



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

**Statement of Principles**  
**concerning**  
**PERIODONTITIS**  
**(Reasonable Hypothesis)**  
**(No. 27 of 2022)**

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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 4 March 2022

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 *periodontitis (Reasonable Hypothesis)* (No. 27 of 2022).

**2 Commencement**

This instrument commences on 4 April 2022.

**3 Authority**

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

**4 Repeal**

The Statement of Principles concerning periodontitis No. 47 of 2013 (Federal Register of Legislation No. F2013L01128) made under subsection 196B(2) of the VEA is repealed.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 periodontitis and death from periodontitis.

*Meaning of periodontitis*

- (2) For the purposes of this Statement of Principles, periodontitis:
- (a) means inflammation of the tissues that support the teeth, with periodontal pocketing and destruction of the periodontal ligament or alveolar bone, leading to progressive attachment loss and tooth loss at diseased sites; and
  - (b) includes:
    - (i) aggressive periodontitis;
    - (ii) chronic periodontitis;
    - (iii) necrotising ulcerative periodontitis;
    - (iv) peri-implantitis; and

- (v) periodontitis as a manifestation of acquired systemic disease; and
- (c) excludes:
- (i) abscess of the periodontium;
  - (ii) acute necrotising ulcerative gingivitis;
  - (iii) chronic apical periodontitis;
  - (iv) maxillary and mandibular osteonecrosis;
  - (v) other combined periodontic-endodontic lesions; and
  - (vi) pericoronitis.
- (3) While periodontitis attracts ICD-10-AM code K05.3, in applying this Statement of Principles the meaning of periodontitis 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 periodontitis*

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

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

- (1) having gingivitis involving the affected region of the periodontium for a continuous period of at least the 6 months before the clinical onset of periodontitis;

- (2) having a foreign body in contact with the affected region of the periodontium, on more days than not for a continuous period of at least 6 months before the clinical onset of periodontitis, and where the foreign body has been removed before the clinical onset of periodontitis, then that onset occurred within 4 weeks of removal;

Note: Examples of a foreign body in contact with the periodontium include an osseointegrated implant or dental prosthesis, a removable dental prosthesis and an orthodontic appliance such as a separator or elastic band.

- (3) having an oral piercing adjacent to the affected region of the periodontium for a continuous period of at least the 6 months before the clinical onset of periodontitis;

Note: *oral piercing* is defined in the Schedule 1 - Dictionary.

- (4) having trauma to the affected region of the periodontium within the 6 months before the clinical onset of periodontitis;

Note: *trauma to the affected region of the periodontium* is defined in the Schedule 1 - Dictionary.

- (5) having surgery to the affected region of the periodontium within the 6 months before the clinical onset of periodontitis;

- (6) having neutropenia or agranulocytosis at the time of the clinical onset of periodontitis;

Note: Causes of neutropenia or agranulocytosis include having an autoimmune disease or infection such as human immunodeficiency virus infection, and taking drugs such as clozapine, sulfasalazine, ticlopidine, methimazole, carbimazole and propylthiouracil.

- (7) having leukaemia at the time of the clinical onset of periodontitis;

- (8) having infection with human immunodeficiency virus at the time of the clinical onset of periodontitis;

- (9) having diabetes mellitus at the time of the clinical onset of periodontitis;

- (10) being obese for a continuous period of at least the 3 years before the clinical onset of periodontitis;

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

- (11) having chronic renal failure at the time of the clinical onset of periodontitis;

Note: *chronic renal failure* is defined in the Schedule 1 - Dictionary.

- (12) having an autoimmune disease from the specified list of autoimmune diseases at the time of the clinical onset of periodontitis;

Note: *specified list of autoimmune diseases* is defined in the Schedule 1 - Dictionary.

- (13) having smoked tobacco products:
- (a) in an amount of at least 2.5 pack-years before the clinical onset of periodontitis; and
  - (b) if smoking has ceased before the clinical onset of periodontitis, then that onset occurred within 10 years of cessation;

Note: *one pack-year* is defined in the Schedule 1 - Dictionary.

- (14) having severe malnutrition at the time of the clinical onset of periodontitis;

- (15) having severe vitamin C deficiency or vitamin D deficiency at the time of the clinical onset of periodontitis;

Note: *severe vitamin C deficiency* and *vitamin D deficiency* are defined in the Schedule 1 - Dictionary.

- (16) consuming an average of at least 200 grams of alcohol per week for a continuous period of at least the 2 years before the clinical onset of periodontitis;

Note: Alcohol consumption is calculated utilising the Australian Standard of 10 grams of alcohol per standard alcoholic drink.

- (17) having gingivitis involving the affected region of the periodontium for a continuous period of at least the 6 months before the clinical worsening of periodontitis;

- (18) having a foreign body in contact with the affected region of the periodontium, on more days than not for a continuous period of at least 6 months before the clinical worsening of periodontitis, and where the foreign body has been removed before the clinical worsening of periodontitis, then that worsening occurred within 4 weeks of removal;

Note: Examples of a foreign body in contact with the periodontium include an osseointegrated implant or dental prosthesis, a removable dental prosthesis and an orthodontic appliance such as a separator or elastic band.

- (19) having an oral piercing adjacent to the affected region of the periodontium for a continuous period of at least the 6 months before the clinical worsening of periodontitis;

Note: *oral piercing* is defined in the Schedule 1 - Dictionary.

- (20) having trauma to the affected region of the periodontium within the 6 months before the clinical worsening of periodontitis;

Note: *trauma to the affected region of the periodontium* is defined in the Schedule 1 - Dictionary.

- (21) having surgery to the affected region of the periodontium within the 6 months before the clinical worsening of periodontitis;

- (22) having neutropenia or agranulocytosis at the time of the clinical worsening of periodontitis;
- Note: Causes of neutropenia or agranulocytosis include having an autoimmune disease or infection such as human immunodeficiency virus infection, and taking drugs such as clozapine, sulfasalazine, ticlopidine, methimazole, carbimazole and propylthiouracil.
- (23) having leukaemia at the time of the clinical worsening of periodontitis;
- (24) having infection with human immunodeficiency virus at the time of the clinical worsening of periodontitis;
- (25) having diabetes mellitus at the time of the clinical worsening of periodontitis;
- (26) being obese for a continuous period of at least the 3 years before the clinical worsening of periodontitis;
- Note: *being obese* is defined in the Schedule 1 - Dictionary.
- (27) having chronic renal failure at the time of the clinical worsening of periodontitis;
- Note: *chronic renal failure* is defined in the Schedule 1 - Dictionary.
- (28) having an autoimmune disease from the specified list of autoimmune diseases at the time of the clinical worsening of periodontitis;
- Note: *specified list of autoimmune diseases* is defined in the Schedule 1 - Dictionary.
- (29) having smoked tobacco products:
- (a) in an amount of at least 2.5 pack-years before the clinical worsening of periodontitis; and
- (b) if smoking has ceased before the clinical worsening of periodontitis, then that worsening occurred within 10 years of cessation;
- Note: *one pack-year* is defined in the Schedule 1 - Dictionary.
- (30) having severe malnutrition at the time of the clinical worsening of periodontitis;
- (31) having severe vitamin C deficiency or vitamin D deficiency at the time of the clinical worsening of periodontitis;
- Note: *severe vitamin C deficiency* and *vitamin D deficiency* are defined in the Schedule 1 - Dictionary.
- (32) consuming an average of at least 200 grams of alcohol per week for a continuous period of at least the 2 years before the clinical worsening of periodontitis;
- Note: Alcohol consumption is calculated utilising the Australian Standard of 10 grams of alcohol per standard alcoholic drink.
- (33) having osteoporosis at the time of the clinical worsening of periodontitis;

(34) inability to obtain appropriate clinical management for periodontitis.

**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(17) to 9(34) apply only to material contribution to, or aggravation of, periodontitis where the person's periodontitis 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 also 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.

***chronic renal failure*** means:

- (a) having a glomerular filtration rate of less than 15 mL/min/1.73 m<sup>2</sup> for a period of at least 3 months; or
- (b) a need for renal replacement therapy (dialysis or transplantation) for treatment of complications of decreased glomerular filtration rate which would otherwise increase the risk of morbidity and mortality; or
- (c) undergoing chronic dialysis.

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

***one pack-year*** means the amount of tobacco consumed in smoking 20 cigarettes per day for a period of 1 year, or an equivalent amount of tobacco products.

Note 1: An equivalent amount of tobacco products is 7,300 grams of smoking tobacco by weight, either in cigarettes, pipe tobacco or cigars, or a combination of same. For pipe tobacco, cigars or combinations of multiple tobacco types, 1 gram of tobacco is considered to be equal to one cigarette.

Note 2: Pack-years are calculated by dividing the number of cigarettes smoked per day by 20 and multiplying this number by the number of years the person has smoked. For example, smoking 10 cigarettes per day for 10 years is equal to 5 pack-years, and smoking 40 cigarettes per day for 10 years is equal to 20 pack-years.

***oral piercing*** means insertion of an ornament into an opening made in the skin or mucosa of the tongue, lip or cheek.

***periodontitis***—see subsection 7(2).

***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.

***severe vitamin C deficiency*** means symptoms of scurvy or a serum ascorbic acid level of less than 2.5 milligrams per litre.

***specified list of autoimmune diseases*** means:

- (a) ankylosing spondylitis;
- (b) inflammatory bowel disease;
- (c) rheumatoid arthritis; or
- (d) systemic lupus erythematosus.

***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.

***trauma to the affected region of the periodontium*** means a blunt or penetrating injury resulting in:

- (a) fracture, luxation, loss or extraction of a tooth; or
- (b) disruption or fracture of the periodontium.

Note: Examples of luxation injuries include concussion, subluxation, extrusive luxation, lateral luxation and intrusive luxation of the tooth.

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

***vitamin D deficiency*** means a serum 25-hydroxyvitamin D level of less than 50 nanomoles per litre.