



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

**Statement of Principles**  
**concerning**  
**SICKLE-CELL DISORDER**  
**(Reasonable Hypothesis)**  
**(No. 31 of 2026)**

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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 24 April 2026

Professor Terence Campbell AM  
Chairperson  
by and on behalf of  
The Repatriation Medical Authority

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**1 Name**

This is the Statement of Principles concerning *sickle-cell disorder (Reasonable Hypothesis)* (No. 31 of 2026).

**2 Commencement**

This instrument commences on **25 May 2026**.

**3 Authority**

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

**4 Repeal**

The Statement of Principles concerning sickle-cell disorder (Reasonable Hypothesis) (No. 40 of 2017) (Federal Register of Legislation No. F2017L00879) made under subsection 196B(2) of the VEA is repealed.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 sickle-cell disorder and death from sickle-cell disorder.

*Meaning of sickle-cell disorder*

- (2) For the purposes of this Statement of Principles, sickle-cell disorder means:
- (a) genetic disorder leading to the production of haemoglobin S (HbS), a defective form of haemoglobin; and
  - (b) includes:
    - (i) sickle-cell disease, in which there are two copies of the HbS gene (HbSS);
    - (ii) sickle-cell trait, in which there is one copy of the HbS gene and one normal gene (HbSA); and

- (iii) double heterozygous sickling disorders, in which there is one copy of the HbS gene plus one copy of another  $\beta$ -globin gene variant

Note 1: Sickle-cell disorder may involve symptomatic episodes in which red blood cells become deformed, leading to vaso-occlusive, anaemic or infectious events.

Note 2: The diagnosis can also be made in asymptomatic individuals by genetic testing.

Note 3: Sickle cell disease is also known as sickle cell anaemia. Some examples of double heterozygous sickling disorders are sickle-cell/Hb-C disease and sickle-cell beta thalassaemia.

- (3) While sickle-cell disorder attracts ICD-10-AM code D57, in applying this Statement of Principles the meaning of sickle-cell disorder 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 sickle-cell disorder*

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

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 sickle-cell disorder and death from sickle-cell disorder 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 sickle-cell disorder or death from sickle-cell disorder with the circumstances of a person's relevant service:

- (1) experiencing one of the following in the 48 hours immediately preceding clinical worsening:
  - (a) altitudes above 1,500 metres, including flying;
  - (b) dehydration;
  - (c) perflutren (an ultrasound contrast media);

- (d) sleep apnoea or other causes of hypoxia; or
  - (e) strenuous physical activity.
- (2) experiencing one of the following in the 1 week immediately preceding clinical worsening;
- (a) a change in ambient temperature which results in skin cooling;
  - (b) fever;
  - (c) granulocyte colony-stimulating factors;
  - (d) immersion in cold water;
  - (e) infection;
  - (f) iodinated radiological contrast agents;
  - (g) pregnancy or puerperal period;
  - (h) scuba diving; or
  - (i) surgery.

Note: a *change in ambient temperature* and *puerperal period* are also defined in the Schedule 1 - Dictionary.

- (3) having smoked at least one pack-year before clinical worsening, and where smoking has ceased, clinical worsening occurred within 6 months of cessation;

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

- (4) being exposed to second-hand tobacco smoke produced by others in an enclosed space:
- (a) for at least 1,000 hours before clinical worsening; and
  - (b) if exposure has ceased before clinical worsening, then that worsening occurred within 6 months of cessation;
- (5) taking corticosteroids, other than inhaled or topical corticosteroids, in the 30 days immediately preceding clinical worsening;
- (6) having symptomatic asthma within the 1 year before clinical worsening;
- (7) inability to obtain appropriate clinical management for sickle-cell disorder before clinical worsening.

## 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 clinical worsening aspect of factors set out in section 9 apply only to material contribution to, or aggravation of, sickle-cell disorder where the person's sickle-cell disorder 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:

***a change in ambient temperature*** means a decrease in the mean daily temperature from one day to the next day of at least 5 degrees Celsius.

***clinical worsening of sickle-cell disorder*** means permanent worsening of sickle-cell disorder as evidenced by:

- (a) a sickle-cell crisis or series of crises resulting in end-organ damage or death; or
- (b) an increase in the requirement for management of the manifestations or complications of sickle-cell disorder.

Note: ***sickle-cell crisis*** is also defined in the Schedule 1 - Dictionary.

***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.

***puerperal period*** means the 42 days following a birth.

***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.

***sickle-cell crisis*** means a vaso-occlusive, anaemic or infectious complication of sickle-cell disorder requiring hospitalisation or management by a medical practitioner.

***sickle-cell disorder***—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.

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