

**Determination**  
of  
**Statement of Principles**  
concerning  
**PERIPHERAL NEUROPATHY**

**ICD-10-AM CODES: G54.0, G 54.1, G58.7, G60-G64, G90.0, G90.9**

*Veterans' Entitlements Act 1986*

1. This Statement of Principles is determined by the Repatriation Medical Authority under subsection **196B(2)** of the *Veterans' Entitlements Act 1986* (the Act).

**Kind of injury, disease or death**

2. (a) This Statement of Principles is about **peripheral neuropathy** and **death from peripheral neuropathy**.
- (b) For the purposes of this Statement of Principles, “**peripheral neuropathy**” means a disorder of the peripheral nervous system producing impaired motor, sensory or autonomic functioning, attracting ICD-10-AM code G54.0, G54.1, G58.7, G60-G64, G90.0 or G90.9. This definition includes polyneuropathy, mononeuritis multiplex, brachial plexopathy and lumbosacral plexopathy but excludes nerve root disorders, motor neuron disease (amyotrophic lateral sclerosis), mononeuropathies of the upper and lower limbs, Charcot-Marie-Tooth disease, intercostal neuropathy and cranial mononeuropathies.

**Basis for determining the factors**

3. The Repatriation Medical Authority is of the view that there is sound medical-scientific evidence that indicates that **peripheral neuropathy** and **death from peripheral neuropathy** can be related to relevant

service rendered by veterans, members of Peacekeeping Forces, 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 as a minimum exist before it can be said that a reasonable hypothesis has been raised connecting **peripheral neuropathy** or **death from peripheral neuropathy** with the circumstances of a person's relevant service are:
  - (a) consuming at least 350 kg of alcohol (contained within alcoholic drinks) within any 10 year period before the clinical onset of peripheral neuropathy; or
  - (b) suffering from a systemic disease from the specified list at the time of the clinical onset of peripheral neuropathy; or
  - (c) suffering from a solid organ malignancy (excluding nonmelanotic malignant neoplasm of the skin) at the time of the clinical onset of peripheral neuropathy; or
  - (d) suffering from a haematological or lymphoproliferative disorder from the specified list at the time of the clinical onset of peripheral neuropathy; or
  - (e) suffering from a systemic vasculitis from the specified list at the time of the clinical onset of peripheral neuropathy; or
  - (f) having an infection from the specified list at the time of the clinical onset of peripheral neuropathy; or
  - (g) for mononeuritis multiplex or polyneuropathy only, suffering from full thickness thermal or electrical burns to at least 10 percent of the body within the 30 days before the clinical onset of peripheral neuropathy; or
  - (h) for plexopathy only,
    - (i) suffering a discrete blunt or penetrating injury to the affected plexus within the 24 hours before the clinical onset of peripheral neuropathy; or

- (ii) suffering infiltration of the affected plexus by a malignant tumour at the time of the clinical onset of peripheral neuropathy; or
  - (iii) undergoing a course of therapeutic radiation to the affected region within the five years before the clinical onset of peripheral neuropathy; or
- (j) for lumbosacral plexopathy only, suffering a retroperitoneal haemorrhage within the twelve months before the clinical onset of peripheral neuropathy; or
- (k) for polyneuropathy only,
- (i) suffering from a critical illness requiring mechanical ventilation support within the 30 days before the clinical onset of peripheral neuropathy; or
  - (ii) inhaling, ingesting or having dermal exposure to one of the chemical agents in the specified list on at least 30 occasions within the six months before the clinical onset of peripheral neuropathy; or
  - (iii) inhaling, ingesting or having dermal exposure to 2,4-dichlorophenoxyacetic acid within the 30 days before the clinical onset of peripheral neuropathy; or
  - (iv) suffering organophosphorus pesticide poisoning from one of the pesticides specified in the list within the 30 days before the clinical onset of peripheral neuropathy; or
  - (v) having clinical, haematological or biochemical evidence of poisoning with adulterated rapeseed oil (Spanish toxic oil syndrome), or fruit of Buckthorn shrub (*Karwinska humboldtiana*) within the 30 days before the clinical onset of peripheral neuropathy; or
  - (vi) suffering heavy metal poisoning from one of the metals specified in the list within the 30 days before the clinical onset of peripheral neuropathy; or
  - (vii) suffering from a nutritional deficiency from the specified list at the time of the clinical onset of peripheral neuropathy; or

- (viii) suffering from frostbite to the affected limb within the twelve months before the clinical onset of peripheral neuropathy; or
- (ix) suffering from nonfreezing cold injury to the affected limb within the twelve months before the clinical onset of peripheral neuropathy; or
- (m) for Guillain-Barre syndrome only, being infected with *Campylobacter jejuni* within the 30 days before the clinical onset of peripheral neuropathy; or
- (n) for sensory polyneuropathy or mixed sensory motor polyneuropathy only,
  - (i) undergoing treatment with one of the drugs from List 1, for a condition for which the drug cannot be ceased or substituted at the time of the clinical onset of peripheral neuropathy; or
  - (ii) undergoing treatment with one of the drugs from List 2 at the time of the clinical onset of peripheral neuropathy; or
  - (iii) undergoing treatment with cisplatin within the six months before the clinical onset of peripheral neuropathy; or
- (o) for motor polyneuropathy only,
  - (i) undergoing treatment with dapsone or perhexiline maleate for a condition for which the drug cannot be ceased or substituted at the time of the clinical onset of peripheral neuropathy; or
  - (ii) undergoing treatment with stilbamidine or suramin within the six months before the clinical onset of peripheral neuropathy; or
- (p) inability to obtain appropriate clinical management for peripheral neuropathy.

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

6. Paragraph 5(p) applies only to material contribution to, or aggravation of peripheral neuropathy where the person's peripheral neuropathy was suffered or contracted before or during (but not arising out of) the person's relevant service; paragraph 8(1)(e), 9(1)(e), 70(5)(d) or 70(5A)(d) of the Act refers.

## **Inclusion of Statements of Principles**

7. In this Statement of Principles if a relevant factor applies and that factor includes an injury or disease in respect of which there is a Statement of Principles then the factors in that last mentioned Statement of Principles apply in accordance with the terms of that Statement of Principles.

## **Other definitions**

8. For the purposes of this Statement of Principles:

**“a course of therapeutic radiation”** means one or more fractions (treatment portions) of ionising radiation administered with the aim of achieving palliation or cure with gamma rays, x-rays, alpha particles or beta particles;

**“a haematological or lymphoproliferative disorder from the specified list”** means the presence of one of the following conditions:

- (a) IgM monoclonal gammopathy;
- (b) IgG monoclonal gammopathy;
- (c) IgA monoclonal gammopathy;
- (d) myeloma;
- (e) Waldenstrom’s macroglobulinaemia;
- (f) Hodgkin’s disease;
- (g) non Hodgkin’s lymphoma;
- (h) acute lymphoid leukaemia;
- (i) acute myeloid leukaemia;
- (j) chronic lymphoid leukaemia;
- (k) chronic myeloid leukaemia; or
- (l) polycythaemia vera;

**“a systemic disease from the specified list”** means the presence of one of the following conditions:

- (a) acromegaly;
- (b) diabetes mellitus;
- (c) amyloidosis;
- (d) eosinophilia myalgia syndrome;
- (e) hepatic failure;
- (f) hypereosinophilic syndrome;
- (g) hypothyroidism;
- (h) primary biliary cirrhosis;
- (i) rheumatoid arthritis; or
- (j) sarcoidosis;

**“a systemic vasculitis from the specified list”** means the presence of one of the following conditions:

- (a) allergic angiitis;
- (b) Churg-Strauss syndrome;
- (c) cryoglobulinaemia;
- (d) giant cell (temporal) arteritis;
- (e) hypersensitivity/allergic angiitis;
- (f) mixed connective tissue disease;
- (g) mixed cryoglobulinaemia;
- (h) polyarteritis nodosa;
- (i) progressive systemic sclerosis;
- (j) rheumatoid arthritis;
- (k) Sjögren's syndrome;
- (l) systemic lupus erythematosus; or
- (m) Wegener's granulomatosis;

**“alcohol (contained within alcoholic drinks)”** is measured by the alcohol consumption calculations utilising the Australian Standard of 10 grams of alcohol per standard alcoholic drink;

**“an infection from the specified list”** means evidence of current or recent infection with:

- (a) *Corynebacterium diphtheriae* (Diphtheria);
- (b) Human Immunodeficiency Virus;
- (c) *Mycobacterium leprae* (Leprosy);
- (d) *Borrelia burgdorferi* (Lyme disease);
- (e) *Trypanosoma cruzi* (Chagas' disease);
- (f) *Treponema pallidum* (Tertiary Syphilis); or
- (g) *Corynebacterium botulinum* (Botulism);

**“death from peripheral neuropathy”** in relation to a person includes death from a terminal event or condition that was contributed to by the person's peripheral neuropathy;

**“frostbite”** means a freezing injury to the skin, subcutaneous and deeper tissues as the result of exposure to low environmental temperatures;

**“Guillain-Barre syndrome”** means a clinically defined peripheral neuropathy that is characterised by rapidly progressive symmetrical limb weakness, loss of tendon reflexes, absent or mild sensory signs and variable autonomic dysfunction and with elevated protein concentration in cerebrospinal fluid;

**“heavy metal poisoning”** means having clinical, haematological or biochemical evidence of heavy metal poisoning;

**“ICD-10-AM code”** means a number assigned to a particular kind of injury or disease in The International Statistical Classification of Diseases and Related Health Problems, 10th revision, Australian Modification (ICD-10-AM), Second Edition, effective date of 1 July 2000, copyrighted by the National Centre for Classification in Health, Sydney, NSW, and having ISBN 1 86487 271 3;

**“mixed sensory motor polyneuropathy”** means a form of polyneuropathy involving sensory or motor nerves, resulting in loss or disturbance of sensation and/or voluntary control of skeletal muscle;

**“mononeuritis multiplex”** means a form of peripheral neuropathy involving the simultaneous or sequential involvement of individual noncontiguous nerve trunks, and is also known as multifocal neuropathy;

**“motor polyneuropathy”** means a form of polyneuropathy involving motor nerves only, resulting in loss of voluntary control of skeletal muscle;

**“nonfreezing cold injury”** means injury resulting from circulatory disturbance due to cold (near freezing temperatures), inaction and moisture; and includes trench foot and immersion foot;

**“one of the chemical agents in the specified list”** means one of the following:

- (a) acrylamide monomer;
- (b) allyl chloride;
- (c) carbon disulphide;
- (d) ethylene oxide;
- (e) dimethylaminopropionitrile;
- (f) methyl bromide;
- (g) n-hexane;
- (h) nitrous oxide; or
- (i) n-butyl ketone (MNBK);

**“one of the drugs from List 1”** means one of the following:

- (a) almitrine bismesylate;
- (b) aurothioglucose;
- (c) chloramphenicol;
- (d) chloroquine;

- (e) colchicine;
- (f) disulfiram;
- (g) ethambutol;
- (h) hydralazine;
- (i) metronidazole;
- (j) nucleoside analogues (ddc, ddi, d4t);
- (k) phenytoin;
- (l) taxol; or
- (m) vincristine;

**“one of the drugs from List 2”** means one of the following:

- (a) amiodarone;
- (b) gold (organic);
- (c) isoniazid;
- (d) misonidazole;
- (e) nitrofurantoin;
- (f) pyridoxine; or
- (g) thalidomide;

**“one of the metals specified in the list”** means one of the following:

- (a) inorganic arsenic;
- (b) inorganic lead;
- (c) mercury; or
- (d) thallium;

**“one of the pesticides specified in the list”** means one of the following:

- (a) tri-*ortho*-cresyl phosphate;
- (b) mipafox;
- (c) leptophos;
- (d) dichlophon;
- (e) trichlornate;
- (f) methamidophos;
- (g) diisopropyl phosphorofluoridate;
- (h) chlorpyrifos; or
- (i) carbamate pesticides;

**“organophosphorus pesticide poisoning”** means having cholinergic health effects immediately after exposure to organophosphorous pesticides;

**“plexopathy”** means a form of peripheral neuropathy characterised by disorder of the brachial or lumbosacral plexus;



**“polyneuropathy”** means a form of peripheral neuropathy characterised by the diffuse and usually symmetrical involvement of nerves in the extremities;

**“relevant service”** means:

- (a) operational service; or
- (b) peacekeeping service; or
- (c) hazardous service;

**“sensory polyneuropathy”** means a form of polyneuropathy involving sensory nerves only, resulting in loss or disturbance of sensation;

**“suffering from a nutritional deficiency from the specified list”** means having clinical or biochemical evidence of one of the following:

- (a) vitamin B<sub>1</sub> (thiamine) deficiency;
- (b) vitamin B<sub>6</sub> (pyridoxine) deficiency;
- (c) vitamin B<sub>12</sub> (cobalamin) deficiency; or
- (d) vitamin E deficiency;

**“terminal event”** means the proximate or ultimate cause of death and includes:

- (a) pneumonia;
- (b) respiratory failure;
- (c) cardiac arrest;
- (d) circulatory failure; or
- (e) cessation of brain function.

Dated this *Twelfth* day of *September* 2001

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

KEN DONALD  
CHAIRMAN