

**Revocation and Determination**  
of  
**Statement of Principles**  
concerning  
**PSORIASIS**

**ICD-10-AM CODES: L40.0, L40.1, L40.2, L40.4, L40.8**

*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.22 of 1998; 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 **psoriasis** and **death from psoriasis**.
  - (b) For the purposes of this Statement of Principles, "**psoriasis**" means a chronic recurrent skin disorder, associated with hyperproliferation of the epidermis. Psoriasis attracts ICD-10-AM code L40.0, L40.1, L40.2, L40.4 or L40.8.

**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 **psoriasis** and **death from psoriasis** 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, **psoriasis** or **death from psoriasis** is connected with the circumstances of a person's relevant service are:
  - (a) suffering skin injury to the affected site within the 30 days immediately before the clinical onset of psoriasis; or
  - (b) undergoing treatment with a drug from the specified list at the time of the clinical onset of psoriasis; or
  - (c) undergoing treatment with a drug at the time of the clinical onset of psoriasis, where the drug has been assessed as having caused the clinical onset of psoriasis in the peer reviewed medical literature; or
  - (d) suffering from alcohol dependence or alcohol abuse involving regular consumption of at least an average of 420 g/week of alcohol at the time of the clinical onset of psoriasis; or
  - (e) suffering from a clinically significant anxiety disorder or a clinically significant depressive disorder at the time of the clinical onset of psoriasis; or
  - (f) for guttate psoriasis only, suffering from streptococcal pharyngitis or streptococcal tonsillitis within the 30 days immediately before the clinical onset of psoriasis; or
  - (g) being infected with Human Immunodeficiency Virus (HIV) at the time of the clinical onset of psoriasis; or
  - (h) suffering skin injury to the affected site within the 30 days immediately before the clinical worsening of psoriasis; or
  - (i) undergoing treatment with a drug from the specified list at the time of the clinical worsening of psoriasis; or
  - (j) undergoing treatment with a drug, for a condition for which the drug cannot be ceased or substituted, at the time of the clinical worsening of psoriasis, where the drug has been assessed as

having caused the clinical worsening of psoriasis in the peer reviewed medical literature; or

- (k) suffering from alcohol dependence or alcohol abuse involving regular consumption of at least an average of 420 g/week of alcohol at the time of the clinical worsening of psoriasis; or
- (l) suffering from a clinically significant anxiety disorder or a clinically significant depressive disorder at the time of the clinical worsening of psoriasis; or
- (m) for guttate psoriasis only, suffering from streptococcal pharyngitis or streptococcal tonsillitis within the 30 days immediately before the clinical worsening of psoriasis; or
- (n) being infected with Human Immunodeficiency Virus (HIV) at the time of the clinical worsening of psoriasis; or
- (o) inability to obtain appropriate clinical management for psoriasis.

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

- 6. Paragraphs 5(h) to 5 (o) apply only to material contribution to, or aggravation of, psoriasis where the person's psoriasis 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.

#### **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 drug from the specified list”** means:

- (i) lithium;
- (ii) a betablocker;
- (iii) a synthetic antimalarial drug (eg quinacrine hydrochloride, chloroquine, primaquine);
- (iv) an alpha interferon; or
- (v) an angiotensin-converting enzyme inhibitor;

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

**“clinically significant anxiety disorder”** means any anxiety disorder attracting a diagnosis under DSM IV sufficient to warrant ongoing management by a psychiatrist, counsellor or General Practitioner;

**“clinically significant depressive disorder”** means any depressive disorder attracting a diagnosis under DSM IV sufficient to warrant ongoing management by a psychiatrist, counsellor or General Practitioner;

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

**“drug has been assessed as having caused”** means the causal connection with the drug therapy has been ascertained by means of:

- (i) rechallenge; or
- (ii) confirmed by laboratory data; or
- (iii) temporal correlation with administration; or
- (iv) recovery on withdrawal of drug if no other drug is withdrawn and no therapy is given;

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

**“guttate psoriasis”** means a form of psoriasis seen primarily in children and young adults, characterised by the abrupt appearance of small droplike lesions over much of the skin surface;

**“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), Third Edition, effective date of 1 July 2002, copyrighted by the National Centre for Classification in Health, Sydney, NSW, and having ISBN 1 86487 413 9. Where in this Statement of Principles an ICD code is referenced, such reference is not to constrain or limit the proper meaning of the definition or words preceding the alphanumeric code reference;

**“relevant service”** means:

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

**“skin injury”** means

- (i) any injury or lesion of the skin that elicits a local inflammatory response; or
- (ii) skin irritation from repetitive friction;

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

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

### **Application**

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

Dated this *Sixth* day of *August* 2002

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

KEN DONALD  
CHAIRMAN