



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

**Statement of Principles**  
**concerning**  
**TENSION-TYPE HEADACHE**  
**(Balance of Probabilities)**  
**(No. 38 of 2018)**

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The Repatriation Medical Authority determines the following Statement of Principles under subsection 196B(3) of the *Veterans' Entitlements Act 1986*.

Dated 27 April 2018

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

A handwritten signature in black ink, appearing to read 'Nicholas Saunders'.

Professor Nicholas Saunders AO  
Chairperson

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**1 Name**

This is the Statement of Principles concerning *tension-type headache (Balance of Probabilities)* (No. 38 of 2018).

**2 Commencement**

This instrument commences on 28 May 2018.

**3 Authority**

This instrument is made under subsection 196B(3) of the *Veterans' Entitlements Act 1986*.

**4 Revocation**

The Statement of Principles concerning tension-type headache No. 2 of 2010 made under subsection 196B(3) of the VEA is revoked.

**5 Application**

This instrument applies to a claim to which section 120B of the VEA or section 339 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 tension-type headache and death from tension-type headache.

*Meaning of tension-type headache*

- (2) For the purposes of this Statement of Principles, tension-type headache:
- (a) means a condition in which within a 12 month period, there are episodes of headache lasting at least 30 minutes, occurring on at least one day per month for at least three consecutive months, and a minimum of ten episodes occur within that 12 month period; and
  - (b) has at least two of the following characteristics:
    - (i) bilateral location;
    - (ii) pressing/tightening (nonpulsating) quality;
    - (iii) mild or moderate intensity;
    - (iv) not aggravated by routine physical activity (such as walking or climbing stairs); and

- (c) causes clinically significant distress or impairment of social, occupational, educational, or other important areas of functioning; and
  - (d) excludes:
    - (i) cluster headache;
    - (ii) migraine;
    - (iii) headache attributable to structural abnormalities or inflammatory disorders of the head and neck;
    - (iv) headache attributable to systemic disease; and
    - (v) headache that results from normal physiological stress such as exercise, or the temporary effect of extraneous agents.
- (3) While tension-type headache attracts ICD-10-AM code G44.2, in applying this Statement of Principles the meaning of tension-type headache 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 tension-type headache*

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

Note: *terminal event* is defined in the Schedule 1 – Dictionary.

## **8 Basis for determining the factors**

On the sound medical-scientific evidence available, the Repatriation Medical Authority is of the view that it is more probable than not that tension-type headache and death from tension-type headache can be related to relevant service rendered by veterans 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 exist before it can be said that, on the balance of probabilities, tension-type headache or death from tension-type headache is connected with the circumstances of a person's relevant service:

- (1) for chronic tension-type headache in migraine and cluster headache sufferers only, taking a drug as specified, for at least the three months before the clinical onset of tension-type headache;

Note: *chronic tension-type headache* and *taking a drug as specified* are defined in the Schedule 1 - Dictionary.

- (2) taking a drug as specified, for at least the three months before the clinical worsening of tension-type headache;

Note: *taking a drug as specified* is defined in the Schedule 1 - Dictionary.

- (3) undergoing treatment with a nitric oxide donor, at the time of the clinical worsening of tension-type headache;

Note: *nitric oxide donor* is defined in the Schedule 1 - Dictionary.

- (4) inability to obtain appropriate clinical management for tension-type headache.

## **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(2) to 9(4) apply only to material contribution to, or aggravation of, tension-type headache where the person's tension-type headache 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(3) 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:

***chronic tension-type headache*** means tension-type headache that lasts for hours or may be continuous, occurring on at least 15 days per month on average, for more than three months.

***combination analgesic medication*** means medication containing a simple analgesic combined with an opioid, butalbital or caffeine.

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

***nitric oxide donor*** means a pharmacologically active substance that releases nitric oxide *in vivo* or *in vitro* and includes amyl nitrate, glyceryl trinitrate, isosorbide mononitrate, isosorbide dinitrate, sodium nitroprusside, mannitol hexanitrate and nitrous oxide.

***relevant service*** means:

- (a) eligible war service (other than operational service) under the VEA;
- (b) defence service (other than hazardous service and British nuclear test defence service) under the VEA; or
- (c) peacetime service under the MRCA.

Note: ***MRCA*** and ***VEA*** are also defined in the Schedule 1 - Dictionary.

***taking a drug as specified*** means:

- (a) taking a simple analgesic on at least three days per week; or
- (b) taking a triptan, ergotamine, an opioid, or a combination analgesic medication on at least two days per week.

Note: ***combination analgesic medication*** and ***triptan*** are also defined in the Schedule 1 – Dictionary.

***tension-type headache***—see subsection 7(2).

***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.

***triptan*** means a 5-hydroxytryptamine receptor agonist.

***VEA*** means the *Veterans' Entitlements Act 1986*.