



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

**Statement of Principles**  
**concerning**  
**TENSION-TYPE HEADACHE**  
**(Reasonable Hypothesis)**  
**(No. 37 of 2018)**

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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 *tension-type headache (Reasonable Hypothesis)* (No. 37 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 tension-type headache No. 1 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 tension-type headache and death from tension-type headache.

*Meaning of tension-type headache*

- (2) For the purposes of this Statement of Principles, tension-type headache:
- (a) means a condition in which within a 12 month period, there are episodes of headache lasting at least 30 minutes, occurring on at least one day per month for at least three consecutive months, and a minimum of ten episodes occur within that 12 month period; and
  - (b) has at least two of the following characteristics:
    - (i) bilateral location;
    - (ii) pressing/tightening (nonpulsating) quality;
    - (iii) mild or moderate intensity;
    - (iv) not aggravated by routine physical activity (such as walking or climbing stairs); and

- (c) causes clinically significant distress or impairment of social, occupational, educational, or other important areas of functioning; and
- (d) excludes:
  - (i) cluster headache;
  - (ii) migraine;
  - (iii) headache attributable to structural abnormalities or inflammatory disorders of the head and neck;
  - (iv) headache attributable to systemic disease; and
  - (v) headache that results from normal physiological stress such as exercise, or the temporary effect of extraneous agents.
- (3) While tension-type headache attracts ICD-10-AM code G44.2, in applying this Statement of Principles the meaning of tension-type headache 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 tension-type headache*

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

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 tension-type headache and death from tension-type headache 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 tension-type headache or death from tension-type headache with the circumstances of a person's relevant service:

- (1) for chronic tension-type headache in migraine and cluster headache sufferers only, taking a drug as specified, for at least the three months before the clinical onset of tension-type headache;

Note: *chronic tension-type headache* and *taking a drug as specified* are defined in the Schedule 1 - Dictionary.

- (2) having a clinically significant disorder of mental health as specified, within the one year before the clinical onset of tension-type headache;

Note: *clinically significant disorder of mental health as specified* is defined in the Schedule 1 - Dictionary.

- (3) experiencing a category 2 stressor within the one year before the clinical onset of tension-type headache;

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

- (4) having insomnia as specified at the time of the clinical onset of tension-type headache;

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

- (5) having concussion or moderate to severe traumatic brain injury within the seven days before the clinical onset of tension-type headache, where tension-type headache has developed within the seven days of:

- (a) injury to the head; or
- (b) regaining consciousness following the injury to the head; or
- (c) discontinuing medication that impairs the ability to sense or report headache following the injury to the head;

- (6) taking a drug as specified, for at least the three months before the clinical worsening of tension-type headache;

Note: *taking a drug as specified* is defined in the Schedule 1 - Dictionary.

- (7) having a clinically significant disorder of mental health as specified, within the one year before the clinical worsening of tension-type headache;

Note: *clinically significant disorder of mental health as specified* is defined in the Schedule 1 - Dictionary.

- (8) experiencing a category 2 stressor within the one year before the clinical worsening of tension-type headache;

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

- (9) having insomnia as specified at the time of the clinical worsening of tension-type headache;

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

- (10) undergoing treatment with a nitric oxide donor, at the time of the clinical worsening of tension-type headache;

Note: *nitric oxide donor* is defined in the Schedule 1 - Dictionary.

- (11) having concussion or moderate to severe traumatic brain injury within the seven days before the clinical worsening of tension-type headache, where tension-type headache has worsened within the seven days of:

- (a) injury to the head; or
- (b) regaining consciousness following the injury to the head; or
- (c) discontinuing medication that impairs the ability to sense or report headache following the injury to the head;

- (12) inability to obtain appropriate clinical management for tension-type headache.

## **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(6) to 9(12) apply only to material contribution to, or aggravation of, tension-type headache where the person's tension-type headache 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:

**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.

**chronic tension-type headache** means tension-type headache that lasts for hours or may be continuous, occurring on at least 15 days per month on average, for more than three months.

**clinically significant disorder of mental health as specified** means one of the following conditions, which is of sufficient severity to warrant ongoing management:

- (a) agoraphobia;
- (b) anxiety disorder;
- (c) obsessive-compulsive disorder;
- (d) panic disorder;
- (e) posttraumatic stress disorder;
- (f) separation anxiety disorder;
- (g) social anxiety disorder; or
- (h) specific phobia.

Note 1: "Management" of the condition may involve regular visits (for example, at least monthly) to a psychiatrist, counsellor or general practitioner.

Note 2: To "warrant ongoing management" does not require that any actual management was received or given for the condition.

**combination analgesic medication** means medication containing a simple analgesic combined with an opioid, butalbital or caffeine.

**insomnia as specified** means sleep disturbance:

- (a) involving difficulty initiating sleep, maintaining sleep or early morning wakening with inability to return to sleep, for at least three nights per week for at least three months; and
- (b) causing clinically significant distress or substantial impairment in social, occupational, educational, or other important areas of functioning.

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

**nitric oxide donor** means a pharmacologically active substance that releases nitric oxide *in vivo* or *in vitro* and includes amyl nitrate, glyceryl trinitrate, isosorbide mononitrate, isosorbide dinitrate, sodium nitroprusside, mannitol hexanitrate and nitrous oxide.

**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.

**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.

**taking a drug as specified** means:

- (a) taking a simple analgesic on at least three days per week; or
- (b) taking a triptan, ergotamine, an opioid, or a combination analgesic medication on at least two days per week.

Note: **combination analgesic medication** and **triptan** are also defined in the Schedule 1 – Dictionary.

**tension-type headache**—see subsection 7(2).

**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.

**triptan** means a 5-hydroxytryptamine receptor agonist.

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