



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

**Statement of Principles**  
**concerning**  
**MALIGNANT NEOPLASM OF THE SMALL**  
**INTESTINE**  
**(Reasonable Hypothesis)**  
**(No. 80 of 2023)**

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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 25 August 2023.

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 *malignant neoplasm of the small intestine (Reasonable Hypothesis)* (No. 80 of 2023).

**2 Commencement**

This instrument commences on 26 September 2023.

**3 Authority**

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

**4 Repeal**

The Statement of Principles concerning malignant neoplasm of the small intestine No. 1 of 2015 (Federal Register of Legislation No. F2014L01807) made under subsection 196B(2) of the VEA is repealed.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 malignant neoplasm of the small intestine and death from malignant neoplasm of the small intestine.

*Meaning of malignant neoplasm of the small intestine*

- (2) For the purposes of this Statement of Principles, malignant neoplasm of the small intestine:
- (a) means a primary malignant neoplasm arising from the epithelial cells of the small intestine; and
  - (b) excludes:
    - (i) soft tissue sarcoma;
    - (ii) non-Hodgkin lymphoma and Hodgkin lymphoma; and
    - (iii) carcinoid tumour.

Note: The small intestine extends from the lower border of the pyloric sphincter up to the ileocaecal junction, including the duodenum, jejunum and ileum.

- (3) While malignant neoplasm of the small intestine attracts ICD-10-AM code C17, in applying this Statement of Principles the meaning of malignant neoplasm of the small intestine 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 malignant neoplasm of the small intestine*

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

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 malignant neoplasm of the small intestine and death from malignant neoplasm of the small intestine 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 malignant neoplasm of the small intestine or death from malignant neoplasm of the small intestine with the circumstances of a person's relevant service:

- (1) having Crohn disease (a type of inflammatory bowel disease) of the small intestine before the clinical onset of malignant neoplasm of the small intestine;
- (2) having coeliac disease for at least 5 years before the clinical onset of malignant neoplasm of the small intestine;
- (3) having an adenoma of the small intestine before the clinical onset of malignant neoplasm of the small intestine;
- (4) for adenocarcinoma of an ileostomy or ileal pouch only, having an ileostomy or ileal pouch for at least 2 years before the clinical onset of malignant neoplasm of the small intestine;

- (5) being obese for at least 10 years before the clinical onset of malignant neoplasm of the small intestine;

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

- (6) having a cholecystectomy at least 5 years before the clinical onset of malignant neoplasm of the small intestine;

Note: Cholecystectomy is the surgical removal of the gallbladder.

- (7) having diabetes mellitus for at least 5 years before the clinical onset of malignant neoplasm of the small intestine;

- (8) inability to obtain appropriate clinical management for malignant neoplasm of the small intestine before the clinical worsening of malignant neoplasm of the small intestine.

## **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 factor set out in subsection 9(8) applies only to material contribution to, or aggravation of, malignant neoplasm of the small intestine where the person's malignant neoplasm of the small intestine 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:

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

Note: **BMI** is 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.

***malignant neoplasm of the small intestine***—see subsection 7(2).

***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 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*.