

Statement of Principles

 concerning

LIPOMA

(Reasonable Hypothesis)

(No. 100 of 2015)

The Repatriation Medical Authority determines the following Statement of Principles under subsection 196B(2) of the *Veterans’ Entitlements Act 1986*.

Dated 21 August 2015

The Common Seal of the
Repatriation Medical Authority
was affixed to this instrument
at the direction of:



Professor Nicholas Saunders AO

Chairperson

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1 Definitions 6

1. Name

This is the Statement of Principles concerning *lipoma**(Reasonable Hypothesis)* (No. 100 of ).

1. Commencement

 This instrument commences on **21 September 2015**.

1. Authority

This instrument is made under subsection 196B(2) of the *Veterans’ Entitlements Act 1986*.

1. Revocation

The Statement of Principles concerning lipoma No. 97 of 2007 made under subsection 196B(2) of the VEA is revoked.

1. Application

This instrument applies to a claim to which section 120A of the VEA or section 338 of the *Military Rehabilitation and Compensation Act 2004* applies.

1. Definitions

The terms defined in the Schedule 1 - Dictionary have the meaning given when used in this instrument.

1. Kind of injury, disease or death to which this Statement of Principles relates
	1. This Statement of Principles is about lipoma and death from lipoma.

*Meaning of* ***lipoma***

* 1. For the purposes of this Statement of Principles, lipoma:
		1. means a benign mesenchymal neoplasm composed of mature adipose cells in superficial subcutaneous tissues, and which is usually encapsulated; and
		2. excludes post-traumatic pseudolipoma or prolapse of adipose tissue.
	2. While lipoma attracts ICD‑10‑AM code D17, in applying this Statement of Principles the meaning of lipoma is that given in subsection (2).
	3. For subsection (3), a reference to an ICD‑10‑AM codeis a reference to the code assigned to a particular kind of injury or disease in *The International Statistical Classification of Diseases and Related Health Problems*, *Tenth Revision, Australian Modification* (ICD‑10‑AM), Ninth Edition, effective date of 1 July 2015, copyrighted by the Independent Hospital Pricing Authority, ISBN 978‑1‑76007‑020‑5.

*Death from* ***lipoma***

* 1. For the purposes of this Statement of Principles, lipoma,in relation to a person, includes death from a terminal event or condition that was contributed to by the person’s lipoma.

Note: ***terminal event*** is defined in the Schedule 1 – Dictionary.

1. Basis for determining the factors

The Repatriation Medical Authority is of the view that there is sound medical‑scientific evidence that indicates that lipoma and death from lipoma 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 MRCA.

Note: ***relevant service*** is defined in the Schedule 1 – Dictionary.

1. Factors that must exist

At least one of the following factors must as a minimum exist before it can be said that a reasonable hypothesis has been raised connecting lipoma or death from lipoma with the circumstances of a person’s relevant service:

* 1. for benign symmetrical lipomatosis only, having alcohol use disorder at the time of the clinical onset of lipoma;

Note: ***benign symmetrical lipomatosis*** is defined in the Schedule 1 - Dictionary.

* 1. for hepatic lipoma only, having hepatic steatosis or steatohepatitis at the time of the clinical onset of lipoma;

Note: ***hepatic steatosis*** is defined in the Schedule 1 - Dictionary.

* 1. inability to obtain appropriate clinical management for lipoma.
1. Relationship to service
	1. The existence in a person of any factor referred to in section 9 must be related to the relevant service rendered by the person.
	2. The factor set out in subsection 9(3) applies only to material contribution to, or aggravation of, lipoma where the person’s lipoma was suffered or contracted before or during (but did not arise out of) the person’s relevant service.
2. Factors referring to an injury or disease covered by another Statement of Principles

In this Statement of Principles:

* 1. if a factor referred to in section 9 applies in relation to a person; and
	2. that factor refers to an injury or disease in respect of which a Statement of Principles has been determined under subsection 196B(2) of the VEA;

then the factors in that Statement of Principles apply in accordance with the terms of that Statement of Principles as in force from time to time.

Schedule 1 - Dictionary

Note: See Section 6

1. Definitions
	1. In this instrument:
		1. ***benign symmetrical lipomatosis*** means a cutaneous condition characterised by multiple symmetrical fat deposits in the head, neck and shoulder girdle area. It is also known as multiple symmetrical lipomatosis or Madelung disease.
		2. ***hepatic steatosis*** means the accumulation of fat within the cells of the liver. It is also known as fatty liver.
		3. ***lipoma***—see subsection 7(2).
		4. ***MRCA*** means the *Military Rehabilitation and Compensation Act 2004*.
		5. ***relevant service*** means:
2. operational service under the VEA;
3. peacekeeping service under the VEA;
4. hazardous service under the VEA;
5. British nuclear test defence service under the VEA;
6. warlike service under the MRCA; or
7. non-warlike service under the MRCA.
	* 1. ***terminal event*** means the proximate or ultimate cause of death and includes the following:
			1. pneumonia;
			2. respiratory failure;
			3. cardiac arrest;
			4. circulatory failure; or
			5. cessation of brain function.
		2. ***VEA*** means the *Veterans' Entitlements Act 1986*.