

Statement of Principles concerning CHARCOT-MARIE-TOOTH DISEASE (Reasonable Hypothesis) (No. 88 of 2023)

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 *Charcot-Marie-Tooth disease* (Reasonable Hypothesis) (No. 88 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 Charcot-Marie-Tooth disease No. 21 of 2015 (Federal Register of Legislation No. F2014L01827) made under subsection 196B(2) of the VEA is repealed.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 Charcot-Marie-Tooth disease and death from Charcot-Marie-Tooth disease.

Meaning of Charcot-Marie-Tooth disease

(2) For the purposes of this Statement of Principles, Charcot-Marie-Tooth disease means one of a group of genetic disorders of myelin structure or axon function which results in chronic peripheral motor and sensory neuropathies.

Note: Clinical manifestations include progressive distal muscle weakness and atrophy starting in the feet and legs, gait disturbance and absent stretch reflexes.

- (3) While Charcot-Marie-Tooth disease attracts ICD-10-AM code G60.0, in applying this Statement of Principles the meaning of Charcot-Marie-Tooth 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 Charcot-Marie-Tooth disease

(5) For the purposes of this Statement of Principles, Charcot-Marie-Tooth disease, in relation to a person, includes death from a terminal event or condition that was contributed to by the person's Charcot-Marie-Tooth 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 Charcot-Marie-Tooth disease and death from Charcot-Marie-Tooth 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 Charcot-Marie-Tooth disease or death from Charcot-Marie-Tooth disease with the circumstances of a person's relevant service:

- (1) taking a drug that cannot be ceased or substituted in the long term and which is associated in the individual with the clinical worsening of Charcot-Marie-Tooth disease during drug therapy and either:
 - (a) the improvement of Charcot-Marie-Tooth disease within 3 months of discontinuing or tapering drug therapy; or
 - (b) the clinical worsening of Charcot-Marie-Tooth disease on rechallenge with the same drug or another drug from the same class of drugs; and

where the drug was being taken at the time of the clinical worsening of Charcot-Marie-Tooth disease;

(2) inability to obtain appropriate clinical management for Charcot-Marie-Tooth disease before the clinical worsening of Charcot-Marie-Tooth 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(1) and 9(2) apply only to material contribution to, or aggravation of, Charcot-Marie-Tooth disease where the person's Charcot-Marie-Tooth 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:

Charcot-Marie-Tooth disease—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.