Statement of Principles
concerning
OLECRANON BURSITIS
(Reasonable Hypothesis)
(No. 63 of 2018)

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

Dated 22 June 2018

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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**Schedule 1 - Dictionary** .........................................................

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Name
This is the Statement of Principles concerning olecranon bursitis (Reasonable Hypothesis) (No. 63 of 2018).

Commencement
This instrument commences on 23 July 2018.

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

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.

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

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

(1) This Statement of Principles is about olecranon bursitis and death from olecranon bursitis.

Meaning of olecranon bursitis

(2) For the purposes of this Statement of Principles, olecranon bursitis means inflammation or infection of the bursa overlying the olecranon process of the ulna.

Note: Typical features of olecranon bursitis are pain, tenderness, redness, swelling and thickening of the bursa and skin in the region of the external elbow.

(3) While olecranon bursitis attracts ICD-10-AM code M70.2, in applying this Statement of Principles the meaning of olecranon bursitis is that given in subsection (2).

Death from olecranon bursitis

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

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

7 Basis for determining the factors

The Repatriation Medical Authority is of the view that there is sound medical-scientific evidence that indicates that olecranon bursitis and death from olecranon bursitis 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.

8 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 olecranon bursitis or death from olecranon bursitis with the circumstances of a person’s relevant service:

(1) having a bacterial, fungal or algal infection involving the affected bursa at the time of the clinical onset of olecranon bursitis;

(2) having trauma to the external elbow of the affected side in the 30 days before the clinical onset of olecranon bursitis;

Note: Examples of types of trauma include cuts, abrasions and lacerations of the affected elbow, repeated rubbing or knocking of the affected elbow, needle aspiration of the affected olecranon bursa and injection of the affected olecranon bursa with corticosteroids.

(3) having surgery to the external elbow of the affected side in the 30 days before the clinical onset of olecranon bursitis;

(4) for septic olecranon bursitis only, being in an immunocompromised state as specified at the time of the clinical onset of olecranon bursitis;

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

(5) having a disorder from the specified list of disorders at the time of the clinical onset of olecranon bursitis;

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

(6) having psoriasis, localised sclerosis, atopic dermatitis or another inflammatory skin disorder, where the skin disorder involves the skin of the extensor surface of the affected elbow, at the time of the clinical onset of olecranon bursitis;

(7) being treated with a tyrosine kinase inhibitor within the 30 days before the clinical onset of olecranon bursitis;
(8) having a bacterial, fungal or algal infection involving the affected bursa at the time of the clinical worsening of olecranon bursitis;

(9) having trauma to the external elbow of the affected side in the 30 days before the clinical worsening of olecranon bursitis;

Note: Examples of types of trauma include cuts, abrasions and lacerations of the affected elbow, repeated rubbing or knocking of the affected elbow, needle aspiration of the affected olecranon bursa and injection of the affected olecranon bursa with corticosteroids.

(10) having surgery to the external elbow of the affected side in the 30 days before the clinical worsening of olecranon bursitis;

(11) for septic olecranon bursitis only, being in an immunocompromised state as specified at the time of the clinical worsening of olecranon bursitis;

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

(12) having a disorder from the specified list of disorders at the time of the clinical worsening of olecranon bursitis;

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

(13) having psoriasis, localised sclerosis, atopic dermatitis or another inflammatory skin disorder, where the skin disorder involves the skin of the extensor surface of the affected elbow, at the time of the clinical worsening of olecranon bursitis;

(14) being treated with a tyrosine kinase inhibitor within the 30 days before the clinical worsening of olecranon bursitis;

(15) inability to obtain appropriate clinical management for olecranon bursitis.

9 Relationship to service

(1) The existence in a person of any factor referred to in section 8, must be related to the relevant service rendered by the person.

(2) The factors set out in subsections 8(8) to 8(15) apply only to material contribution to, or aggravation of, olecranon bursitis where the person's olecranon bursitis was suffered or contracted before or during (but did not arise out of) the person's relevant service.

10 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 8 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.
1 Definitions

In this instrument:

**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.

crystal-induced arthropathy means arthropathy resulting from the deposition of monosodium urate, calcium pyrophosphate dihydrate, calcium hydroxyapatite or calcium oxalate.

**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 chronic renal failure;
(e) having severe malnutrition; or
(f) 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.*

**olecranon bursitis**—see subsection 6(2).

**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.
**specimen list of disorders** means:
(a) diabetes mellitus;
(b) gout, pseudogout or other crystal-induced arthropathy; or
(c) rheumatoid arthritis.

Note: *crystal-induced arthropathy* is also defined in the Schedule 1 – Dictionary.

**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*. 