

REVOKED

Statement of Principles

concerning

SUBARACHNOID HAEMORRHAGE

ICD CODE: 430

Veterans' Entitlements Act 1986
subsection 196B(3)

1. Being of the view that on the sound medical-scientific evidence available to the Repatriation Medical Authority, it is more probable than not that **subarachnoid haemorrhage** and **death from subarachnoid haemorrhage** can be related to eligible war service (other than operational service) rendered by veterans and defence service (other than hazardous service) rendered by members of the Forces, the Repatriation Medical Authority determines, under subsection 196B(3) of the *Veterans' Entitlements Act 1986* (the Act), that the factors that must exist before it can be said that, on the balance of probabilities, **subarachnoid haemorrhage** or **death from subarachnoid haemorrhage** is connected with the circumstances of that service, are:
 - (a) the presence of hypertension at any time before the clinical onset of subarachnoid haemorrhage; or
 - (b) for males only, drinking at least 250 gms of alcohol each week during the year immediately before the clinical onset of subarachnoid haemorrhage; or

- (c) for females only, drinking at least 200 gms of alcohol each week during the year immediately before the clinical onset of subarachnoid haemorrhage; or
 - (d) prior to 1980, using an oral contraceptive pill for a period of at least three weeks immediately before the clinical onset of subarachnoid haemorrhage; or
 - (e) smoking at least five cigarettes per day or the equivalent thereof in other tobacco products, for a period of at least five years before the clinical onset of subarachnoid haemorrhage, and where smoking has ceased, the clinical onset has occurred within five years of cessation; or
 - (f) undergoing anticoagulant therapy at the time of the clinical onset of subarachnoid haemorrhage; or
 - (g) undergoing thrombolytic therapy at the time of the clinical onset of subarachnoid haemorrhage; or
 - (h) using cocaine within the 72 hours immediately before the clinical onset of subarachnoid haemorrhage; or
 - (j) being pregnant, undergoing childbirth, or being within the puerperal period at the time of the clinical onset of subarachnoid haemorrhage; or
 - (k) suffering from an acute stress, causing a temporary aggravation of established hypertension, and within 14 days, experiencing the clinical onset of subarachnoid haemorrhage; or
 - (m) inability to obtain appropriate clinical management for the subarachnoid haemorrhage.
2. Subject to clause 3 (below) at least one of the factors set out in paragraphs **1(a) to 1(m)** must be related to any service rendered by a person.
3. The factor set out in paragraph **1(m)** applies only where:
- (a) the person's **subarachnoid haemorrhage** 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 **subarachnoid haemorrhage** and the particular service of a person is a

relationship set out in paragraph 8(1)(e), 9(1)(e) or 70(5)(d) of the Act.

4. For the purposes of this Statement of Principles:

“anticoagulant therapy” means therapeutic administration of any substance that prevents blood clotting, including a substance administered for prophylaxis or treatment of thromboembolic disorders, including heparin, warfarin, Dicumarol and congeners;

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

“hypertension” means

(a) a usual blood pressure reading where the systolic reading is greater than or equal to 140 mmHg and/ or where the diastolic reading is greater than or equal to 90 mmHg; or

(b) where treatment for hypertension is being administered,

attracting an ICD code in the range 401 to 405;

“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;

“puerperal period” means the period of 42 days following the end of the third stage of labour;

“subarachnoid haemorrhage” means bleeding into the subarachnoid space, including rupture into the subarachnoid space of an intracranial saccular aneurysm or arteriovenous malformation, but does not include haemorrhage due to trauma to the brain or to the skull, attracting ICD code 430;

“suffering from an acute stress” means the following (derived from DSM-IV):

(a) the person experienced, witnessed, or was confronted with an event that involved actual or threatened death or serious injury, or a threat to the person’s, or other people’s, physical integrity; and

- (b) the person's response to that event involved intense fear, helplessness or horror;

“thrombolytic therapy” means therapeutic administration of exogenous plasminogen activating agents that dissolve the fibrous network of a blood clot, including streptokinase, urokinase and tissue plasminogen activator.

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