



Australian Government
Repatriation Medical Authority

DECLARATION UNDER SUBSECTION 196B(9) OF THE VETERANS' ENTITLEMENTS ACT 1986

The Repatriation Medical Authority (the Authority), under subsection 196B(9) of the Veterans' Entitlements Act 1986 (the Act), makes the following declaration in respect of the review of the contents of the Statements of Principles in force under the Act concerning migraine, Nos. 7 and 8 of 2018.

The investigation related to "head trauma". The Notice of Investigation was published in the Government Notices Gazette of 3 July 2018.

The Authority proposes to amend Statement of Principles concerning migraine (Reasonable Hypothesis) (No. 7 of 2018), by inserting new factors in subsections 9(2a) and 9(4a) concerning head trauma. In regard to Statement of Principles concerning migraine (Balance of Probabilities) (No. 8 of 2018), the Authority declares that it does not propose to amend the existing Statements of Principles, by inclusion of a factor relating to head trauma. The reason is that the new sound medical-scientific evidence available is insufficient to justify an amendment to that Statement of Principles.

Based on biological plausibility and consistent associations of headache with head trauma, there is a reasonable hypothesis that head trauma may be a causal factor for persistent headaches, including migraine headaches. However, the sound medical-scientific evidence is insufficient to establish a probable causal association between head trauma and migraine. The evidence does not clarify the extent to which persistent headaches reported after head injury are due to the injury itself, or to other factors. Limitations of the evidence concerning persistent posttraumatic headache do not allow the factors that may contribute to headaches following head trauma to be individually identified. These limitations include recall and selection bias, variable definitions of head injury and persistent posttraumatic headache, lack of assessment of pre-injury headaches and previous head injuries, lack of consideration of time since head injury, insufficient control for confounding by other injuries or psychosocial factors, lack of prospective follow up after head injuries to identify headache trajectories, and lack of evidence of a dose-response effect by severity of head injury.

In conclusion, the Authority is of the view that the new sound medical-scientific evidence available raises a reasonable hypothesis that migraine can be related to service involving head trauma. However, the new sound medical-scientific evidence does not establish that such a relationship is more probable than not and does not enable the Authority to determine a factor concerning head trauma for inclusion in the Statement of Principles concerning migraine (Balance of Probabilities) (No. 8 of 2018), already determined pursuant to subsection 196B(3) of the Act.

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

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PROFESSOR NICHOLAS SAUNDERS AO
CHAIRPERSON 26 / 10 / 2018