

REVOKED

Statement of Principles

concerning

ANXIETY DISORDER DUE TO A GENERAL MEDICAL CONDITION

ICD CODE: 293.89

Veterans' Entitlements Act 1986
subsection 196B(2)

1. Being of the view that there is sound medical-scientific evidence that indicates that **anxiety disorder due to a general medical condition** and **death from anxiety disorder due to a general medical condition** 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 **anxiety disorder due to a general medical condition** or **death from anxiety disorder due to a general medical condition** with the circumstances of that service, are:
 - (a) suffering from a general medical condition at the time of the clinical onset of the anxiety disorder and that general medical condition is the direct physiological cause of the anxiety; or
 - (b) inability to obtain appropriate clinical management for the anxiety disorder due to a general medical condition.

2. Subject to clause 3 (below) at least one of the factors set out in paragraphs **1(a) to 1(b)** must be related to any service rendered by a person.
3. The factor set out in paragraph **1(b)** applies only where:
 - (a) the person's **anxiety disorder due to a general medical condition** was suffered before a period, or part of a period, of service to which the factor is related; and
 - (b) the relationship suggested between the **anxiety disorder due to a general medical condition** 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:

“anxiety disorder due to a general medical condition” means the presence of clinically significant anxiety of sufficient severity to justify a diagnosis of anxiety disorder (as defined in DSM-IV), that is judged to be due to the direct physiological effect of a general medical condition, attracting ICD code 293.89; and is indicated by;

- A. Prominent anxiety, Panic Attacks, or obsessions or compulsions predominate in the clinical picture; and
- B. Evidence from the history, physical examination, or laboratory findings that the disturbance is the direct physiological consequence of a general medical condition; and
- C. The disturbance is not better accounted for by another mental disorder (eg., Adjustment Disorder With Anxiety in which the stressor is a serious general medical condition); and
- D. The disturbance does not occur exclusively during the course of a delirium; and
- E. The disturbance causes clinically significant distress or impairment in social, occupational, or other important areas of functioning.

The following specifiers can be used to indicate which symptom presentation predominates in Anxiety Disorder Due to a Medical Condition:

With Generalised Anxiety: Excessive anxiety or worry about a number of events or activities predominates in the clinical presentation; or

With Panic Attacks: Panic Attacks predominate in the clinical presentation; or

With Obsessive-Compulsive Symptoms: Obsessions or compulsions predominate in the clinical presentation.

“DSM-IV” means the fourth edition of the American Psychiatric Association’s *Diagnostic and Statistical Manual of Mental Disorders*;

“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;

“general medical condition” (as defined in DSM-IV) means a variety of general medical conditions which may cause anxiety symptoms, including endocrine conditions (eg., hyper- and hypothyroidism, pheochromocytoma, hypoglycaemia, hyperadrenocorticism), cardiovascular conditions (eg., congestive heart failure, pulmonary embolism, arrhythmia), respiratory conditions (eg., chronic obstructive pulmonary disease, pneumonia, hyperventilation), metabolic conditions (eg., vitamin B 12 deficiency, porphyria), and neurological conditions (eg., neoplasms, vestibular dysfunction, encephalitis). The associated physical examination findings, laboratory findings and patterns of prevalence or onset reflect the aetiological general medical condition.

Dated this *Twenty-third* day of *November* 1995

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

KEN DONALD
CHAIRMAN