



Australian Government
Repatriation Medical Authority

Statement of Principles
concerning
ACUTE INFECTIOUS MONONUCLEOSIS

No. 3 of 2012

for the purposes of the

Veterans' Entitlements Act 1986
and
Military Rehabilitation and Compensation Act 2004

Title

1. This Instrument may be cited as Statement of Principles concerning acute infectious mononucleosis No. 3 of 2012.

Determination

2. The Repatriation Medical Authority under subsection **196B(2)** and **(8)** of the *Veterans' Entitlements Act 1986* (the VEA):
 - (a) revokes Instrument No. 25 of 1998 concerning symptomatic Epstein-Barr virus infection; and
 - (b) determines in its place this Statement of Principles.

Kind of injury, disease or death

3.
 - (a) This Statement of Principles is about **acute infectious mononucleosis** and **death from acute infectious mononucleosis**.
 - (b) For the purposes of this Statement of Principles, "**acute infectious mononucleosis**" means a symptomatic, clinical illness due to Epstein-Barr virus infection, accompanied by laboratory evidence of recently acquired Epstein-Barr virus infection. The infection is commonly characterised by pharyngitis, lymphadenopathy, splenomegaly fever, fatigue, myalgia and atypical lymphocytosis.
 - (c) Acute infectious mononucleosis attracts ICD-10-AM code B27.0.

- (d) In the application of this Statement of Principles, the definition of "**acute infectious mononucleosis**" is that given at paragraph 3(b) above.

Basis for determining the factors

4. The Repatriation Medical Authority is of the view that there is sound medical-scientific evidence that indicates that **acute infectious mononucleosis** and **death from acute infectious mononucleosis** can be related to relevant service rendered by veterans, members of Peacekeeping Forces, or members of the Forces under the VEA, or members under the *Military Rehabilitation and Compensation Act 2004* (the MRCA).

Factors that must be related to service

5. Subject to clause 7, at least one of the factors set out in clause 6 must be related to the relevant service rendered by the person.

Factors

6. The factor that must as a minimum exist before it can be said that a reasonable hypothesis has been raised connecting **acute infectious mononucleosis** or **death from acute infectious mononucleosis** with the circumstances of a person's relevant service is:
- (a) being exposed to the Epstein-Barr virus between 12 and 50 days before the clinical onset of acute infectious mononucleosis; or
 - (b) being in an immunosuppressed state at the time of the clinical onset of acute infectious mononucleosis; or
 - (c) inability to obtain appropriate clinical management for acute infectious mononucleosis.

Factors that apply only to material contribution or aggravation

7. Paragraph 6(c) applies only to material contribution to, or aggravation of, acute infectious mononucleosis where the person's acute infectious mononucleosis was suffered or contracted before or during (but not arising out of) the person's relevant service.

Inclusion of Statements of Principles

8. 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 as in force from time to time.

Other definitions

9. For the purposes of this Statement of Principles:

"being exposed to the Epstein-Barr virus" means

- (a) having exposure of the oral mucosa to saliva infected with Epstein-Barr virus; or
- (b) receiving a blood transfusion, blood products, a bone marrow transplant or an organ transplant infected with Epstein-Barr virus;

"being in an immunosuppressed state" means being in a condition of lowered immune function due to one of the following circumstances or conditions:

- (a) being infected with the human immunodeficiency virus;
- (b) having a haematological or solid organ malignancy;
- (c) undergoing chemotherapy for the treatment of a malignant or proliferative disease;
- (d) undergoing solid organ, stem cell or bone marrow transplantation; or
- (e) undergoing treatment with a tumour necrosis factor-alpha antagonist;

"death from acute infectious mononucleosis" in relation to a person includes death from a terminal event or condition that was contributed to by the person's acute infectious mononucleosis;

"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), Seventh Edition, effective date of 1 July 2010, copyrighted by the National Centre for Classification in Health, Sydney, NSW, and having ISBN 978 1 74210 154 5;

"relevant service" means:

- (a) operational service under the VEA;
- (b) peacekeeping service under the VEA;
- (c) hazardous service under the VEA;
- (d) British nuclear test defence service under the VEA;
- (e) warlike service under the MRCA; or
- (f) non-warlike service under the MRCA;

"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.

Application

10. This Instrument applies to all matters to which section 120A of the VEA or section 338 of the MRCA applies.

Date of effect

11. This Instrument takes effect from 11 January 2012.

Dated this *twenty-second* day of *December* 2011

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

KEN DONALD
CHAIRPERSON