

**Revocation and Determination**

of

**Statement of Principles**  
concerning

**CARPAL TUNNEL SYNDROME**

**ICD CODE: 354.0**

*Veterans' Entitlements Act 1986*

1. The Repatriation Medical Authority under subsection **196B(3)** of the *Veterans' Entitlements Act 1986* (the Act):
  - (a) revokes Instrument No.36 of 1996; and
  - (b) determines in its place the following Statement of Principles.

**Kind of injury, disease or death**

2. (a) This Statement of Principles is about **carpal tunnel syndrome** and **death from carpal tunnel syndrome**.
- (b) For the purposes of this Statement of Principles, "**carpal tunnel syndrome**" means an entrapment neuropathy of the median nerve at the wrist producing paresthesias and weakness of the hand, attracting ICD code 354.0.

**Basis for determining the factors**

3. On the sound medical-scientific evidence available, the Repatriation Medical Authority is of the view that it is more probable than not that **carpal tunnel syndrome and death from carpal tunnel syndrome** can be related to relevant service rendered by veterans or members of the Forces.

## Factors that must be related to service

4. Subject to clause 6, at least one of the factors set out in clause 5 must be related to any relevant service rendered by the person.

## Factors

5. The factors that must exist before it can be said that, on the balance of probabilities, **carpal tunnel syndrome** or **death from carpal tunnel syndrome** is connected with the circumstances of a person's relevant service are:

- (a) performing repetitive activities with the affected hand for at least two hours each day, for at least 130 days, all within a period of 210 consecutive days, and where the repetitive activities have not ceased more than 30 days before the clinical onset of carpal tunnel syndrome; or

- (b) permanent daily use of a manual wheelchair at the time of the clinical onset of carpal tunnel syndrome; or

- (c) performing activities where the affected hand or forearm is directly vibrated for at least two hours each day, for at least 130 days, all within a period of 210 consecutive days, and where the directly vibrating activities have not ceased more than 30 days before the clinical onset of carpal tunnel syndrome; or

- (d) suffering an injury to the affected wrist which:

- (i) alters the normal contour of the carpal tunnel; or

- (ii) damages the median nerve or flexor tendons within the carpal tunnel,

within the year immediately before the clinical onset of carpal tunnel syndrome; or

- (e) suffering a fracture to the affected wrist which:

- (i) alters the normal contour of the carpal tunnel; or

- (ii) damages the median nerve or flexor tendons within the carpal tunnel,

at any time before the clinical onset of carpal tunnel syndrome; or

- (f) undergoing surgery to the affected wrist which:
  - (i) alters the normal contour of the carpal tunnel; or
  - (ii) damages the median nerve or flexor tendons within the carpal tunnel,within the year immediately before the clinical onset of carpal tunnel syndrome; or
- (g) being obese at the time of the clinical onset of carpal tunnel syndrome; or
- (h) undergoing haemodialysis treatment for a period of at least the year immediately before the clinical onset of carpal tunnel syndrome; or
- (j) suffering from myxoedema at the time of the clinical onset of carpal tunnel syndrome; or
- (k) suffering from acromegaly before the clinical onset of carpal tunnel syndrome; or
- (m) suffering from amyloidosis at the time of the clinical onset of carpal tunnel syndrome; or
- (n) suffering from rheumatoid arthritis of the affected wrist at the time of the clinical onset of carpal tunnel syndrome; or
- (o) suffering from gout of the affected wrist at the time of the clinical onset of carpal tunnel syndrome; or
- (p) suffering from a space occupying lesion of the affected carpal tunnel at the time of the clinical onset of carpal tunnel syndrome; or
- (q) performing repetitive activities with the affected hand for at least two hours each day, for at least 130 days, all within a period of 210 consecutive days, and where the repetitive activities have not ceased more than 30 days before the clinical worsening of carpal tunnel syndrome; or
- (r) permanent daily use of a manual wheelchair before the clinical worsening of carpal tunnel syndrome; or

- (s) performing activities where the affected hand or forearm is directly vibrated for at least two hours each day, for at least 130 days, all within a period of 210 consecutive days, and where the directly vibrating activities have not ceased more than 30 days before the clinical worsening of carpal tunnel syndrome; or
- (t) suffering an injury to the affected wrist which:
  - (i) alters the normal contour of the carpal tunnel; or
  - (ii) damages the median nerve or flexor tendons within the carpal tunnel,within the year immediately before the clinical worsening of carpal tunnel syndrome; or
- (u) suffering a fracture to the affected wrist which:
  - (i) alters the normal contour of the carpal tunnel; or
  - (ii) damages the median nerve or flexor tendons within the carpal tunnel,at any time before the clinical worsening of carpal tunnel syndrome; or
- (v) undergoing surgery to the affected wrist which:
  - (i) alters the normal contour of the carpal tunnel; or
  - (ii) damages the median nerve or flexor tendons within the carpal tunnel,within the year immediately before the clinical worsening of carpal tunnel syndrome; or
- (w) being obese at the time of the clinical worsening of carpal tunnel syndrome; or
- (x) undergoing haemodialysis treatment for a period of at least the year immediately before the clinical worsening of carpal tunnel syndrome; or
- (y) suffering from myxoedema at the time of the clinical worsening of carpal tunnel syndrome; or

- (z) suffering from acromegaly before the clinical worsening of carpal tunnel syndrome; or
- (za) suffering from amyloidosis at the time of the clinical worsening of carpal tunnel syndrome; or
- (zb) suffering from rheumatoid arthritis of the affected wrist at the time of the clinical worsening of carpal tunnel syndrome; or
- (zc) suffering from gout of the affected wrist at the time of the clinical worsening of carpal tunnel syndrome; or
- (zd) suffering from a space occupying lesion of the affected carpal tunnel at the time of the clinical worsening of carpal tunnel syndrome;
- (ze) inability to obtain appropriate clinical management for carpal tunnel syndrome.

#### **Factors that apply only to material contribution or aggravation**

6. Paragraphs 5(q) to 5(ze) apply only to material contribution to, or aggravation of, carpal tunnel syndrome where the person's carpal tunnel syndrome was suffered or contracted before or during (but not arising out of) the person's relevant service; paragraph 8(1)(e), 9(1)(e) or 70(5)(d) of the Act refers.

#### **Other definitions**

7. For the purposes of this Statement of Principles:

**“acromegaly”** means a chronic disease of adults due to hyper secretion of the pituitary growth hormone and characterised by enlargement of many parts of the skeleton especially the distal portions, the nose, ears, jaws, fingers and toes, attracting ICD code 253.0;

**“amyloidosis”** means a group of conditions of diverse causes characterised by the accumulation of insoluble fibrillar proteins (amyloid) in various organs and tissues of the body such that vital function is compromised, attracting ICD code 277.3;

**“being obese”** means an increase in body weight by way of fat accumulation beyond an arbitrary limit, and due to a cause specified in the Repatriation Medical Authority's Statement about the causes of “being obese” signed by the Chairman of the Authority on 16 August 1996, attracting ICD code 278.0.

The measurement used to define “being obese” is the Body Mass Index (BMI).

The BMI =  $W/H^2$  and where:

W is the person’s weight in kilograms and

H is the person’s height in metres.

“Being obese” is considered to be present when the BMI is 30 or greater. This definition excludes weight gain not resulting from fat deposition such as gross oedema, peritoneal or pleural effusion, or muscle hypertrophy. “Being obese” develops when energy intake is in excess of expenditure for a sustained period of time.

For a factor to be included as a cause of “being obese” it must have resulted in a significant weight gain, of the order of a 20% increase in baseline weight, and in association with a BMI of 30 or greater;

“**gout**” means a metabolic condition characterised by chronic hyperuricaemia and tissue deposition of urate crystals, attracting ICD code 274;

“**haemodialysis treatment**” means the removal of certain elements from the blood by virtue of the difference in the rates of their diffusion through a semipermeable membrane by means of a haemodialyzer;

“**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 1996, copyrighted by the National Coding Centre, Faculty of Health Sciences, University of Sydney, NSW, and having ISBN 0 642 24447 2;

“**myxoedema**” means a condition characterised by dry, waxy swelling of the skin and other tissues and associated with primary hypothyroidism, attracting ICD code 244.9;

“**permanent daily use of a manual wheelchair**” means the manual propulsion of the wheelchair by an individual suffering from a permanent medical condition which interferes with the mobility of the lower limbs, such as spinal cord injury, traumatic brain injury or cerebrovascular disease. It does not refer to the temporary use of a manual wheelchair, such as when recovering from an ankle sprain, or when the manual wheelchair is mostly pushed by an individual other than the individual affected by the permanent medical condition;

**“relevant service”** means:

- (a) eligible war service (other than operational service); or
- (b) defence service (other than hazardous service);

**“rheumatoid arthritis”** means a chronic systemic disease primarily of the joints, usually polyarticular, marked by inflammatory changes in the synovial membranes and articular structures, attracting ICD code 714.0;

**“space occupying lesion of the affected carpal tunnel”** means a lesion which is situated within the affected carpal tunnel such as haemangioma, neuroma of the median nerve, aneurysm of the median artery, calcification, synovial sarcoma, tendon sheath fibroma or lipoma and ganglion.

### **Application**

- 8. This Instrument applies to all matters to which section 120B of the Act applies.

Dated this **Ninth** day of **September**  
1997

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