

Statement of Principles

HAEMOCHROMATOSIS

No. 21 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 haemochromatosis No. 21 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. 5 of 1997 concerning haemochromatosis; and
 - (b) determines in its place this Statement of Principles.

Kind of injury, disease or death

- **3.** (a) This Statement of Principles is about haemochromatosis and death from haemochromatosis.
 - (b) For the purposes of this Statement of Principles, "haemochromatosis" means deposition of excessive amounts of iron in parenchymal cells with eventual tissue damage and impaired organ function, due to a genetic disorder of iron metabolism.
 - (c) Haemochromatosis attracts ICD-10-AM code E83.1.
 - (d) In the application of this Statement of Principles, the definition of "haemochromatosis" 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 medicalscientific evidence that indicates that **haemochromatosis** and **death from haemochromatosis** 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 **haemochromatosis** or **death from haemochromatosis** with the circumstances of a person's relevant service is:
 - (a) for males, consuming a total of 75 kilograms of alcohol within any five year period before the clinical worsening of haemochromatosis; or
 - (b) for females, consuming a total of 37 kilograms of alcohol within any five year period before the clinical worsening of haemochromatosis; or
 - (c) being infected with hepatitis C virus at the time of the clinical worsening of haemochromatosis; or
 - (d) having chronic blood transfusional overload at the time of the clinical worsening of haemochromatosis, where the last blood transfusion occurred within the one month before the clinical worsening of haemochromatosis; or
 - (e) inability to obtain appropriate clinical management for haemochromatosis.

Factors that apply only to material contribution or aggravation

7. Paragraphs 6(a) to 6(e) apply only to material contribution to, or aggravation of, haemochromatosis where the person's haemochromatosis 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:

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

"chronic blood transfusional overload" means:

- (a) cumulative blood transfusions which have reached 120-ml packed red blood cell per kilogram of body weight and a serum ferritin level consistently greater than 1000 nanograms per millilitre;
- (b) liver iron content by biopsy, superconducting quantum interference device or magnetic resonance imaging elevated above 7 milligrams per gram dry weight due to cumulative blood transfusions; or
- (c) at least ten blood transfusions within a two year period which has resulted in a serum ferritin level consistently greater than 1000 nanograms per millilitre;

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

"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 7 March 2012.

Dated this *twenty-fourth* day of *February* 2012

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

KEN DONALD CHAIRPERSON