SUMMARY OF CHANGES:

INSTRUMENT NOS. 17 to 44 of 2019

Statements of Principles Nos. 17 to 44 of 2019 were signed by the Chairperson of the Repatriation Medical Authority (the Authority) on 1 March 2019.

The Instruments have been lodged and registered with the Federal Register of Legislation, pursuant to section 15G of the Legislation Act 2003 (Legislation Act). The day of commencement as specified in each of the Instruments is 25 March 2019. In accordance with the Legislation Act, the Office of Parliamentary Counsel must generally deliver a legislative instrument for laying before each House of the Parliament within six sitting days of that House after the instrument is registered with the instrument's registered explanatory statement. The Instruments and the associated Explanatory Statements registered with the Federal Register of Legislation are available from http://www.legislation.gov.au.

Copies of each Instrument, the associated Explanatory Statement and a list of references relating to each Statement of Principles, are available in accordance with the Veterans' Entitlements Act 1986 (the VEA), on written request from the RMA Secretariat.

The 'User Guide to the RMA Statements of Principles' explains the meaning and purpose of each section of the new Statement of Principles template which commenced in 2015. This document is available on the Authority's website at http://www.rma.gov.au.

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8 March 2019
### REVOCATIONS

<table>
<thead>
<tr>
<th>Instr. No.</th>
<th>Title</th>
<th>Date of Commencement</th>
<th>ICD-10-AM Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>17 &amp; 18/2019</td>
<td>methaemoglobinaemia</td>
<td>01/04/2019</td>
<td>D74</td>
</tr>
<tr>
<td>19 &amp; 20/2019</td>
<td>dental malocclusion</td>
<td>01/04/2019</td>
<td>K07.2 or K07.4</td>
</tr>
<tr>
<td>21 &amp; 22/2019</td>
<td>acute articular cartilage tear</td>
<td>01/04/2019</td>
<td>Nil</td>
</tr>
<tr>
<td>23 &amp; 24/2019</td>
<td>sinus barotrauma</td>
<td>01/04/2019</td>
<td>T70.1</td>
</tr>
<tr>
<td>25 &amp; 26/2019</td>
<td>acute meniscal tear of the knee</td>
<td>01/04/2019</td>
<td>S83.2</td>
</tr>
<tr>
<td>27 &amp; 28/2019</td>
<td>pilonidal sinus</td>
<td>01/04/2019</td>
<td>L05</td>
</tr>
<tr>
<td>29 &amp; 30/2019</td>
<td>blepharitis</td>
<td>01/04/2019</td>
<td>Nil</td>
</tr>
<tr>
<td>31 &amp; 32/2019</td>
<td>chronic pruritus ani</td>
<td>01/04/2019</td>
<td>Nil</td>
</tr>
<tr>
<td>33 &amp; 34/2019</td>
<td>Alzheimer disease</td>
<td>01/04/2019</td>
<td>G30.0, G30.1, G30.8 or G30.9</td>
</tr>
<tr>
<td>35 &amp; 36/2019</td>
<td>neurocognitive disorder with Lewy bodies</td>
<td>01/04/2019</td>
<td>G31.3 with F02.8</td>
</tr>
</tbody>
</table>

### DETERMINATIONS

<table>
<thead>
<tr>
<th>Instr. No.</th>
<th>Title</th>
<th>Date of Commencement</th>
<th>ICD-10-AM Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>37 &amp; 38/2019</td>
<td>chronic insomnia disorder</td>
<td>01/04/2019</td>
<td>Nil</td>
</tr>
<tr>
<td>39 &amp; 40/2019</td>
<td>trigger finger</td>
<td>01/04/2019</td>
<td>M65.3</td>
</tr>
<tr>
<td>41 &amp; 42/2019</td>
<td>de Quervain tendinopathy</td>
<td>01/04/2019</td>
<td>M65.4</td>
</tr>
</tbody>
</table>

### AMENDMENTS

<table>
<thead>
<tr>
<th>Instr. No.</th>
<th>Title</th>
<th>Date of Commencement</th>
<th>ICD-10-AM Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>43 &amp; 44/2019</td>
<td>subdural haematoma</td>
<td>01/04/2019</td>
<td>N/A</td>
</tr>
</tbody>
</table>

**Note:**

The investigation concerning 'Alzheimer-type dementia' has resulted in the revocation of Statements of Principles concerning Alzheimer-type dementia and the determination of Statements of Principles concerning Alzheimer disease and Statements of Principles concerning neurocognitive disorder with Lewy bodies.

The investigation concerning 'stenosing tenosynovitis (in particular trigger finger/thumb and de Quervain tenosynovitis)' has resulted in the determination of Statements of Principles concerning trigger finger and Statements of Principles concerning de Quervain tendinopathy.
<table>
<thead>
<tr>
<th>Instruments</th>
<th>Condition</th>
<th>Description</th>
</tr>
</thead>
</table>
| 17 & 18/2019 | methaemoglobin-aemia | These Instruments result from an investigation notified by the Authority in the Government Notices Gazette of 14 November 2017 concerning methaemoglobin-aemia in accordance with section 196G of the VEA. The investigation involved an examination of the sound medical-scientific evidence now available to the Authority, including the sound medical-scientific evidence it has previously considered. The contents of these Instruments are in similar terms as the repealed Instruments. Comparing these Instruments and the repealed Instruments, the differences include:  
**For RH & BoP SoPs (Instrument Nos. 17 & 18/2019)**  
- adopting the latest revised Instrument format, which commenced in 2015;  
- specifying a day of commencement for the Instrument in section 2;  
- revising the definition of 'methaemoglobin-aemia' in subsection 7(2);  
- revising the ICD-10-AM code for 'methaemoglobin-aemia' in subsection 7(3);  
- revising the reference to 'ICD-10-AM code' in subsection 7(4);  
- revising the factors in subsections 9(1) & 9(5) concerning 'a drug that causes oxidation of haemoglobin', by the inclusion of a note;  
- revising the factors in subsections 9(2) & 9(6) concerning 'a chemical agent that causes oxidation of haemoglobin', by the inclusion of a note;  
- new definitions of 'MRCA' and 'VEA' in Schedule 1 – Dictionary; and  
- revising the definition of 'relevant service' in Schedule 1 – Dictionary.  
*The determining of these Instruments finalises the investigation in relation to methaemoglobin-aemia as advertised in the Government Notices Gazette of 14 November 2017.* |
| 19 & 20/2019 | dental malocclusion | These Instruments result from an investigation notified by the Authority in the Government Notices Gazette of 14 November 2017 concerning dental malocclusion in accordance with section 196G of the VEA. The investigation involved an examination of the sound medical-scientific evidence now available to the Authority, including the sound medical-scientific evidence it has previously considered. The contents of these Instruments are in similar terms as the repealed Instruments. Comparing these Instruments and the repealed Instruments, the differences include:  
**For RH & BoP SoPs (Instrument Nos. 19 & 20/2019)**  
- adopting the latest revised Instrument format, which commenced in 2015;  
- specifying a day of commencement for the Instrument in section 2;  
- revising the definition of 'dental malocclusion' in subsection 7(2);  
- revising the reference to 'ICD-10-AM code' in subsection 7(4);  
- revising the factors in subsections 9(1) & 9(10) concerning 'injury resulting in distortion of the temporomandibular joint or fracture of the maxilla or mandible';  
- new factors in subsections 9(2) & 9(11) concerning 'surgery involving the temporomandibular joint, maxilla or mandible';  
- revising the factors in subsections 9(3) & 9(12) concerning 'loss of one or more teeth';  
- revising the factors in subsections 9(4) & 9(13) concerning 'maxillofacial disease';  
- revising the factors in subsections 9(5) & 9(14) concerning 'peripheral odontogenic fibroma or a peripheral ossifying fibroma';  
- new factors in subsections 9(7) & 9(16) concerning 'ill-fitting dental restoration or orthodontic device';  
- new factors in subsections 9(8) & 9(17) concerning 'advanced periodontitis';  
- new factors in subsections 9(9) & 9(18) concerning 'macroGLOSSIA';  
- new definitions of 'dental hyperocclusion', 'macroGLOSSIA', 'maxillofacial disease', 'MRCA' and 'VEA' in Schedule 1 – Dictionary; and  
- revising the definition of 'relevant service' in Schedule 1 – Dictionary; and  
- deleting the definitions of 'a mandibular repositioning appliance', 'a maxillofacial disease process' and 'maxillofacial trauma'.  
*The determining of these Instruments finalises the investigation in relation to dental malocclusion as advertised in the Government Notices Gazette of 14 November 2017.* |
| 21 & 22/2019 | acute articular cartilage tear | These Instruments result from an investigation notified by the Authority in the Government Notices Gazette of 14 November 2017 concerning acute articular cartilage tear in accordance with section 196G of the VEA. The investigation involved an examination of the sound medical-scientific evidence now available to the Authority, including the sound medical-scientific evidence it has previously considered. |
### SUMMARY OF CHANGES

The contents of these Instruments are in similar terms as the repealed Instruments. Comparing these Instruments and the repealed Instruments, the differences include:

**For RH& BoP SoPs (Instrument Nos. 21 & 22/2019)**
- adopting the latest revised Instrument format, which commenced in 2015;
- specifying a day of commencement for the Instrument in section 2;
- revising the definition of 'acute articular cartilage tear' in subsection 7(2);
- new factor in subsection 9(2) concerning 'intra-articular surgery';
- new definitions of 'MRCA' and 'VEA' in Schedule 1 - Dictionary; and
- revising the definition of 'relevant service' in Schedule 1 – Dictionary.

The determining of these Instruments finalises the investigation in relation to **acute articular cartilage tear** as advertised in the Government Notices Gazette of 14 November 2017.

<table>
<thead>
<tr>
<th>Date</th>
<th>Condition</th>
<th>Details</th>
</tr>
</thead>
</table>
| 23 & 24/2019 | sinus barotrauma                 | These Instruments result from an investigation notified by the Authority in the Government Notices Gazette of 14 November 2017 concerning *sinus barotrauma* in accordance with section 196G of the VEA. The investigation involved an examination of the sound medical-scientific evidence now available to the Authority, including the sound medical-scientific evidence it has previously considered. The contents of these Instruments are in similar terms as the repealed Instruments. Comparing these Instruments and the repealed Instruments, the differences include: **For RH & BoP SoPs (Instrument Nos. 23 & 24/2019)**
- adopting the latest revised Instrument format, which commenced in 2015;
- specifying a day of commencement for the Instrument in section 2;
- revising the definition of *sinus barotrauma* in subsection 7(2);
- revising the reference to 'ICD-10-AM code' in subsection 7(4);
- revising the factors in subsections 9(1) & 9(6) concerning 'change in the ambient barometric pressure', by the inclusion of a note;
- revising the factors in subsections 9(2) & 9(7) concerning 'mechanical ventilation';
- new factors in subsections 9(3) & 9(8) concerning 'explosive blast';
- new factors in subsections 9(4) & 9(9) concerning 'impaired drainage of the sinus';
- new factors in subsections 9(5) & 9(10) concerning 'allergic rhinitis or sinusitis';
- new definitions of 'impaired drainage of the sinus', 'MRCA' and 'VEA' in Schedule 1 - Dictionary; and
- revising the definition of 'relevant service' in Schedule 1 – Dictionary. **The determining of these Instruments finalises the investigation in relation to sinus barotrauma as advertised in the Government Notices Gazette of 14 November 2017.** |
| 25 & 26/2019 | acute meniscal tear of the knee   | These Instruments result from an investigation notified by the Authority in the Government Notices Gazette of 14 November 2017 concerning *acute meniscal tear of the knee* in accordance with section 196G of the VEA. The investigation involved an examination of the sound medical-scientific evidence now available to the Authority, including the sound medical-scientific evidence it has previously considered. The contents of these Instruments are in similar terms as the repealed Instruments. Comparing these Instruments and the repealed Instruments, the differences include: **For RH & BoP SoPs (Instrument Nos. 25 & 26/2019)**
- adopting the latest revised Instrument format, which commenced in 2015;
- specifying a day of commencement for the Instrument in section 2;
- revising the definition of *acute meniscal tear of the knee* in subsection 7(2);
- revising the reference to 'ICD-10-AM code' in subsection 7(4);
- new definitions of 'MRCA' and 'VEA' in Schedule 1 - Dictionary; and
- revising the definition of 'relevant service' in Schedule 1 – Dictionary. **The determining of these Instruments finalises the investigation in relation to acute meniscal tear of the knee as advertised in the Government Notices Gazette of 14 November 2017.** |
| 27 & 28/2019 | pilonidal sinus                   | These Instruments result from an investigation notified by the Authority in the Government Notices Gazette of 14 November 2017 concerning *pilonidal sinus* in accordance with section 196G of the VEA. The investigation involved an examination of the sound medical-scientific evidence now available to the Authority, including the sound medical-scientific evidence it has previously considered. |
### SUMMARY OF CHANGES

The contents of these Instruments are in similar terms as the repealed Instruments. Comparing these Instruments and the repealed Instruments, the differences include:

**For RH & BoP SoPs (Instrument Nos. 27 & 28/2019)**
- adopting the latest revised Instrument format, which commenced in 2015;
- specifying a day of commencement for the Instrument in section 2;
- revising the definition of 'pilonidal sinus' in subsection 7(2);
- revising the reference to 'ICD-10-AM code' in subsection 7(4);
- revising the factor in subsection 9(1)(a) concerning 'working as a hairdresser or barber', for pilonidal sinus of the hand or foot only;
- revising the factor in subsection 9(1)(b) concerning 'cutaneous exposure to animal hair', for pilonidal sinus of the hand or foot only, by the inclusion of a note;
- revising the factors in subsections 9(2)(a) & 9(5)(a) concerning 'driving or being a seated passenger in a motorised vehicle', for pilonidal sinus of the sacrococcygeal region only;
- revising the factors in subsections 9(2)(b) & 9(5)(b) concerning 'being overweight or obese', for pilonidal sinus of the sacrococcygeal region only;
- new factors in subsections 9(3) & 9(6) concerning 'inability to shower or bathe', for pilonidal sinus of the sacrococcygeal and umbilical regions only;
- new factor in subsection 9(4)(a) concerning 'working as a hairdresser or barber', for clinical worsening, for pilonidal sinus of the hand or foot only;
- new factor in subsection 9(4)(b) concerning 'cutaneous exposure to animal hair', for clinical worsening, for pilonidal sinus of the hand or foot only;
- new definitions of 'being overweight or obese', 'BMI', 'MRCA' and 'VEA' in Schedule 1 - Dictionary;
- revising the definitions of 'having cutaneous exposure to animal hair' and 'relevant service' in Schedule 1 - Dictionary; and
- deleting the definition of 'being obese'.

The determining of these Instruments finalises the investigation in relation to pilonidal sinus as advertised in the Government Notices Gazette of 14 November 2017.

**29 & 30/2019 Blepharitis**

These Instruments result from an investigation notified by the Authority in the Government Notices Gazette of 14 November 2017 concerning blepharitis in accordance with section 196G of the VEA. The investigation involved an examination of the sound medical-scientific evidence now available to the Authority, including the sound medical-scientific evidence it has previously considered.

The contents of these Instruments are in similar terms as the repealed Instruments. Comparing these Instruments and the repealed Instruments, the differences include:

**For RH SoP (Instrument No. 29/2019)**
- adopting the latest revised Instrument format, which commenced in 2015;
- specifying a day of commencement for the Instrument in section 2;
- revising the definition of 'blepharitis' in subsection 7(2);
- revising the factors in subsections 9(2) & 9(19) concerning 'infection of the affected eyelid';
- new factors in subsections 9(3) & 9(20) concerning 'infestation of the affected eyelid region';
- revising the factors in subsections 9(6) & 9(22) concerning 'rosacea of the periocular region';
- new factors in subsections 9(7) & 9(23) concerning 'psoriasis of the periocular region';
- new factors in subsections 9(8) & 9(24) concerning 'discoid lupus erythematosus of the periocular region';
- revising the factors in subsections 9(9) & 9(25) concerning 'ocular or periocular exposure to an allergen';
- revising the factors in subsections 9(10) & 9(26) concerning 'irritant substance exposure';
- revising the factors in subsections 9(11) & 9(27) concerning 'mustard gas exposure';
- revising the factors in subsections 9(12) & 9(28) concerning 'a course of therapeutic radiation';
- revising the factors in subsections 9(13) & 9(29) concerning 'a benign or malignant neoplasm';
- new factors in subsections 9(14) & 9(30) concerning 'dry eye disease';
- revising the factors in subsections 9(16) & 9(32) concerning 'an immunocompromised state';
- new factor in subsection 9(17) concerning 'oral isotretinoin or oral acitretin', for clinical onset only;
- deleting the factors concerning 'infestation of Phthirus pubis' as they are subsumed by the factors in subsections 9(3) & 9(20) concerning 'infestation of the affected eyelid region'.

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### SUMMARY OF CHANGES

- deleting the factors concerning 'infestation of *Demodex folliculorum* or *Demodex brevis* mites' as they are subsumed by the factors in subsections 9(3) & 9(20) concerning 'infestation of the affected eyelid region';
- deleting the factors concerning 'vitamin A or vitamin B complex deficiency' as they are subsumed by the factors in subsections 9(16) & 9(32) concerning 'an immunocompromised state';
- deleting the factors concerning 'xerophthalmia' as they are subsumed by the factors in subsections 9(14) & 9(30) concerning 'dry eye disease';
- deleting the factor concerning 'treatment with an epidermal growth factor receptor inhibitor' as it is subsumed by the factor in subsection 9(16) and now included in the factor in subsection 9(32) concerning 'an immunocompromised state';
- deleting the factor concerning 'treatment with hydroxyurea or indinavir' as it is subsumed by the factor in subsection 9(16) and now included in the factor in subsection 9(32) concerning 'an immunocompromised state';
- new definitions of 'chronic renal failure', 'dry eye disease', 'immunocompromised state as specified', 'immunosuppressive drug', 'infection of the affected eyelid', 'MRCA', 'specified list of parasites' and 'VEA' in Schedule 1 - Dictionary;
- revising the definitions of 'allergen', 'irritant substance' and 'relevant service' in Schedule 1 - Dictionary; and
- deleting the definitions of 'a course of therapeutic radiation', 'an immunocompromised state', 'an infection of the eyelid' and 'ocular rosacea'.

**For BoP SoP (Instrument No. 30/2019)**

- adopting the latest revised Instrument format, which commenced in 2015;
- specifying a day of commencement for the Instrument in section 2;
- revising the definition of 'blepharitis' in subsection 7(2);
- revising the factors in subsections 9(1) & 9(16) concerning 'infection of the affected eyelid';
- new factors in subsections 9(2) & 9(17) concerning 'infestation of the affected eyelid region';
- revising the factors in subsections 9(5) & 9(19) concerning 'rosacea of the periocular region';
- new factors in subsections 9(6) & 9(20) concerning 'psoriasis of the periocular region';
- new factors in subsections 9(7) & 9(21) concerning 'discoid lupus erythematosus of the periocular region';
- revising the factors in subsections 9(8) & 9(22) concerning 'ocular or periocular exposure to an allergen';
- revising the factors in subsections 9(9) & 9(23) concerning 'irritant substance exposure';
- revising the factors in subsections 9(10) & 9(24) concerning 'mustard gas exposure';
- revising the factors in subsections 9(11) & 9(25) concerning 'a course of therapeutic radiation';
- revising the factors in subsections 9(12) & 9(26) concerning 'a benign or malignant neoplasm';
- new factors in subsections 9(13) & 9(27) concerning 'dry eye disease';
- revising the factors in subsections 9(14) & 9(28) concerning 'an immunocompromised state';
- new factor in subsection 9(15) concerning 'oral isotretinoin or oral acitretin', for clinical onset only;
- deleting the factors concerning 'diabetes mellitus';
- deleting the factors concerning 'infestation of *Phthirus pubis*' as they are subsumed by the factors in subsections 9(2) & 9(17) concerning 'infestation of the affected eyelid region';
- deleting the factors concerning 'infestation of *Demodex folliculorum* or *Demodex brevis* mites' as they are subsumed by the factors in subsections 9(2) & 9(17) concerning 'infestation of the affected eyelid region';
- deleting the factors concerning 'vitamin A or vitamin B complex deficiency' as they are subsumed by the factors in subsections 9(14) & 9(28) concerning 'an immunocompromised state';
- deleting the factors concerning 'xerophthalmia' as they are subsumed by the factors in subsections 9(13) & 9(27) concerning 'dry eye disease';
- deleting the factor concerning 'treatment with an epidermal growth factor receptor inhibitor' as it is subsumed by the factor in subsection 9(14) and now included in the factor in subsection 9(28) concerning 'an immunocompromised state';
- deleting the factor concerning 'treatment with hydroxyurea or indinavir' as it is subsumed by the factor in subsection 9(14) and now included in the factor in subsection 9(28) concerning 'an immunocompromised state';
### SUMMARY OF CHANGES

- new definitions of 'chronic renal failure', 'dry eye disease', 'immunocompromised state as specified', 'immunosuppressive drug', 'infection of the affected eyelid', 'MRCA', 'specified list of parasites' and 'VEA' in Schedule 1 - Dictionary;
- revising the definitions of 'allergen', 'irritant substance' and 'relevant service' in Schedule 1 - Dictionary; and
- deleting the definitions of 'a course of therapeutic radiation', 'an immunocompromised state', 'an infection of the eyelid' and 'ocular rosacea'.

On 11 October 2018, the Authority wrote to organisations representing veterans, service personnel and their dependants regarding the proposed Instruments and the medical-scientific material considered by the Authority. This letter emphasised the deletion of factors relating to *diabetes mellitus* in the Balance of Probabilities Statement of Principles. The Authority provided an opportunity to the organisations to make representations in relation to the proposed Instruments prior to their determination. No submissions were received for consideration by the Authority. Minor changes were made to the proposed Instruments following this consultation process.

**The determining of these Instruments finalises the investigation in relation to blepharitis as advertised in the Government Notices Gazette of 14 November 2017.**

<table>
<thead>
<tr>
<th>31 &amp; 32/2019</th>
<th>chronic pruritus ani</th>
</tr>
</thead>
<tbody>
<tr>
<td>These Instruments result from an investigation notified by the Authority in the Government Notices Gazette of 14 November 2017 concerning chronic pruritus ani in accordance with section 196G of the VEA. The investigation involved an examination of the sound medical-scientific evidence now available to the Authority, including the sound medical-scientific evidence it has previously considered. The contents of these Instruments are in similar terms as the repealed Instruments. Comparing these Instruments and the repealed Instruments, the differences include:</td>
<td></td>
</tr>
<tr>
<td><strong>For RH &amp; BoP SoPs (Instrument Nos. 31 &amp; 32/2019)</strong></td>
<td></td>
</tr>
<tr>
<td>• adopting the latest revised Instrument format, which commenced in 2015;</td>
<td></td>
</tr>
<tr>
<td>• specifying a day of commencement for the Instrument in section 2;</td>
<td></td>
</tr>
<tr>
<td>• revising the definition of 'chronic pruritus ani' in subsection 7(2);</td>
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<tr>
<td>• revising the factors in subsections 9(1) &amp; 9(13) concerning 'adequate anal hygiene';</td>
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<tr>
<td>• new factors in subsections 9(2) &amp; 9(14) concerning 'excessive cleansing of the perianal area';</td>
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</tr>
<tr>
<td>• revising the factors in subsections 9(3) &amp; 9(15) concerning 'daily episodes of diarrhoea';</td>
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<tr>
<td>• new factors in subsections 9(4) &amp; 9(16) concerning 'faecal incontinence';</td>
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<tr>
<td>• revising the factors in subsections 9(5) &amp; 9(17) concerning 'rectal, anal and perianal conditions';</td>
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</tr>
<tr>
<td>• revising the factors in subsections 9(6) &amp; 9(18) concerning 'perianal or anal infection';</td>
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<tr>
<td>• revising the factors in subsections 9(7) &amp; 9(19) concerning 'perianal or anal infestation', by the inclusion of a note;</td>
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<tr>
<td>• revising the factors in subsections 9(8) &amp; 9(20) concerning 'pathological vaginal discharge',</td>
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<tr>
<td>• revising the factors in subsections 9(9) &amp; 9(21) concerning 'dermatological disease';</td>
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<tr>
<td>• revising the factors in subsections 9(10) &amp; 9(22) concerning 'systemic disease';</td>
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<tr>
<td>• revising the factors in subsections 9(11) &amp; 9(23) concerning 'therapeutic radiation';</td>
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<tr>
<td>• deleting the factors concerning 'being systemically treated with water-soluble corticosteroid phosphates';</td>
<td></td>
</tr>
<tr>
<td>• deleting the factors concerning 'being treated with nicosamide, clioquinol or mineral oil';</td>
<td></td>
</tr>
<tr>
<td>• new definitions of 'chronic renal failure', 'excessive cleansing of the perianal area', 'faecal incontinence', 'iron deficiency', 'MRCA', 'radiation recall dermatitis', 'specified list of dermatological diseases', 'specified list of infections', 'specified list of infestations', 'specified list of rectal, anal and perianal conditions', 'specified list of systemic diseases', 'systemic contact dermatitis' and 'VEA' in Schedule 1 - Dictionary;</td>
<td></td>
</tr>
<tr>
<td>• revising the definition of 'relevant service' in Schedule 1 - Dictionary; and</td>
<td></td>
</tr>
<tr>
<td>• deleting the definitions of 'a course of therapeutic radiation', 'a dermatological disease from the specified list', 'a rectal or anal condition from the specified list', 'a systemic disease from the specified list, 'an agent from the specified list of infections' and 'an agent from the specified list of infestations'.</td>
<td></td>
</tr>
</tbody>
</table>

On 11 October 2018, the Authority wrote to organisations representing veterans, service personnel and their dependants regarding the proposed Instruments and the medical-scientific material considered by the Authority. This letter emphasised the deletion of factors relating to *being systemically treated with water-soluble corticosteroid phosphates and being treated with nicosamide, clioquinol or mineral oil*. The Authority provided an opportunity to the organisations to make representations in relation to the proposed Instruments prior to their determination. No submissions were received for consideration by the Authority. Minor
**SUMMARY OF CHANGES**

Typographical changes were made to the proposed Instruments following this consultation process.

The determining of these Instruments finalises the investigation in relation to *chronic pruritus ani* as advertised in the Government Notices Gazette of 14 November 2017.

<table>
<thead>
<tr>
<th>Instruments</th>
<th>Description</th>
</tr>
</thead>
</table>
| 33 & 34/2019 Alzheimer disease | These Instruments result from an investigation notified by the Authority in the Government Notices Gazette of 14 November 2017 concerning *Alzheimer-type dementia* in accordance with section 196G of the VEA. The investigation involved an examination of the sound medical-scientific evidence now available to the Authority, including the sound medical-scientific evidence it has previously considered. The contents of these Instruments are in similar terms as the repealed Instruments. Comparing these Instruments and the repealed Instruments, the differences include: **For RH SoP (Instrument No. 33/2019)**

- adopting the latest revised Instrument format, which commenced in 2015;
- specifying a day of commencement for the Instrument in section 2;
- changing the title of the Instrument to 'Alzheimer disease';
- new definition of 'Alzheimer disease' in subsection 7(2);
- including ICD-10-AM codes for 'Alzheimer disease' in subsection 7(3);
- including the reference to 'ICD-10-AM code' in subsection 7(4);
- revising the factor in subsection 9(1) concerning 'moderate to severe traumatic brain injury';
- revising the factor in subsection 9(2) concerning 'smoking';
- revising the factor in subsection 9(3) concerning 'a course of therapeutic radiation';
- revising the factor in subsection 9(4) concerning 'extremely low frequency electromagnetic field (ELF-EMF)';
- revising the factor in subsection 9(5) concerning 'being obese';
- revising the factor in subsection 9(6) concerning 'dyslipidaemia';
- revising the factor in subsection 9(7) concerning 'diabetes mellitus';
- revising the factor in subsection 9(8) concerning 'hypertension';
- revising the factor in subsection 9(9) concerning 'hyperhomocysteinaemia';
- revising the factor in subsection 9(10) concerning 'extremely low frequency electromagnetic field (ELF-EMF)';
- revising the definitions of 'being obese', 'extremely low frequency electromagnetic field (ELF-EMF)', 'pack-years of cigarettes, or the equivalent thereof in other tobacco products' and 'relevant service' in Schedule 1 - Dictionary; and
- deleting the definitions of 'a thyroid disorder as specified' and 'cumulative equivalent dose'. **For BoP SoP (Instrument No. 34/2019)**

- adopting the latest revised Instrument format, which commenced in 2015;
- specifying a day of commencement for the Instrument in section 2;
- changing the title of the Instrument to 'Alzheimer disease';
- new definition of 'Alzheimer disease' in subsection 7(2);
- including ICD-10-AM codes for 'Alzheimer disease' in subsection 7(3);
- including the reference to 'ICD-10-AM code' in subsection 7(4);
- revising the factor in subsection 9(1) concerning 'smoking';
- new factor in subsection 9(2) concerning 'a course of therapeutic radiation';
- new factor in subsection 9(3) concerning 'being obese';
- new factor in subsection 9(4) concerning 'dyslipidaemia';
- revising the factor in subsection 9(5) concerning 'diabetes mellitus';
- revising the factor in subsection 9(6) concerning 'hyperhomocysteinaemia';
- new factor in subsection 9(7) concerning 'inability to undertake any physical activity greater than three METs';
- new factor in subsection 9(13) concerning 'being treated with an anticholinergic drug';
- deleting the factor concerning 'having a thyroid disorder';
- deleting the factor concerning 'ionising radiation';
- new definitions of 'atypical presentations of Alzheimer disease', 'BMI', 'cumulative dose', 'DSM-5', 'major neurocognitive disorder', 'MET', 'mild neurocognitive disorder', 'MRCA', 'specified list of anticholinergic drugs' and 'VEA' in Schedule 1 - Dictionary; and
- revising the definitions of 'being obese', 'extremely low frequency electromagnetic field (ELF-EMF)', 'pack-years of cigarettes, or the equivalent thereof in other tobacco products' and 'relevant service' in Schedule 1 - Dictionary; and
- deleting the definitions of 'a thyroid disorder as specified' and 'cumulative equivalent dose'.

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**SUMMARY OF CHANGES**

- revising the definitions of 'pack-years of cigarettes, or the equivalent thereof in other tobacco products' and 'relevant service' in Schedule 1 - Dictionary.

On 11 October 2018, the Authority wrote to organisations representing veterans, service personnel and their dependants regarding the proposed Instruments and the medical-scientific material considered by the Authority. This letter emphasised the deletion of factors relating to having a thyroid disorder and ionising radiation in the Reasonable Hypothesis Statement of Principles. The Authority provided an opportunity to the organisations to make representations in relation to the proposed Instruments prior to their determination. No submissions were received for consideration by the Authority. Minor typographical changes were made to the proposed Instruments following this consultation process.

The determining of these Instruments finalises the investigation in relation to Alzheimer-type dementia as advertised in the Government Notices Gazette of 14 November 2017.

<table>
<thead>
<tr>
<th>35 &amp; 36/2019</th>
<th>neurocognitive disorder with Lewy bodies</th>
</tr>
</thead>
</table>
| These Instruments result from an investigation notified by the Authority in the Government Notices Gazette of 14 November 2017 concerning Alzheimer-type dementia in accordance with section 196G of the VEA. The investigation involved an examination of the sound medical-scientific evidence now available to the Authority, including the sound medical-scientific evidence it has previously considered.

The contents of these Instruments are in similar terms as the repealed Instruments. Comparing these Instruments and the repealed Instruments, the differences include:

### For RH SoP (Instrument No. 33/2019)

- adopting the latest revised Instrument format, which commenced in 2015;
- specifying a day of commencement for the Instrument in section 2;
- separating the Instruments for Alzheimer-type dementia into two conditions with the Instruments titled Alzheimer disease and neurocognitive disorder with Lewy bodies;
- new definition of 'neurocognitive disorder with Lewy bodies' in subsection 7(2);
- including ICD-10-AM codes for 'neurocognitive disorder with Lewy bodies' in subsection 7(3);
- revising the factor in subsection 9(1) concerning 'major depressive disorder';
- revising the factor in subsection 9(2) concerning 'posttraumatic stress disorder';
- new factor in subsection 9(3) concerning 'being treated with an antipsychotic drug', for clinical worsening only;
- new factor in subsection 9(4) concerning 'being treated with an anticholinergic drug', for clinical worsening only;
- deleting various factors relating to 'moderate to severe cerebral trauma', 'smoking', 'extremely low frequency electromagnetic field', 'dyslipidaemia', 'diabetes mellitus', 'being obese', 'hypertension', 'hyperhomocysteinaemia', 'thyroid disorder', 'ionising radiation' and 'therapeutic radiation';
- new definitions of 'DSM-5', 'major neurocognitive disorder', 'mild neurocognitive disorder', 'MRCA', 'specified list of anticholinergic drugs' and 'VEA' in Schedule 1 - Dictionary;
- revising the definition of 'relevant service' in Schedule 1 - Dictionary; and
- deleting the definitions of 'a thyroid disorder as specified', 'cumulative equivalent dose', 'being obese', 'dyslipidaemia', 'extremely low frequency electromagnetic field (ELF-EMF)', 'hyperhomocysteinaemia' and 'pack-years of cigarettes, or the equivalent thereof in other tobacco products'.

### For BoP SoP (Instrument No. 34/2019)

- adopting the latest revised Instrument format, which commenced in 2015;
- specifying a day of commencement for the Instrument in section 2;
- separating the Instruments for Alzheimer-type dementia into two conditions with the Instruments titled Alzheimer disease and neurocognitive disorder with Lewy bodies;
- new definition of 'neurocognitive disorder with Lewy bodies' in subsection 7(2);
- including ICD-10-AM codes for 'neurocognitive disorder with Lewy bodies' in subsection 7(3);
- new factor in subsection 9(1) concerning 'being treated with an antipsychotic drug', for clinical worsening only;
- deleting various factors relating to 'smoking', 'diabetes mellitus' and 'hyperhomocysteinaemia';
- new definitions of 'DSM-5', 'major neurocognitive disorder', 'mild neurocognitive disorder', 'MRCA' and 'VEA' in Schedule 1 - Dictionary;
- revising the definition of 'relevant service' in Schedule 1 - Dictionary; and
- deleting the definitions of 'hyperhomocysteinaemia' and 'pack-years of cigarettes, or the equivalent thereof in other tobacco products'.
SUMMARY OF CHANGES

On 11 October 2018, the Authority wrote to organisations representing veterans, service personnel and their dependants regarding the proposed Instruments concerning Alzheimer disease and concerning neurocognitive disorder with Lewy bodies, and the medical-scientific material considered by the Authority. The Statements of Principles Nos. 22 and 23 of 2010 concerning Alzheimer-type dementia included 'dementia with Lewy bodies' as a condition covered by those Statements of Principles. On consideration of the sound medical-scientific evidence, the Repatriation Medical Authority concluded that Alzheimer disease and neurocognitive disorder with Lewy bodies are separate diseases, and decided to determine new Statements of Principles for neurocognitive disorder with Lewy bodies. The new evidence for neurocognitive disorder with Lewy bodies supports a limited number of risk factors being causally associated with the clinical onset and worsening of this disease. This letter emphasised that certain factors included in the Statements of Principles concerning Alzheimer-type dementia would not be included in the new RH Statements of Principles concerning neurocognitive disorder with Lewy bodies. These factors concern moderate to severe cerebral trauma, smoking, extremely low frequency electromagnetic field (ELF-EMF), dyslipidaemia, diabetes mellitus, being obese, hypertension, hyperhomocysteinaemia, a specified thyroid disorder, ionising radiation and therapeutic radiation for cancer. This letter also emphasised that certain factors included in the Statements of Principles concerning Alzheimer-type dementia would not be included in the new BoP Statements of Principles concerning neurocognitive disorder with Lewy bodies. These factors concern smoking, hyperhomocysteinaemia and diabetes mellitus. The Authority provided an opportunity to the organisations to make representations in relation to the proposed Instruments prior to their determination. No submissions were received for consideration by the Authority. Minor typographical changes were made to the proposed Instruments following this consultation process.

The determining of these new Instruments finalises the investigation in relation to Alzheimer-type dementia as advertised in the Government Notices Gazette of 14 November 2017.

<table>
<thead>
<tr>
<th>Code</th>
<th>Condition</th>
<th>Status</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>37 &amp; 38/2019</td>
<td>chronic insomnia disorder</td>
<td>New Condition</td>
<td>The determining of these new Instruments finalises the investigation in relation to chronic insomnia disorder as advertised in the Government Notices Gazette of 4 September 2018.</td>
</tr>
<tr>
<td>39 &amp; 40/2019</td>
<td>trigger finger</td>
<td>New Condition</td>
<td>The determining of these new Instruments finalises the investigation in relation to stenosing tenosynovitis (in particular trigger finger/thumb and de Quervain tenosynovitis) as advertised in the Government Notices Gazette of 4 September 2018.</td>
</tr>
<tr>
<td>41 &amp; 42/2019</td>
<td>de Quervain tendinopathy</td>
<td>New Condition</td>
<td>The determining of these new Instruments finalises the investigation in relation to stenosing tenosynovitis (in particular trigger finger/thumb and de Quervain tenosynovitis) as advertised in the Government Notices Gazette of 4 September 2018.</td>
</tr>
</tbody>
</table>
| 43 & 44/2019 | subdural haematoma | Amendment | These instruments amend Statements of Principles Nos. 33 & 34 of 2011 concerning subdural haematoma by:  

**For RH Amendment SoP (Instrument No. 43/2019)**
- replacing the existing factors "(e)" and "(h)" in clause 6 concerning 'undergoing antithrombotic therapy';
- inserting new factors "(ea)" and "(ha)" concerning 'taking at least 700 milligrams of aspirin';
- inserting a definition of "antithrombotic therapy" in clause 9 in alphabetical order;
- repealing the existing definition of "a drug from the specified list" in clause 9; and
- specifying the day of commencement of these amendments.

**For BoP Amendment SoP (Instrument No. 44/2019)**
- replacing the existing factors "(d)" and "(g)" in clause 6 concerning 'undergoing antithrombotic therapy';
- inserting new factors "(da)" and "(ga)" concerning 'taking at least 700 milligrams of aspirin';
- inserting a definition of "antithrombotic therapy" in clause 9 in alphabetical order;
- repealing the existing definition of "a drug from the specified list" in clause 9; and
- specifying the day of commencement of these amendments.

The determining of these Instruments finalises the investigation in relation to subdural haematoma as advertised in the Government Notices Gazette of 6 November 2018.