



Australian Government
Repatriation Medical Authority

Statement of Principles
concerning
DENTAL PULP AND PERIAPICAL DISEASE
(Reasonable Hypothesis)
(No. 99 of 2021)

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

Dated 1 October 2021

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

Professor Terence Campbell AM
Chairperson

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1 Name

This is the Statement of Principles concerning *dental pulp and periapical disease (Reasonable Hypothesis)* (No. 99 of 2021).

2 Commencement

This instrument commences on 1 November 2021.

3 Authority

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

4 Repeal

The Statement of Principles concerning dental pulp and apical disease No. 3 of 2014 (Federal Register of Legislation No. F2014L00014) made under subsection 196B(2) of the VEA is repealed.

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 dental pulp and periapical disease and death from dental pulp and periapical disease.

Meaning of dental pulp and periapical disease

- (2) For the purposes of this Statement of Principles, dental pulp and periapical disease:
- (a) means inflammation, infection, necrosis or degeneration of the pulp of the teeth and pulp-related pathological changes involving the apices of the teeth; and
 - (b) includes:
 - (i) abnormal hard tissue formation in pulp, including condensing osteitis;
 - (ii) periapical abscess;
 - (iii) periapical cyst;
 - (iv) periapical periodontitis;

- (v) pulp necrosis;
- (vi) pulp stones; and
- (vii) pulpitis; and

(c) excludes:

- (i) peri-implantitis; and
- (ii) periapical lesions that are not of inflammatory origin.

Note 1: Although patients may be asymptomatic, manifestations typically include mild to severe toothache, tooth pain on percussion or biting, tooth sensitivity to cold stimuli, the presence of a sinus tract and tooth discolouration.

Note 2: Examples of periapical lesions that are not of inflammatory origin include developmental cysts and odontogenic tumours.

Note 3: *periapical abscess*, *periapical cyst*, *periapical periodontitis* and *pulpitis* are defined in the Schedule 1 - Dictionary.

- (3) While dental pulp and periapical disease attracts ICD-10-AM code K04, in applying this Statement of Principles the meaning of dental pulp and periapical disease 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 dental pulp and periapical disease

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

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 dental pulp and periapical disease and death from dental pulp and periapical disease 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 dental pulp and periapical disease or death from dental pulp and periapical disease with the circumstances of a person's relevant service:

- (1) having dental caries involving the affected tooth before the clinical onset of dental pulp and periapical disease;
- (2) having periodontitis involving the periodontium supporting the affected tooth at the time of the clinical onset of dental pulp and periapical disease;
- (3) having trauma involving the affected tooth within the 5 years before the clinical onset of dental pulp and periapical disease;

Note: *trauma involving the affected tooth* is defined in the Schedule 1 - Dictionary.

- (4) undergoing surgery involving the affected tooth within the 1 year before the clinical onset of dental pulp and periapical disease;

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

- (5) undergoing a non-invasive dental or orthodontic procedure involving the affected tooth or the periodontium supporting the affected tooth, within the 6 months before the clinical onset of dental pulp and periapical disease;

Note: *non-invasive dental or orthodontic procedure* is defined in the Schedule 1 - Dictionary.

- (6) having smoked tobacco products:

- (a) in an amount of at least 5 pack-years before the clinical onset of dental pulp and periapical disease; and
- (b) commencing at least 5 years before the clinical onset of dental pulp and periapical disease; and

if smoking has ceased before the clinical onset of dental pulp and periapical disease, then that onset occurred within 10 years of cessation;

Note: *one pack-year* is defined in the Schedule 1 - Dictionary.

- (7) having diabetes mellitus at the time of the clinical onset of dental pulp and periapical disease;
- (8) having scleroderma or Sjögren syndrome at the time of the clinical onset of dental pulp and periapical disease;
- (9) having osteonecrosis of the jaw involving the affected tooth at the time of the clinical onset of dental pulp and periapical disease;

Note: Examples of causes of osteonecrosis of the jaw include sickle-cell disorder and medication-related osteonecrosis.

- (10) having dental caries involving the affected tooth before the clinical worsening of dental pulp and periapical disease;
- (11) having periodontitis involving the periodontium supporting the affected tooth at the time of the clinical worsening of dental pulp and periapical disease;

- (12) having trauma involving the affected tooth within the 5 years before the clinical worsening of dental pulp and periapical disease;

Note: *trauma involving the affected tooth* is defined in the Schedule 1 - Dictionary.

- (13) undergoing surgery involving the affected tooth within the 1 year before the clinical worsening of dental pulp and periapical disease;

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

- (14) undergoing a non-invasive dental or orthodontic procedure involving the affected tooth or the periodontium supporting the affected tooth, within the 6 months before the clinical worsening of dental pulp and periapical disease;

Note: *non-invasive dental or orthodontic procedure* is defined in the Schedule 1 - Dictionary.

- (15) having smoked tobacco products:

- (a) in an amount of at least 5 pack-years before the clinical worsening of dental pulp and periapical disease; and
(b) commencing at least 5 years before the clinical worsening of dental pulp and periapical disease; and

if smoking has ceased before the clinical worsening of dental pulp and periapical disease, then that worsening occurred within 10 years of cessation;

Note: *one pack-year* is defined in the Schedule 1 - Dictionary.

- (16) having diabetes mellitus at the time of the clinical worsening of dental pulp and periapical disease;

- (17) having scleroderma or Sjögren syndrome at the time of the clinical worsening of dental pulp and periapical disease;

- (18) having osteonecrosis of the jaw involving the affected tooth at the time of the clinical worsening of dental pulp and periapical disease;

Note: Examples of causes of osteonecrosis of the jaw include sickle-cell disorder and medication-related osteonecrosis.

- (19) inability to obtain appropriate clinical management for dental pulp and periapical disease.

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(10) to 9(19) apply only to material contribution to, or aggravation of, dental pulp and periapical disease where the person's dental pulp and periapical disease 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:

dental concussion means an injury of the tooth-supporting structures without increased mobility or displacement of the tooth but with pain on percussion.

dental pulp and periapical disease—see subsection 7(2).

luxation means an injury of the tooth-supporting structures with increased mobility or displacement of the tooth.

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

non-invasive dental or orthodontic procedure means the therapeutic application of a chemical substance, heat or cold, or a physical force to the surface of the teeth, during the course of dental or orthodontic treatment;

Note: Examples of a non-invasive dental or orthodontic procedure include:

- (i) acid etching;
- (ii) dehydration;
- (iii) in-office tooth bleaching;
- (iv) orthodontic treatment;
- (v) restorative procedures such as cavity preparation, crown preparation and curing of resins during provisional restorations; and
- (vi) vibration or mechanical irritation.

one pack-year means the amount of tobacco consumed in smoking 20 cigarettes per day for a period of 1 year, or an equivalent amount of tobacco products.

Note 1: An equivalent amount of tobacco products is 7,300 grams of smoking tobacco by weight, either in cigarettes, pipe tobacco or cigars, or a combination of same. For pipe tobacco, cigars or combinations of multiple tobacco types, 1 gram of tobacco is considered to be equal to one cigarette.

Note 2: Pack-years are calculated by dividing the number of cigarettes smoked per day by 20 and multiplying this number by the number of years the person has smoked. For example, smoking 10 cigarettes per day for 10 years is equal to 5 pack-years, and smoking 40 cigarettes per day for 10 years is equal to 20 pack-years.

periapical abscess means a destructive process in the bony and ligamentous supporting tissues of the apices of the teeth resulting in a localised collection of pus. It can be acute or chronic, and may be symptomatic or asymptomatic. Periapical abscess is also known as endodontic or dentoalveolar abscess.

periapical cyst means an epithelium-lined periodontal cyst involving the apex of a devitalised tooth. Periapical cyst is also known as radicular or odontogenic cyst.

periapical periodontitis means an acute or chronic destructive inflammatory disease of the bony and ligamentous supporting tissues of the apices of the teeth. The inflammation can be limited to the periodontal ligament, but can also involve the root cementum, dentin and alveolar bone. Periapical periodontitis is also known as apical periodontitis.

pulpitis means acute or chronic, reversible or irreversible inflammation of the dental pulp.

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.

surgery means dental surgery, orthodontic surgery or maxillofacial surgery.

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.

trauma involving the affected tooth means a blunt or penetrating injury resulting in:

- (a) avulsion and subsequent replantation of the affected tooth;
- (b) dental concussion;
- (c) disruption or fracture of the periodontium in the region of the affected tooth;
- (d) fracture or crack of the affected tooth; or
- (e) luxation of the affected tooth.

Note: **dental concussion** and **luxation** are also defined in the Schedule 1 - Dictionary.

VEA means the *Veterans' Entitlements Act 1986*.