive disorder or related disorder; or
(q) gender dysphoria;(;)

"DSM-5" means the American Psychiatric Association: Diagnostic and Statistical Manual of Mental Disorders, Fifth Edition. Arlington, VA, American Psychiatric Association, 2013;(; and

"substance" means any of the following substances, alone or in combination:

(a) amphetamine-type substances;
(b) cannabis and cannabis derivatives;
(c) cocaine;
(d) hallucinogens, including phencyclidine and pharmacologically similar substances;
(e) hydrocarbon-based inhalants;
(f) opioids, and opioid derivatives and synthetic opioids with morphine-like effects;
(g) sedatives, hypnotics and anxiolytics, including barbiturates, nonbarbiturate sedatives and benzodiazepines, and tranquillisers with similar effect; or
(h) tobacco;(; and

(G) deleting the definitions of "drug" and "DSM-IV-TR" in clause 9.

3. The amendments made by this instrument apply to all matters to which Instrument No. 3 of 2009, section 120A of the Veterans' Entitlements Act 1986 and section 338 of the Military Rehabilitation and Compensation Act 2004 apply.

4. The amendments made by this instrument take effect from 26 March 2014.
The Common Seal of the
Repatriation Medical Authority was affixed at the direction of:

PROFESSOR NICHOLAS SAUNDERS AO
CHAIRPERSON