

REVOKED

## Statement of Principles

concerning

# SEIZURES

**ICD CODE: 333.2, 345.0-345.5, 345.7, 345.9, 780.3**

Veterans' Entitlements Act 1986  
subsection 196B(2)

1. Being of the view that there is sound medical-scientific evidence that indicates that **seizures** and **death from seizures** can be related to operational service rendered by veterans, peacekeeping service rendered by members of Peacekeeping Forces and hazardous service rendered by members of the Forces, the Repatriation Medical Authority determines, under subsection 196B(2) of the *Veterans' Entitlements Act 1986* (the Act), that the factors that must as a minimum exist before it can be said that a reasonable hypothesis has been raised connecting **seizures** or **death from seizures** with the circumstances of that service, are:
  - (a) psychoactive substance abuse or dependence involving alcohol for the five years immediately before the clinical onset of seizures; or
  - (b) suffering from an electrolyte imbalance immediately before the clinical onset of seizures; or
  - (c) suffering from a disorder of glucose metabolism immediately before the clinical onset of seizures; or

- (d) suffering from acute necrosis of the liver immediately before the clinical onset of seizures; or
- (e) suffering from Alzheimer's disease immediately before the clinical onset of seizures; or
- (f) suffering from acute renal failure immediately before the clinical onset of seizures; or
- (g) undergoing treatment by dialysis immediately before the clinical onset of seizures; or
- (h) undergoing a course of treatment with at least one of the drugs from the specified list of drugs immediately before the clinical onset of seizures; or
- (j) suffering from malignant hypertension immediately before the clinical onset of seizures; or
- (k) suffering from the sudden withdrawal of a chronically administered sedative drug within the two weeks immediately before the clinical onset of seizures; or
- (m) suffering from an hypoxic-ischaemic cerebral insult within the six months immediately before the clinical onset of seizures; or
- (n) suffering from cerebral trauma within the six months immediately before the clinical onset of seizures; or
- (o) suffering from at least one of the cerebrovascular diseases from the specified list of cerebrovascular diseases within the six months immediately before the clinical onset of seizures; or
- (p) suffering from central nervous system (CNS) systemic lupus erythematosus (SLE) immediately before the clinical onset of seizures; or
- (q) suffering from an intracranial space-occupying lesion immediately before the clinical onset of seizures; or
- (r) suffering from viral encephalitis immediately before the clinical onset of seizures; or
- (s) suffering from bacterial meningitis immediately before the clinical onset of seizures; or

- (t) suffering from cerebral cysticercosis, cerebral schistosomiasis, cerebral echinococcosis (hydatid cyst disease), cerebral malaria, or cerebral toxoplasmosis immediately before the clinical onset of seizures; or
  - (u) being infected with HIV before the clinical onset of seizures; or
  - (v) inability to obtain appropriate clinical management for the seizures.
2. Subject to clause 3 (below) at least one of the factors set out in paragraphs **1(a) to 1(v)** must be related to any service rendered by a person.
3. The factor set out in paragraph **1(v)** applies only where:
- (a) the person's **seizures** were suffered before a period, or part of a period, of service to which the factor is related; and
  - (b) the relationship suggested between the **seizures** and the particular service of a person is a relationship set out in paragraph 8(1)(e), 9(1)(e), 70(5)(d) or 70(5A)(d) of the Act.
4. For the purposes of this Statement of Principles:

**“acute necrosis of the liver”** means acute hepatic failure due to massive hepatic necrosis (fulminant hepatitis) resulting from viral hepatitis, drug hypersensitivity or exposure to hepatotoxins, causing rapid shrinkage of the liver and encephalopathy, attracting ICD code 570;

**“acute renal failure”** means a kidney disorder characterised by rapid decline of glomerular filtration rate and retention of nitrogenous waste products that may complicate a wide variety of diseases, attracting ICD code 403.01, 403.11, 403.91, 404.02, 404.03, 404.12, 404.13, 404.92, 404.93, 584, 669.3, 958.5 or 997.5;

**“a disorder of glucose metabolism”** means hypoglycaemia or diabetes with hyperosmolar coma , attracting ICD code 250.2, 250.3, 250.8, 251.0, 251.1, 251.2 or 251.3;

**“Alzheimer’s disease”** means a progressive degenerative disease of the brain of unknown aetiology characterised by diffuse cortical atrophy with distinctive histopathological changes of senile plaques and neurofibrillary tangles, attracting ICD code 331.0;

**“an electrolyte imbalance”** means hypernatraemia, hyponatraemia, hypocalcaemia, hypercalcaemia, hypomagnesaemia or hypophosphataemia, attracting ICD code 252.0, 252.1, 268, 276.0, 276.1, 275.2, 275.3 or 275.4;

**“bacterial meningitis”** means an inflammatory response to bacterial infection of the pia-arachnoid and the cerebrospinal fluid of the subarachnoid space;

**“being infected with HIV”** means serological evidence of infection with Human Immunodeficiency Virus, attracting ICD code 042;

**“central nervous system (CNS) systemic lupus erythematosus (SLE)”** means a chronic, remitting, relapsing inflammatory multisystem disorder of connective tissue of unknown aetiology involving the brain or meninges, attracting ICD code 710.0;

**“cerebral cysticercosis”** means infection of brain parenchyma with encysted *Taenia solium* larvae, attracting ICD code 123.1;

**“cerebral echinococcosis”** means infection of brain parenchyma with encysted *Echinococcus granulosus*, *E. multilocularis*, or *E. vogeli* larvae, attracting ICD code 122.3, 122.6 or 122.9;

**“cerebral malaria”** means a diffuse symmetric encephalopathy due to infection of brain parenchyma with *Falciparum malaria*, attracting ICD code 084.9;

**“cerebral schistosomiasis”** means infection of brain parenchyma with a parasite of the genus *Schistosoma*, attracting ICD code 120;

**“cerebral toxoplasmosis”** means infection of brain parenchyma with parasite *Toxoplasma gondii*, attracting ICD code 130.0 or 130.8;

**“cerebral trauma”** means:

- (a) any injury to the head that penetrates the dura mater; or
- (b) any head injury that results in skull fracture; or
- (c) any blunt head injury that causes loss of consciousness or post-traumatic amnesia; or
- (d) any injury resulting in intracranial haemorrhage; or
- (e) any surgical procedures involving craniotomy;

attracting ICD code 800, 801, 803, 804, or an ICD code in the range 850.1-850.8, or 851-854;

**“dialysis”** means a medical procedure which normalises the electrolyte, solute and fluid balance of a patient by removing certain elements from the blood by diffusion through a semipermeable membrane, including haemodialysis or peritoneal dialysis

**“hypoxic-ischaemic cerebral insult”** means a loss of blood flow to the brain leading to acute cerebral anoxia, attracting ICD code 348.1 or 997.0;

**“ICD code”** means a number assigned to a particular kind of injury or disease in the Australian Version of The International Classification of Diseases, 9th revision, Clinical Modification (ICD-9-CM), effective date of 1 July 1995, copyrighted by the National Coding Centre, Faculty of Health Sciences, University of Sydney, NSW, and having ISBN 0 642 22235 5;

**“intracranial space occupying lesion”** means one of the following pathological entities occupying a delimited area within the cranial cavity, including:

- (a) primary or secondary malignant neoplasms of the brain or meninges;
- (b) benign neoplasms of the brain or meninges;
- (c) intracranial abscess;
- (d) subdural or extradural abscess;
- (e) tuberculoma of the brain;
- (f) cerebral cysts; and
- (g) idiopathic space occupying lesion,

and attracting ICD code 013.2, 013.3, 191, 192.1, 198.3, 198.4, 225.0, 225.2, 237.5, 237.6, 239.6, 324.0, 324.9 or 348.0;

**“malignant hypertension”** means a severe hypertensive state characterised by papilloedema of the ocular fundus, retinal haemorrhages and exudates, cardiac decompensation and declining renal function, attracting ICD code 401.0, 402.0, 403.0, 404.0 or 405.0;

**“psychoactive substance abuse or dependence involving alcohol”** means a maladaptive pattern of use of alcohol, that is indicated by either:

- (a) continued use of the substance despite knowledge of having a persistent or recurrent social, occupational, psychological or physical problem that is caused or exacerbated by use of the substance; or
- (b) recurrent use of the substance when use is physically hazardous (for example, driving while intoxicated),

and attracting ICD code 303 or 305.0;

**“seizures”** means a disorder characterised by an episode or episodes of paroxysmal, excessive, hypersynchronous and self-limited abnormality of neurological activity due to abnormalities in the electrical activity in the brain, occurring acutely in response to metabolic or cerebral insult, with each episode of neurological dysfunction being termed a seizure or epileptic seizure, attracting ICD code 333.2, 345.7, 345.9 or 780.3, or an ICD code in the range 345.0-345.5;

**“specified list of cerebrovascular diseases”** means the following:

- (a) intracerebral haemorrhage;
- (b) subarachnoid haemorrhage;
- (c) non traumatic intracranial haemorrhage;
- (d) embolic stroke;
- (e) haemorrhagic stroke;
- (f) cerebral infarction or cerebral embolism;
- (g) stroke due to precerebral arterial disease; and
- (h) cerebrovascular accident,

attracting ICD code 430, 431, 432, 433.01, 433.11, 433.21, 433.31, 433.81, 433.91, 434, or 436;

**“specified list of drugs”** means:

- (a) anaesthetics: ether, halothane, ketamine, methohexitone, althesin, cocaine, lidocaine;
- (b) analeptics: nikethamide, theophylline and its derivatives, ephedrine;
- (c) analgesics: pethidine, dextropropoxyphene;
- (d) anti-arrhythmics: disopyramide, lignocaine;
- (e) antibiotics: benzylpenicillin, carbenicillin, oxacillin, ampicillin, cycloserine, isoniazid, nalidixic acid, quinolones;
- (f) anticonvulsants in overdose: phenobarbitone, phenytoin, ethosuximide;
- (g) antipsychotics: chlorpromazine, lithium;
- (h) antidepressants: amitriptyline, imipramine, mianserin, maprotiline, tricyclic antidepressants;
- (j) contrast media: meglumine carbamate, meglumine iothalamate, metrizamide; and
- (k) miscellaneous: D-penicillamine, baclofen, hyperbaric oxygen, folate, piperazine, cyclosporin, interferon;

**“viral encephalitis”** means viral infection and inflammation of the brain parenchyma, attracting ICD code 052.0, 054.3, 055.0, 056.01, 072.2,

323.0, or 323.6, or an ICD code in the ranges 045-045.9, 046-046.9, 049.8-049.9, or 062-064;

**“withdrawal of chronically administered sedative drugs”** means a substance specific organic mental syndrome following the cessation of use or reduction in intake of psychoactive substances that had been regularly used, including anticonvulsants, alcohol, barbiturates, benzodiazepines, glutethimide, meprobamate, attracting ICD code 291.0, 291.3, 291.8 or 292.0.

Dated this **Twenty-ninth** day of  
**August** 1995

The Common Seal of the )  
Repatriation Medical Authority )  
was affixed to this instrument )  
in the presence of: )

KEN DONALD  
CHAIRMAN