

# Statement of Principles concerning TOXIC VESTIBULOPATHY (Balance of Probabilities) (No. 89 of 2020)

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

Dated 30 October 2020

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

Professor Nicholas Saunders AO

Chairperson

# Contents

1	Name	3
2	Commencement	3
3	Authority	3
4	Application	3
5	Definitions	3
6	Kind of injury, disease or death to which this Statement of Principles relates	3
7	Basis for determining the factors	4
8	Factors that must exist	4
9	Relationship to service	5
10	Factors referring to an injury or disease covered by another Statement of Principles	5
Schedule	1 - Dictionary	6
1	Definitions	6

### 1 Name

This is the Statement of Principles concerning toxic vestibulopathy (Balance of Probabilities) (No. 89 of 2020).

#### 2 Commencement

This instrument commences on 30 November 2020.

## 3 Authority

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

# 4 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.

#### 5 Definitions

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

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

(1) This Statement of Principles is about toxic vestibulopathy and death from toxic vestibulopathy.

## Meaning of toxic vestibulopathy

- (2) For the purposes of this Statement of Principles, toxic vestibulopathy:
  - (a) means damage to the vestibular organs of the inner ear or the vestibular nerve as a result of exposure to a chemical agent, resulting in symptoms or signs of vestibular loss; and
  - (b) excludes impairment of balance due to damage to the brain or brainstem.

Note: Typical symptoms and signs of damage to the vestibular nerve or vestibular organs include nausea, vomiting, vertigo, dizziness, disequilibrium, nystagmus (eye jerking) and oscillopsia (blurred vision with head movement).

## Death from toxic vestibulopathy

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

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

# 7 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 toxic vestibulopathy and death from toxic vestibulopathy 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.

#### 8 Factors that must exist

At least one of the following factors must exist before it can be said that, on the balance of probabilities, toxic vestibulopathy or death from toxic vestibulopathy is connected with the circumstances of a person's relevant service:

(1) taking a drug from the specified list of drugs within the 30 days before the clinical onset of toxic vestibulopathy;

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

- (2) taking a drug which is associated in the individual with:
  - (a) the development of toxic vestibulopathy within 30 days of commencing drug therapy; and
  - (b) a decrease in the symptoms and signs of toxic vestibulopathy within three months of discontinuing or tapering drug therapy; and

where treatment with the drug continued for at least the three days before the clinical onset of toxic vestibulopathy;

(3) having inner ear exposure to a chemical agent from the specified list of chemical agents within the 30 days before the clinical onset of toxic vestibulopathy;

Note 1: Inner ear exposure to a chemical agent will only occur in the presence of a defect in the tympanic membrane.

Note 2: specified list of chemical agents is defined in the Schedule 1 - Dictionary.

(4) taking a drug from the specified list of drugs within the 30 days before the clinical worsening of toxic vestibulopathy;

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

- (5) taking a drug which is associated in the individual with:
  - (a) an increase in the symptoms or signs of toxic vestibulopathy during drug therapy; and
  - (b) a decrease in the symptoms or signs of toxic vestibulopathy within three months of discontinuing or tapering drug therapy;

where treatment with the drug continued for at least the three days before the clinical worsening of toxic vestibulopathy;

- (6) having inner ear exposure to a chemical agent from the specified list of chemical agents within the 30 days before the clinical worsening of toxic vestibulopathy;
  - Note 1: Inner ear exposure to a chemical agent will only occur in the presence of a defect in the tympanic membrane.
  - Note 2: *specified list of chemical agents* is defined in the Schedule 1 Dictionary.
- (7) inability to obtain appropriate clinical management for toxic vestibulopathy.

# 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(4) to 8(7) apply only to material contribution to, or aggravation of, toxic vestibulopathy where the person's toxic vestibulopathy 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(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 5

#### 1 Definitions

#### In this instrument:

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 chemical agents means:

- (a) aminoglycoside-containing ear drops;
- (b) Burow's solution (5% aluminium subacetate); or
- (c) surgical antiseptics.

# specified list of drugs means:

- (a) amiodarone;
- (b) aminoglycosides;
- (c) chloroquine;
- (d) hydroxychloroquine;
- (e) immune checkpoint inhibitors;
- (f) loop diuretics;
- (g) mefloquine;
- (h) non-steroidal anti-inflammatory drugs;
- (i) platinum-based chemotherapy (cisplatin, carboplatin and oxaliplatin); or
- (i) sotalol.

*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.

toxic vestibulopathy—see subsection 6(2).

VEA means the Veterans' Entitlements Act 1986.