



**Australian Government**  
**Repatriation Medical Authority**

**Statement of Principles**  
**concerning**  
**HAEMORRHOIDS**  
**(Balance of Probabilities)**  
**(No. 4 of 2017)**

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

Dated 20 December 2016

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

A handwritten signature in black ink, appearing to read 'N. Saunders'.

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 .....   | 5        |
| 11                                   | Factors referring to an injury or disease covered by another Statement of Principles..... | 5        |
| <b>Schedule 1 - Dictionary .....</b> |   | <b>6</b> |
| 1                                    | Definitions.....  | 6        |

**1 Name**

This is the Statement of Principles concerning *haemorrhoids (Balance of Probabilities)* (No. 4 of 2017).

**2 Commencement**

This instrument commences on 23 January 2017.

**3 Authority**

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

**4 Revocation**

The Statement of Principles concerning haemorrhoids No. 42 of 2008 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 haemorrhoids and death from haemorrhoids.

*Meaning of haemorrhoids*

- (2) For the purposes of this Statement of Principles, haemorrhoids means:
- (a) inflammation, bleeding, thrombosis, prolapse or symptomatic enlargement of the haemorrhoidal cushions; and
  - (b) excludes anorectal varices.
- (3) While haemorrhoids attracts ICD-10-AM code K64, O22.4 or O87.2, in applying this Statement of Principles the meaning of haemorrhoids is that given in subsection (2).
- (4) For subsection (3), a reference to an ICD-10-AM code is 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 haemorrhoids*

- (5) For the purposes of this Statement of Principles, haemorrhoids, in relation to a person, includes death from a terminal event or condition that was contributed to by the person's haemorrhoids.

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 haemorrhoids and death from haemorrhoids 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, haemorrhoids or death from haemorrhoids is connected with the circumstances of a person's relevant service:

- (1) being pregnant within the six weeks before the clinical onset of haemorrhoids;
- (2) straining at stool due to constipation or diarrhoea, within the two weeks before the clinical onset of haemorrhoids;
- (3) having a spinal cord injury at the time of the clinical onset of haemorrhoids;

Note: *spinal cord injury* is defined in the Schedule 1 - Dictionary.

- (4) chewing khat at least weekly, for at least the three months before the clinical onset of haemorrhoids;
- (5) being pregnant within the six weeks before the clinical worsening of haemorrhoids;
- (6) straining at stool due to constipation or diarrhoea, within the two weeks before the clinical worsening of haemorrhoids;
- (7) having a spinal cord injury at the time of the clinical worsening of haemorrhoids;

Note: *spinal cord injury* is defined in the Schedule 1 - Dictionary.

- (8) chewing khat at least weekly, for at least the three months before the clinical worsening of haemorrhoids;

- (9) an inability to consume an average daily intake of 20 grams of fibre in food for at least the four weeks before the clinical worsening of haemorrhoids;

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

- (10) for haemorrhoidal bleeding only, taking a drug from a class of drugs from the specified list of drugs, within the 30 days before the clinical worsening of haemorrhoids;

Note: *specified list of drugs* is defined in the Schedule 1 - Dictionary.

- (11) inability to obtain appropriate clinical management for haemorrhoids.

## **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 factors set out in subsections 9(5) to 9(11) apply only to material contribution to, or aggravation of, haemorrhoids where the person's haemorrhoids 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:

***anticoagulants*** means pharmacological agents which suppress, delay or attenuate blood coagulation, including heparin, warfarin and dicumarol.

***antiplatelet agents*** means pharmacological agents that block platelet adhesion or aggregation, including aspirin, clopidogrel, dipyridamole, monoclonal antibodies and peptides.

***fibre in food*** means complex carbohydrates of plant origin consumed as vegetables, fruits or cereals which resist digestion by gastrointestinal enzymes in the gastrointestinal tract, and include plant cell walls and non-starch polysaccharides from sources other than cell walls, including cellulose and pectins.

***haemorrhoids***—see subsection 7(2).

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

***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.

Note: *MRCA* and *VEA* are also defined in the Schedule 1 - Dictionary.

***specified list of drugs*** means:

- (a) anticoagulants;
- (b) antiplatelet agents; or
- (c) non-steroidal anti-inflammatory drugs, including aspirin but not including paracetamol.

Note: *anticoagulants* and *antiplatelet agents* are also defined in the Schedule 1 - Dictionary.

***spinal cord injury*** means an injury to the long tracts of the spinal cord resulting in permanent motor or sensory deficits below the level of the lesion.

***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*.