



Australian Government
Repatriation Medical Authority

Statement of Principles
concerning
HERPES SIMPLEX
(Reasonable Hypothesis)
(No. 39 of 2018)

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

Dated 27 April 2018

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

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1 Name

This is the Statement of Principles concerning *herpes simplex (Reasonable Hypothesis)* (No. 39 of 2018).

2 Commencement

This instrument commences on 28 May 2018.

3 Authority

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

4 Revocation

The Statement of Principles concerning herpes simplex No. 3 of 2010 made under subsection 196B(2) of the VEA is revoked.

5 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.

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 herpes simplex and death from herpes simplex.

Meaning of herpes simplex

- (2) For the purposes of this Statement of Principles, herpes simplex means a clinical illness caused by herpes simplex virus type 1 (HSV-1) or herpes simplex virus type 2 (HSV-2). Lesions arising at an anatomical location where they have not previously occurred may be regarded as a new infection.

Note 1: This infection is a lifelong, persistent infection of the peripheral nervous system ganglia. It is characterised by intermittent episodes of localised vesicular lesions on the skin or mucous membranes, but can also involve the central nervous system or other organs.

Note 2: HSV-1 typically causes orofacial lesions and HSV-2 typically causes genital lesions, but either subtype may infect the oral mucosa or the genital tract and either may occur at other sites.

Note 3: HSV complications include corneal scarring or significant skin scarring, eczema herpeticum, HSV dissemination or visceral involvement.

Note 4: *eczema herpeticum* is defined in the Schedule 1 - Dictionary.

- (3) While herpes simplex attracts ICD-10-AM code B00 or A60, in applying this Statement of Principles the meaning of herpes simplex 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)*, Tenth Edition, effective date of 1 July 2017, copyrighted by the Independent Hospital Pricing Authority, ISBN 978-1-76007-296-4.

Death from herpes simplex

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

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

8 Basis for determining the factors

The Repatriation Medical Authority is of the view that there is sound medical-scientific evidence that indicates that herpes simplex and death from herpes simplex 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: *MRCA*, *relevant service* and *VEA* are defined in the Schedule 1 – Dictionary.

9 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 herpes simplex or death from herpes simplex with the circumstances of a person's relevant service:

- (1) being exposed to HSV-1 or HSV-2 within the 30 days before the clinical onset of herpes simplex;

Note: *being exposed to HSV-1 or HSV-2* is defined in the Schedule 1 - Dictionary.

- (2) having a severe thermal burn within the 30 days before the clinical onset of herpes simplex;

Note: *severe thermal burn* is defined in the Schedule 1 - Dictionary.

- (3) having a thermal or chemical burn within the seven days before the clinical onset of herpes simplex at or close to the site of the burn;

Note: *close to the site* is defined in the Schedule 1 - Dictionary.

- (4) being in an immunocompromised state as specified at the time of the clinical onset of herpes simplex;
- Note: *immunocompromised state as specified* is defined in the Schedule 1 - Dictionary.
- (5) having surgery to nerve root ganglia within the 30 days before the clinical onset of herpes simplex, where the cutaneous distribution of herpes simplex corresponds with the nerve roots which were manipulated during surgery;
- (6) being exposed to sunlight or ultraviolet light at a level sufficient to induce at least mild erythema, within the seven days before the clinical onset of herpes simplex;
- (7) being pregnant at the time of the clinical onset of herpes simplex;
- (8) for acute herpes simplex encephalitis or acute herpes simplex retinal necrosis only, having surgery to the brain within the 30 days before the clinical onset of herpes simplex;
- (9) for orofacial herpes simplex only:
- (a) having surgery to the face within the 30 days before the clinical onset of herpes simplex;
 - (b) having an upper respiratory tract infection within the seven days before the clinical onset of herpes simplex; or
 - (c) having a fever of at least 39 degrees Celsius in the 72 hours before the clinical onset of herpes simplex;
- Note: *surgery to the face* is defined in the Schedule 1 - Dictionary.
- (10) for orofacial herpes simplex or genital herpes simplex only, having a category 2 stressor at the time of the clinical onset of herpes simplex;
- Note: *category 2 stressor* is defined in the Schedule 1 - Dictionary.
- (11) for herpes simplex of the cornea (herpes simplex keratitis) only:
- (a) having cataract surgery within the six weeks before the clinical onset of herpes simplex;
 - (b) having a corneal transplant, where the donor cornea is infected with HSV-1 or HSV-2, within the 30 days before the clinical onset of herpes simplex;
 - (c) wearing contact lenses in the 24 hours before the clinical onset of herpes simplex; or
 - (d) being treated with topical prostaglandin eye solution to the affected eye for at least one week before the clinical onset of herpes simplex;
- Note: *topical prostaglandin eye solution* is defined in the Schedule 1 - Dictionary.
- (12) for acute herpes simplex retinal necrosis of the eye only, having periocular trauma within the 30 days before the clinical onset of herpes simplex;

(13) for herpes simplex of the eye only, having atopic dermatitis at the time of the clinical onset of herpes simplex;

(14) for eczema herpeticum only:

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

- (a) having atopic dermatitis before the clinical onset of herpes simplex; or
- (b) having a specified dermatosis close to the site of the HSV-1 or HSV-2 infection, at the time of the clinical onset of herpes simplex;

Note: *close to the site* and *specified dermatosis* are defined in the Schedule 1 - Dictionary.

(15) for herpes simplex of the lip only:

- (a) having chapped lips in the 48 hours before the clinical onset of herpes simplex; or
- (b) playing a woodwind or brass musical instrument in the 48 hours before the clinical onset of herpes simplex;

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

(16) having a severe thermal burn within the 30 days before the clinical worsening of herpes simplex;

Note: *severe thermal burn* is defined in the Schedule 1 - Dictionary.

(17) having a thermal or chemical burn within the seven days before the clinical worsening of herpes simplex at or close to the site of the burn;

Note: *close to the site* is defined in the Schedule 1 - Dictionary.

(18) being in an immunocompromised state as specified at the time of the clinical worsening of herpes simplex;

Note: *immunocompromised state as specified* is defined in the Schedule 1 - Dictionary.

(19) having surgery to nerve root ganglia within the 30 days before the clinical worsening of herpes simplex, where the cutaneous distribution of herpes simplex corresponds with the nerve roots which were manipulated during surgery;

(20) being exposed to sunlight or ultraviolet light at a level sufficient to induce at least mild erythema, within the seven days before the clinical worsening of herpes simplex;

(21) being pregnant at the time of the clinical worsening of herpes simplex;

(22) for acute herpes simplex encephalitis or acute herpes simplex retinal necrosis only, having surgery to the brain within the 30 days before the clinical worsening of herpes simplex;

(23) for orofacial herpes simplex only:

- (a) having surgery to the face within the 30 days before the clinical worsening of herpes simplex;
- (b) having an upper respiratory tract infection within the seven days before the clinical worsening of herpes simplex; or
- (c) having a fever of at least 39 degrees Celsius in the 72 hours before the clinical worsening of herpes simplex;

Note: *surgery to the face* is defined in the Schedule 1 - Dictionary.

(24) for orofacial herpes simplex or genital herpes simplex only, having a category 2 stressor at the time of the clinical worsening of herpes simplex;

Note: *category 2 stressor* is defined in the Schedule 1 - Dictionary.

(25) for herpes simplex of the cornea (herpes simplex keratitis) only:

- (a) having cataract surgery within the six weeks before the clinical worsening of herpes simplex;
- (b) wearing contact lenses in the 24 hours before the clinical worsening of herpes simplex; or
- (c) being treated with topical prostaglandin eye solution to the affected eye for at least one week before the clinical worsening of herpes simplex;

Note: *topical prostaglandin eye solution* is defined in the Schedule 1 - Dictionary.

(26) for acute herpes simplex retinal necrosis of the eye only, having periocular trauma within the 30 days before the clinical worsening of herpes simplex;

(27) for herpes simplex of the eye only, having atopic dermatitis at the time of the clinical worsening of herpes simplex;

(28) for eczema herpeticum only:

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

- (a) having atopic dermatitis before the clinical worsening of herpes simplex; or
- (b) having a specified dermatosis close to the site of the HSV-1 or HSV-2 infection, at the time of the clinical worsening of herpes simplex;

Note: *close to the site* and *specified dermatosis* are defined in the Schedule 1 - Dictionary.

(29) for herpes simplex of the lip only:

- (a) having chapped lips in the 48 hours before the clinical worsening of herpes simplex; or

- (b) playing a woodwind or brass musical instrument in the 48 hours before the clinical worsening of herpes simplex;

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

- (30) inability to obtain appropriate clinical management for herpes simplex.

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(16) to 9(30) apply only to material contribution to, or aggravation of, herpes simplex where the person's herpes simplex 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(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

In this instrument:

being exposed to HSV-1 or HSV-2 means:

- (a) having direct exposure to saliva or respiratory droplets infected with HSV-1 or HSV-2; or
- (b) having percutaneous exposure to vesicular fluid infected with HSV-1 or HSV-2; or
- (c) having sexual contact with a person infected with HSV-1 or HSV-2; or
- (d) having skin contact with a person infected with HSV-1 or HSV-2.

category 2 stressor means one of the following negative life events, the effects of which are chronic in nature and cause the person to feel ongoing distress, concern or worry:

- (a) being socially isolated and unable to maintain friendships or family relationships, due to physical location, language barriers, disability, or medical or psychiatric illness;
- (b) experiencing a problem with a long-term relationship including the break-up of a close personal relationship, the need for marital or relationship counselling, marital separation or divorce;
- (c) having concerns in the work or school environment including ongoing disharmony with fellow work or school colleagues, perceived lack of social support within the work or school environment, perceived lack of control over tasks performed and stressful workloads, or experiencing bullying in the workplace or school environment;
- (d) experiencing serious legal issues including being detained or held in custody, ongoing involvement with the police concerning violations of the law, or court appearances associated with personal legal problems;
- (e) having severe financial hardship including loss of employment, long periods of unemployment, foreclosure on a property or bankruptcy;
- (f) having a family member or significant other experience a major deterioration in their health; or
- (g) being a full-time caregiver to a family member or significant other with a severe physical, mental or developmental disability.

Note: ***significant other*** is also defined in the Schedule 1 - Dictionary.

chapped lips means excessive dryness of the vermilion border of the lips manifested by scaling, cracking and erythema.

chronic renal failure means:

- (a) having a glomerular filtration rate of less than 15 mL/min/1.73 m² for a period of at least three months; or
- (b) a need for renal replacement therapy (dialysis or transplantation) for treatment of complications of decreased glomerular filtration rate which would otherwise increase the risk of morbidity and mortality; or
- (c) undergoing chronic dialysis.

close to the site means at or within one centimetre.

eczema herpeticum means a clinical illness characterised by a dissemination of HSV infection across the skin, normally superimposed on a pre-existing, inactive or active skin disorder.

herpes simplex—see subsection 7(2).

immunocompromised state as specified means a condition of substantially lowered immune function, such as would occur in the following conditions or circumstances:

- (a) being infected with human immunodeficiency virus;
- (b) being treated with an immunosuppressive drug;
- (c) having a haematological or solid organ malignancy;
- (d) having asplenia or a splenectomy;
- (e) having chronic renal failure;
- (f) having severe malnutrition;
- (g) having a cardiopulmonary bypass procedure; or
- (h) undergoing solid organ, stem cell or bone marrow transplantation.

Note: **chronic renal failure** and **immunosuppressive drug** are also defined in the Schedule 1 - Dictionary.

immunosuppressive drug means a drug or an agent which results in substantial suppression of immune responses.

Note: Examples of an immunosuppressive drug include corticosteroids other than inhaled or topical corticosteroids, drugs used to prevent transplant rejection, tumour necrosis factor- α inhibitors and chemotherapeutic agents used for the treatment of cancer.

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

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.

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

severe thermal burn means a burn injury caused by the application of heat to body tissue, including inhalational burn, which is of sufficient severity to warrant hospital admission as an inpatient.

significant other means a person who has a close family bond or a close personal relationship and is important or influential in one's life.

specified dermatosis means one of the following:

- (a) allergic contact dermatitis;
- (b) irritant contact dermatitis; or
- (c) psoriasis.

surgery to the face means surgery involving the face or the skin of the face, including chemical peels, dermabrasion and laser resurfacing.

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.

topical prostaglandin eye solution means local application to the eye of latanoprost, bimatoprost, tafluprost or tavoprost.

VEA means the *Veterans' Entitlements Act 1986*.