



Australian Government
Repatriation Medical Authority

Statement of Principles
concerning
NON-HODGKIN LYMPHOMA
(Balance of Probabilities)
(No. 91 of 2018)

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

Dated 26 October 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 'Nicholas Saunders'.

Professor Nicholas Saunders AO
Chairperson

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1 Name

This is the Statement of Principles concerning *non-Hodgkin lymphoma (Balance of Probabilities)* (No. 91 of 2018).

2 Commencement

This instrument commences on 26 November 2018.

3 Authority

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

4 Repeal

The Statement of Principles concerning non-Hodgkin's lymphoma No. 29 of 2010 (Federal Register of Legislation No. F2014C01085) made under subsections 196B(3) and (8) of the VEA is repealed.

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 non-Hodgkin lymphoma and death from non-Hodgkin lymphoma.

Meaning of non-Hodgkin lymphoma

- (2) For the purposes of this Statement of Principles, non-Hodgkin lymphoma:
 - (a) means a heterogeneous group of malignant lymphoproliferative diseases that originate from T and B lymphocytes, and present as solid tumours of the immune system that lack Reed-Sternberg cells; and
 - (b) includes Burkitt lymphoma, mycosis fungoides, adult T cell lymphoma/leukaemia and non-Hodgkin lymphoma arising within parenchymal organs; and
 - (c) excludes myeloma, hairy cell leukaemia, Waldenström macroglobulinaemia, acute lymphoblastic leukaemia and chronic lymphocytic leukaemia/small lymphocytic lymphoma.

Death from non-Hodgkin lymphoma

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

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 non-Hodgkin lymphoma and death from non-Hodgkin lymphoma can be related to relevant service rendered by veterans 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 exist before it can be said that, on the balance of probabilities, non-Hodgkin lymphoma or death from non-Hodgkin lymphoma is connected with the circumstances of a person's relevant service:

- (1) having infection with human immunodeficiency virus at the time of the clinical onset of non-Hodgkin lymphoma;
- (2) undergoing solid organ, stem cell or bone marrow transplantation before the clinical onset of non-Hodgkin lymphoma;
- (3) having an autoimmune disease from the specified list of autoimmune diseases before the clinical onset of non-Hodgkin lymphoma;

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

- (4) for cutaneous T-cell lymphoma only, having psoriasis at the time of the clinical onset of non-Hodgkin lymphoma;
- (5) being treated with a drug from the specified list of systemic immunosuppressive drugs for a continuous period of at least three months before the clinical onset of non-Hodgkin lymphoma, and where that exposure has ceased, the clinical onset of non-Hodgkin lymphoma has occurred within ten years of cessation;

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

- (6) for Richter syndrome only, having chronic lymphoid leukaemia/small lymphocytic lymphoma at the time of the clinical onset of non-Hodgkin lymphoma;

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

- (7) for adult T-cell leukaemia-lymphoma only, having infection with human T-cell lymphotropic virus type-1 at the time of the clinical onset of non-Hodgkin lymphoma;
 - (8) for gastric lymphoma only, having infection with *Helicobacter pylori* at the time of the clinical onset of non-Hodgkin lymphoma;
 - (9) for Burkitt lymphoma, primary central nervous system lymphomas, extranodal nasal natural killer-T cell lymphoma, Epstein-Barr virus-positive diffuse large B-cell lymphoma not otherwise specified and systemic Epstein-Barr virus-positive T-cell lymphoma of childhood only, having infection with Epstein-Barr virus at the time of the clinical onset of non-Hodgkin lymphoma;
 - (10) for primary effusion lymphoma and Kaposi's sarcoma herpesvirus-positive diffuse large B-cell lymphoma not otherwise specified only, having infection with Kaposi's sarcoma herpesvirus at the time of the clinical onset of non-Hodgkin lymphoma;
 - (11) for small intestinal mucosa-associated lymphoid tissue lymphoma only, having infection with *Campylobacter jejuni* at the time of the clinical onset of non-Hodgkin lymphoma;
 - (12) for ocular adnexal mucosa-associated lymphoid tissue lymphoma only, having infection with *Chlamydia psittaci* at the time of the clinical onset of non-Hodgkin lymphoma;
 - (13) for cutaneous mucosa-associated lymphoid tissue lymphoma only, having infection with specified bacteria belonging to the *Borrelia burgdorferi* sensu lato complex at the time of the clinical onset of non-Hodgkin lymphoma;
- Note: *specified bacteria belonging to the Borrelia burgdorferi sensu lato complex* is defined in the Schedule 1 - Dictionary.
- (14) having infection with hepatitis C virus at the time of the clinical onset of non-Hodgkin lymphoma;
 - (15) for B-cell lymphoma only, having infection with hepatitis B virus at the time of the clinical onset of non-Hodgkin lymphoma;
 - (16) for Burkitt lymphoma only, having infection with *Plasmodium falciparum* at the time of the clinical onset of non-Hodgkin lymphoma;
 - (17) having Hodgkin's lymphoma before the clinical onset of non-Hodgkin lymphoma;
 - (18) being obese for at least ten years within the 20 years before the clinical onset of non-Hodgkin lymphoma;

Note: *being obese* is defined in the Schedule 1 – Dictionary.

- (19) for diffuse large B-cell lymphoma only, having chronic inflammation as specified at the affected site for at least ten years before the clinical onset of non-Hodgkin lymphoma;

Note: *chronic inflammation as specified* is defined in the Schedule 1 – Dictionary.

- (20) for anaplastic large cell lymphoma of the breast only, having a breast implant at the time of the clinical onset of non-Hodgkin lymphoma;
- (21) inhaling, ingesting or having cutaneous contact with lindane on more days than not for a cumulative period of at least one year, at least five years before the clinical onset of non-Hodgkin lymphoma;

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

- (22) inhaling, ingesting or having cutaneous contact with pentachlorophenol:
- (a) for a cumulative period of at least 2 000 hours, within a consecutive period of ten years, before the clinical onset of non-Hodgkin lymphoma; and
 - (b) where the first exposure occurred at least five years before the clinical onset of non-Hodgkin lymphoma;
- (23) inability to obtain appropriate clinical management for non-Hodgkin lymphoma.

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(23) applies only to material contribution to, or aggravation of, non-Hodgkin lymphoma where the person's non-Hodgkin lymphoma 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 obese means having a Body Mass Index (BMI) of 30 or greater.

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

BMI means W/H^2 where:

W is the person's weight in kilograms; and

H is the person's height in metres.

chronic inflammation as specified means chronic suppuration or inflammation arising in settings such as pyothorax resulting from artificial pneumothorax for treatment of pulmonary or pleural tuberculosis, chronic osteomyelitis, metallic implant insertion, surgical mesh implantation and chronic skin venous ulcer.

lindane means a complex synthetic mixture in which the gamma-isomer of hexachlorocyclohexane is present.

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

non-Hodgkin lymphoma—see subsection 7(2).

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.

Richter syndrome means a form of high-grade large cell lymphoma, characterised by systemic symptoms, rapid tumour growth and extra-nodal involvement, which develops in patients with chronic lymphocytic leukaemia.

specified bacteria belonging to the *Borrelia burgdorferi sensu lato* complex means *Borrelia burgdorferi sensu stricto*, *Borrelia afzelii*, *Borrelia garinii*, *Borrelia spielmanii*, *Borrelia bavariensis*, *Borrelia bissettii*, *Borrelia lusitaniae*, *Borrelia valaisiana* or *Borrelia mayonii*.

specified list of autoimmune diseases means:

- (a) autoimmune haemolytic anaemia;
- (b) biliary cirrhosis;
- (c) coeliac disease;
- (d) dermatitis herpetiformis;
- (e) dermatomyositis;
- (f) Hashimoto's thyroiditis or chronic lymphocytic thyroiditis;
- (g) immune thrombocytopenia;

- (h) inflammatory bowel disease;
- (i) myasthenia gravis;
- (j) polyarteritis nodosa;
- (k) polymyositis;
- (l) rheumatoid arthritis;
- (m) sarcoidosis;
- (n) Sjogren syndrome;
- (o) systemic lupus erythematosus; or
- (p) systemic sclerosis or localised sclerosis.

specified list of systemic immunosuppressive drugs means:

- (a) azathioprine;
- (b) methotrexate; or
- (c) 6-mercaptopurine.

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*.