

### Statement of Principles concerning WARTS (Reasonable Hypothesis) (No. 7 of 2023)

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

Dated 27 February 2023

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

Professor Terence Campbell AM Chairperson

### Contents

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

#### 1 Name

This is the Statement of Principles concerning *warts (Reasonable Hypothesis)* (No. 7 of 2023).

#### 2 Commencement

This instrument commences on 27 March 2023.

#### 3 Authority

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

#### 4 Repeal

The Statement of Principles concerning warts No. 70 of 2014 (Federal Register of Legislation No. F2014L00926 made under subsection 196B(2) of the VEA is repealed.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 warts and death from warts.

#### Meaning of warts

- (2) For the purposes of this Statement of Principles, warts:
  - (a) means abnormal benign hyperplastic lesions of the skin or mucous membranes caused by human papillomavirus infection; and
  - (b) includes:
    - (i) flat warts, filiform or digitate warts;
    - (ii) plantar warts (including mosaic); and
    - (iii) anogenital warts (condyloma acuminatum); and
  - (c) excludes:
    - (i) seborrheic keratosis;
    - (ii) skin cancers;

- (iii) keratoacanthoma;
- (iv) skin tags; and
- (v) papilloma of the bladder.

Note 1: Warts are usually protuberant or elevated lesions above the surface of the skin or mucous membranes except for plantar warts.

Note 2: Some examples of wart locations include hands, feet, nails, genitals, conjunctiva, nose, paranasal sinus, larynx, rectum, anal canal, cervix uteri, vagina, and urethra. Other names for warts are verruca or papilloma.

- (3) While warts attracts ICD-10-AM codes A63.0 and B07, in applying this Statement of Principles the meaning of warts 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 warts

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

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

(1) having direct physical contact with another person's cutaneous warts, within the 20 months before the clinical onset of warts;

Note: *direct physical contact* is defined in the Schedule 1 – Dictionary.

(2) for warts affecting the cervix uteri only, having penetrative sexual intercourse with a person with genital warts within the 20 months before the clinical onset of warts;

- (3) for warts affecting the anogenital region only, having contact with the anogenital warts of another person within the 20 months before the clinical onset of warts;
- (4) for warts affecting the oral cavity or the larynx only, having oral sex with a person with anogenital warts within the 20 months before the clinical onset of warts;
- (5) for plantar warts only, using communal showering or bathing facilities within the 20 months before the clinical onset of warts;
- (6) for warts on the hands only, using shared gloves or shared utensils on more days than not for 3 months in the preparation of meat, poultry or fish for consumption, within the 20 months before the clinical onset of warts;
- (7) being in an immunocompromised state as specified at the time of the clinical onset of warts;

Note: *immunocompromised state as specified* is defined in the Schedule 1 – Dictionary.

(8) being in an immunocompromised state as specified at the time of the clinical worsening of warts;

Note: *immunocompromised state as specified* is defined in the Schedule 1 – Dictionary.

(9) inability to obtain appropriate clinical management for warts.

#### **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(8) and 9(9) apply only to material contribution to, or aggravation of, warts where the person's warts 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:

*direct physical contact* means physical contact where no protective or impermeable barrier exists.

*immunocompromised state as specified* means a condition of substantially lowered immune function, such as would occur in the following conditions or circumstances:

- (a) having infection with human immunodeficiency virus;
- (b) taking an immunosuppressive drug which causes substantial suppression of immune responses; or
- (c) undergoing renal transplantation.

MRCA means the Military Rehabilitation and Compensation Act 2004.

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.

*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.

*warts*—see subsection 7(2).