



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

**Statement of Principles**  
**concerning**  
**HASHIMOTO THYROIDITIS**  
**(Reasonable Hypothesis)**  
**(No. 1 of 2022)**

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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 24 December 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 *Hashimoto thyroiditis (Reasonable Hypothesis)* (No. 1 of 2022).

**2 Commencement**

This instrument commences on 31 January 2022.

**3 Authority**

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

**4 Repeal**

The Statement of Principles concerning Hashimoto's thyroiditis No. 31 of 2013 (Federal Register of Legislation No. F2013L00732) made under subsections 196B(2) and (8) of the VEA is repealed.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 Hashimoto thyroiditis and death from Hashimoto thyroiditis.

*Meaning of Hashimoto thyroiditis*

- (2) For the purposes of this Statement of Principles, Hashimoto thyroiditis:
- (a) means a chronic, inflammatory, autoimmune disease of the thyroid gland characterised by varying degrees of lymphocytic infiltration and fibrosis of the thyroid gland, and typically presenting with a high titre of circulating antibodies against thyroid peroxidase (TPO) or thyroglobulin (Tg); and
  - (b) includes:
    - (i) goitrous thyroiditis;
    - (ii) atrophic thyroiditis; and
    - (iii) chronic autoimmune thyroiditis with transient thyrotoxicosis (Hashitoxicosis); and

(c) excludes:

- (i) Graves disease;
- (ii) non-autoimmune chronic thyroiditis;
- (iii) postpartum thyroiditis;
- (iv) secondary hypothyroidism; and
- (v) subacute thyroiditis.

Note 1: Presenting features typically include a goitre and hypothyroidism, although some patients may be hyperthyroid during the course of the disease.

Note 2: Hashimoto thyroiditis is also known as chronic autoimmune thyroiditis or chronic lymphocytic thyroiditis.

Note 3: Hashimoto thyroiditis may present as myxoedema coma.

Note 4: *myxoedema coma* is defined in the Schedule 1 - Dictionary.

- (3) While Hashimoto thyroiditis attracts ICD-10-AM codes E03.4, E03.5 or E06.3, in applying this Statement of Principles the meaning of Hashimoto thyroiditis 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 Hashimoto thyroiditis*

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

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 Hashimoto thyroiditis and death from Hashimoto thyroiditis 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 Hashimoto thyroiditis or death from Hashimoto thyroiditis with the circumstances of a person's relevant service:

- (1) having iodine excess within the 6 months before the clinical onset of Hashimoto thyroiditis;

Note 1: Iodine excess may be due to consuming foods, dietary supplements or medications with a high content of iodine.

Note 2: *iodine excess* is defined in the Schedule 1 - Dictionary.

- (2) taking a drug from the Specified List 1 of drugs within the 1 year before the clinical onset of Hashimoto thyroiditis;

Note: *Specified List 1 of drugs* is defined in the Schedule 1 - Dictionary.

- (3) undergoing a course of therapeutic radiation for cancer, where the thyroid gland was in the field of radiation, within the 10 years before the clinical onset of Hashimoto thyroiditis;

- (4) having received iodine-131 (radioactive iodine) treatment within the 10 years before the clinical onset of Hashimoto thyroiditis;

- (5) having infection with hepatitis C virus at the time of the clinical onset of Hashimoto thyroiditis;

- (6) being obese for at least 5 years before the clinical onset of Hashimoto thyroiditis;

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

- (7) in a person with a prior history of a regular smoking habit as specified, permanently ceasing to smoke within the 5 years before the clinical onset of Hashimoto thyroiditis;

Note: *regular smoking habit as specified* is defined in the Schedule 1 - Dictionary.

- (8) having postpartum thyroiditis within the 10 years before the clinical onset of Hashimoto thyroiditis;

- (9) having posttraumatic stress disorder at the time of the clinical onset of Hashimoto thyroiditis;

- (10) for Hashimoto thyroiditis first presenting as myxoedema coma only, having an acute precipitating event within the 48 hours before the clinical onset of Hashimoto thyroiditis;

Note: *acute precipitating event* and *myxoedema coma* are defined in the Schedule 1 - Dictionary.

- (11) having iodine excess within the 6 months before the clinical worsening of Hashimoto thyroiditis;

Note 1: Iodine excess may be due to consuming foods, dietary supplements or medications with a high content of iodine.

Note 2: *iodine excess* is defined in the Schedule 1 - Dictionary.

- (12) taking a drug from the Specified List 2 of drugs for a continuous period of at least 2 weeks, within the 1 year before the clinical worsening of Hashimoto thyroiditis;

Note: *Specified List 2 of drugs* is defined in the Schedule 1 - Dictionary.

- (13) undergoing a course of therapeutic radiation for cancer, where the thyroid gland was in the field of radiation, within the 10 years before the clinical worsening of Hashimoto thyroiditis;
- (14) having received iodine-131 (radioactive iodine) treatment within the 10 years before the clinical worsening of Hashimoto thyroiditis;
- (15) having infection with hepatitis C virus at the time of the clinical worsening of Hashimoto thyroiditis;
- (16) being obese for at least 5 years before the clinical worsening of Hashimoto thyroiditis;

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

- (17) in a person with a prior history of a regular smoking habit as specified, permanently ceasing to smoke within the 5 years before the clinical worsening of Hashimoto thyroiditis;

Note: *regular smoking habit as specified* is defined in the Schedule 1 - Dictionary.

- (18) having postpartum thyroiditis within the 10 years before the clinical worsening of Hashimoto thyroiditis;

- (19) having posttraumatic stress disorder at the time of the clinical worsening of Hashimoto thyroiditis;

- (20) being pregnant or within the 12 months postpartum at the time of the clinical worsening of Hashimoto thyroiditis;

- (21) for myxoedema coma only, having an acute precipitating event within the 48 hours before that clinical worsening of Hashimoto thyroiditis;

Note: *acute precipitating event* and *myxoedema coma* are defined in the Schedule 1- Dictionary.

- (22) inability to obtain appropriate clinical management for Hashimoto thyroiditis.

## **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(11) to 9(22) apply only to material contribution to, or aggravation of, Hashimoto thyroiditis where the person's Hashimoto thyroiditis 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:

***acute precipitating event*** means a physical stimulus or event that causes a sudden, intense physical response.

Note: Examples of an acute precipitating event include:

- (a) abrupt cessation of thyroxine therapy;
- (b) acute illness including cerebrovascular accident, gastrointestinal bleed, myocardial infarction and pulmonary embolism;
- (c) acute iodine load including iodine-containing drugs;
- (d) drugs including sedatives, opioids, antipsychotics, selective serotonin reuptake inhibitors, phenytoin, beta blockers, diuretics and chemotherapeutic agents;
- (e) hypothermia;
- (f) infection including pneumonia, urinary tract infections and septicaemia;
- (g) physical trauma including burns; and
- (h) surgery.

***being obese*** means having a Body Mass Index (BMI) of 30 or greater.

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

***BMI*** means  $W/H^2$  where:

- (a) *W* is the person's weight in kilograms; and
- (b) *H* is the person's height in metres.

***Hashimoto thyroiditis***—see subsection 7(2).

***iodine excess*** means:

- (a) an average intake of more than 1,100 micrograms of iodine per day for adults, or more than 900 micrograms per day for those aged 18 years and under, for a continuous period of at least 3 months; or
- (b) having a urinary iodine concentration of greater than 300 micrograms per litre, or greater than 500 micrograms per litre for pregnant women.

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

***myxoedema coma*** means a constellation of severe and life-threatening symptoms of rapid onset in a patient with biochemical evidence of decreased thyroxine level. Characteristic symptoms and signs are decreased mental status and hypothermia, and hypotension, bradycardia, hyponatremia, hypoglycaemia and hypoventilation are typically present.

Note 1: Myxoedema coma is also known as decompensated hypothyroidism.

Note 2: Myxoedema coma may be the first presentation of undiagnosed Hashimoto thyroiditis, or may complicate existing Hashimoto thyroiditis.

***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.

**regular smoking habit as specified** means having smoked at least 3 pack-years of tobacco products, within a continuous 3 year period.

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

**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.

**Specified List 1 of drugs** means:

- (a) dasatinib;
- (b) imatinib;
- (c) interferon alpha;
- (d) interferon beta;
- (e) interleukin-2;
- (f) nilotinib;
- (g) nivolumab;
- (h) pembrolizumab; or
- (i) sunitinib.

**Specified List 2 of drugs** means:

- (a) amiodarone;
- (b) dasatinib;
- (c) imatinib;
- (d) interferon alpha;
- (e) interferon beta;
- (f) interleukin-2;
- (g) lithium;
- (h) nilotinib;
- (i) nivolumab;
- (j) pembrolizumab; or
- (k) sunitinib.

**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*.