Statement of Principles
concerning
MALIGNANT NEOPLASM OF THE ENDOMETRIUM
(Balance of Probabilities)
(No. 12 of 2016)

The Repatriation Medical Authority determines the following Statement of Principles under subsection 196B(3) of the Veterans’ Entitlements Act 1986.

Dated 4 March 2016

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

Professor Nicholas Saunders AO
Chairperson
Contents

1 Name ............................................................................................................................. 3
2 Commencement ............................................................................................................ 3
3 Authority ....................................................................................................................... 3
4 Revocation .................................................................................................................... 3
5 Application .................................................................................................................... 3
6 Definitions ..................................................................................................................... 3
7 Kind of injury, disease or death to which this Statement of Principles relates .......... 3
8 Basis for determining the factors ................................................................................. 4
9 Factors that must exist ............................................................................................... 4
10 Relationship to service ............................................................................................... 6
11 Factors referring to an injury or disease covered by another Statement of Principles ....................................................................................................................... 6

Schedule 1 - Dictionary ....................................................................................................... 7
1 Definitions ..................................................................................................................... 7
1 Name
This is the Statement of Principles concerning *malignant neoplasm of the endometrium (Balance of Probabilities)* (No. 12 of 2016).

2 Commencement
This instrument commences on 4 April 2016.

3 Authority
This instrument is made under subsection 196B(3) of the *Veterans’ Entitlements Act 1986*.

4 Revocation
The Statement of Principles concerning malignant neoplasm of the endometrium No. 100 of 2007 made under subsection 196B(3) of the VEA is revoked.

5 Application
This instrument applies to a claim to which section 120B of the VEA or section 339 of the *Military Rehabilitation and Compensation Act 2004* applies.

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

7 Kind of injury, disease or death to which this Statement of Principles relates

(1) This Statement of Principles is about malignant neoplasm of the endometrium and death from malignant neoplasm of the endometrium.

Meaning of *malignant neoplasm of the endometrium*

(2) For the purposes of this Statement of Principles, malignant neoplasm of the endometrium means:

(a) a primary malignant neoplasm arising from the cells of the mucous membrane that lines the uterine cavity; and
(b) includes carcinoma in situ and carcinosarcoma (also known as malignant mesodermal mixed tumour); and
(c) excludes malignant neoplasm of the cervix, carcinoid tumour, soft tissue sarcoma of the uterus, non-Hodgkin's lymphoma and Hodgkin's lymphoma.

(3) While malignant neoplasm of the endometrium attracts ICD-10-AM code C54.1, in applying this Statement of Principles the meaning of
malignant neoplasm of the endometrium is that given in subsection (2).


*Death from malignant neoplasm of the endometrium*

(5) For the purposes of this Statement of Principles, malignant neoplasm of the endometrium, 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 endometrium.

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

8 **Basis for determining the factors**

On the sound medical-scientific evidence available, the Repatriation Medical Authority is of the view that it is more probable than not that malignant neoplasm of the endometrium and death from malignant neoplasm of the endometrium can be related to relevant service rendered by veterans or members of the Forces under the VEA, or members under the MRCA.

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

9 **Factors that must exist**

At least one of the following factors must exist before it can be said that, on the balance of probabilities, malignant neoplasm of the endometrium or death from malignant neoplasm of the endometrium is connected with the circumstances of a person’s relevant service:

(1) for females aged over 35 years only, being nulliparous at the time of the clinical onset of malignant neoplasm of the endometrium;

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

(2) using oestrogen-only hormone replacement therapy for at least six months before the clinical onset of malignant neoplasm of the endometrium, and where the use of oestrogen-only hormone replacement therapy has ceased, the clinical onset of malignant neoplasm of the endometrium has occurred within 20 years of cessation;

Note: *oestrogen-only hormone replacement therapy* is defined in the Schedule 1 - Dictionary.

(3) having cyclical combined hormone replacement therapy for a continuous period of at least two years before the clinical onset of malignant neoplasm of the endometrium, and where the use of cyclical
combined hormone replacement therapy has ceased, the clinical onset of malignant neoplasm of the endometrium has occurred within five years of cessation;

Note: *cyclical combined hormone replacement therapy* is defined in the Schedule 1 - Dictionary.

(4) having polycystic ovary syndrome at the time of the clinical onset of malignant neoplasm of the endometrium;

Note: *polycystic ovary syndrome* is defined in the Schedule 1 - Dictionary.

(5) for post-menopausal females only, undergoing treatment with tamoxifen for a period of at least 12 months before the clinical onset of malignant neoplasm of the endometrium, and where treatment has ceased, the clinical onset of malignant neoplasm of the endometrium has occurred within ten years of that period;

(6) using the sequential oral contraceptive pill Oracon within the 20 years before the clinical onset of malignant neoplasm of the endometrium;

Note: *sequential oral contraceptive pill Oracon* is defined in the Schedule 1 - Dictionary.

(7) being overweight or obese for a period of at least ten years within the 20 years before the clinical onset of malignant neoplasm of the endometrium;

Note: *being overweight or obese* is defined in the Schedule 1 - Dictionary.

(8) an inability to undertake any physical activity greater than three METs for at least 20 years within the 30 years before the clinical onset of malignant neoplasm of the endometrium;

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

(9) having diabetes mellitus for at least ten years before the clinical onset of malignant neoplasm of the endometrium;

(10) for post-menopausal females with a history of a regular smoking habit as specified only, having not smoked for the ten years before the clinical onset of malignant neoplasm of the endometrium;

Note: *regular smoking habit as specified* is defined in the Schedule 1 - Dictionary.

(11) for carcinosarcoma only, having received a cumulative equivalent dose of at least 0.5 sievert of ionising radiation to the uterus at least five years before the clinical onset of malignant neoplasm of the endometrium; or

Note: *cumulative equivalent dose* is defined in the Schedule 1 - Dictionary.

(12) inability to obtain appropriate clinical management for malignant neoplasm of the endometrium.
10 **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(12) applies only to material contribution to, or aggravation of, malignant neoplasm of the endometrium where the person’s malignant neoplasm of the endometrium was suffered or contracted before or during (but did not arise out of) the person’s relevant service.

11 **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(3) 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

In this instrument:

*being overweight or obese* means having a Body Mass Index (BMI) of 25 or greater.

*BMI* means $\frac{W}{H^2}$ and where:

$W$ is the person's weight in kilograms; and

$H$ is the person's height in metres.

*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.

*cyclical combined hormone replacement therapy* means the administration of oestrogen combined with the cyclical administration of progestogen for less than 15 days during each treatment cycle, to combat surgically induced or naturally occurring menopause.

*malignant neoplasm of the endometrium*—see subsection 7(2).

*MET* means a unit of measurement of the level of physical exertion. 1 MET = 3.5 ml of oxygen/kg of body weight per minute, 1.0 kcal/kg of body weight per hour or resting metabolic rate.

*MRCA* means the *Military Rehabilitation and Compensation Act 2004*.

*nulliparous* means having never given birth to a viable infant.

*oestrogen-only hormone replacement therapy* means the continuous, cyclical or intermittent administration of unopposed oestrogen, including diethylstilbestrol, to combat surgically induced or naturally occurring menopause.

*pack-years of cigarettes, or the equivalent thereof in other tobacco products* means a calculation of consumption where one pack-year of cigarettes equals 20 tailor-made cigarettes per day for a period of one calendar year, or 7 300 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 mean cigarettes, pipe tobacco or cigars, smoked alone or in any combination.

**polycystic ovary syndrome** means a clinical symptom complex, also known as Stein-Leventhal syndrome, associated with polycystic ovaries and characterised by oligomenorrhea or amenorrhea, anovulation and hirsutism.

**regular smoking habit as specified** means having smoked at least ten pack-years of cigarettes, or the equivalent thereof in other tobacco products.

Note: **pack-years of cigarettes, or the equivalent thereof in other tobacco products** is also defined in the Schedule 1 - Dictionary.

**relevant service** means:

(a) eligible war service (other than operational service) under the VEA;
(b) defence service (other than hazardous service and British nuclear test defence service) under the VEA; or
(c) peacetime service under the MRCA.

**sequential oral contraceptive pill Oracon** means a contraceptive pill containing a potent oestrogen (0.1 g ethinyloestradiol) and a weak progestogen (25 mg dimethisterone), in which oestrogen was given alone for the first 16 days of the cycle, followed by five to seven days of combined oestrogen plus progestogen.

**terminal event** means the proximate or ultimate cause of death and includes the following:

(a) pneumonia;
(b) respiratory failure;
(c) cardiac arrest;
(d) circulatory failure; or
(e) cessation of brain function.

**VEA** means the **Veterans’ Entitlements Act 1986**.