



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

**Statement of Principles**  
**concerning**  
**ALLERGIC CONTACT DERMATITIS**  
**(Balance of Probabilities)**  
**(No. 2 of 2021)**

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

Dated 24 December 2020

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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**1 Name**

This is the Statement of Principles concerning *allergic contact dermatitis (Balance of Probabilities)* (No. 2 of 2021).

**2 Commencement**

This instrument commences on 25 January 2021.

**3 Authority**

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

**4 Repeal**

The Statement of Principles concerning allergic contact dermatitis No. 113 of 2011 (Federal Register of Legislation No. F2011L01753) made under subsection 196B(3) of the VEA is repealed.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 allergic contact dermatitis and death from allergic contact dermatitis.

*Meaning of allergic contact dermatitis*

- (2) For the purposes of this Statement of Principles, allergic contact dermatitis:
- (a) means inflammation of an area of the skin from exposure to an allergen that has been applied to the same area of skin; and
  - (b) is a cell-mediated delayed-type hypersensitivity reaction due to contact with a substance to which the individual has previously been sensitised;
  - (c) includes allergic contact dermatitis that is due to cutaneous exposure from airborne allergens; and
  - (d) excludes:
    - (i) atopic dermatitis (eczema);

- (ii) irritant contact dermatitis;
- (iii) local skin hypersensitivity associated with metal implants;
- (iv) photocontact dermatitis;
- (v) systemic allergic dermatitis; and
- (vi) urticaria.

Note: Allergic contact dermatitis typically presents as an eczema like rash on skin exposed to the allergen, including the skin of the lips (allergic contact cheilitis), around the mouth and the eyelids.

- (3) While allergic contact dermatitis attracts ICD-10-AM code L23, in applying this Statement of Principles the meaning of allergic contact dermatitis 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 allergic contact dermatitis*

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

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 allergic contact dermatitis and death from allergic contact dermatitis 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, allergic contact dermatitis or death from allergic contact dermatitis is connected with the circumstances of a person's relevant service:

- (1) having the affected area of skin exposed to an allergen within the two weeks before the clinical onset of allergic contact dermatitis;

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

Note 2: The initial sensitising exposure to an allergen may be either systemic or cutaneous and may have occurred months to years before the re-exposure that has resulted in the contact dermatitis.

Note 3: Cross-sensitisation may occur between allergens.

- (2) having the affected area of skin exposed to an allergen within the two weeks before the clinical worsening of allergic contact dermatitis;

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

Note 2: The initial sensitising exposure to an allergen may be either systemic or cutaneous and may have occurred months to years before the re-exposure that has resulted in the contact dermatitis.

Note 3: Cross-sensitisation may occur between allergens.

- (3) inability to obtain appropriate clinical management for allergic contact dermatitis.

## **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(2) to 9(3) apply only to material contribution to, or aggravation of, allergic contact dermatitis where the person's allergic contact dermatitis 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:

**allergen** means a substance which, when present in an area of skin, is capable of producing an immune response and inflammation resulting in contact dermatitis. Examples of allergens include:

- (a) balsam of Peru (found in topical medicines such as haemorrhoid ointment and personal care products);
- (b) basic red dye in socks or flame retardant material;
- (c) bufexamac (a nonsteroidal anti-inflammatory drug found in first aid creams);
- (d) chromium in cement or boots;
- (e) disperse dyes in uniforms;
- (f) epoxy resin in flying masks or araldite adhesive;
- (g) formaldehyde or formaldehyde releasers (including quaternium-15);
- (h) fragrances (found in personal care products and disinfectants);
- (i) fuels or oils;
- (j) nickel in uniform buttons;
- (k) rubber accelerators (including thiurams in gloves);
- (l) tea tree oil;
- (m) topical benzocaine; and
- (n) topical neomycin.

**allergic contact dermatitis**—see subsection 7(2).

**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.

**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*.