



Australian Government
Repatriation Medical Authority

Statement of Principles
concerning

MOTOR NEURONE DISEASE

No. 67 of 2013

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 motor neurone disease No. 67 of 2013.

Determination

2. The Repatriation Medical Authority under subsection **196B(2)** and **(8)** of the *Veterans' Entitlements Act 1986* (the VEA):
 - (a) revokes Instrument No. 7 of 2006, as amended by Instrument No. 53 of 2009, concerning motor neurone disease; and
 - (b) determines in their place this Statement of Principles.

Kind of injury, disease or death

3.
 - (a) This Statement of Principles is about **motor neurone disease** and **death from motor neurone disease**.
 - (b) For the purposes of this Statement of Principles, "**motor neurone disease**" means a progressive neurodegenerative disease with clinical signs of lower and upper motor neurone damage in the absence of other disease processes that explain the clinical signs.
 - (c) Motor neurone disease attracts ICD-10-AM code G12.2.
 - (d) In the application of this Statement of Principles, the definition of "**motor neurone disease**" 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 **motor neurone disease** and **death from motor neurone disease** 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 **motor neurone disease** or **death from motor neurone disease** with the circumstances of a person's relevant service is:
 - (a) smoking at least ten pack-years of cigarettes, or the equivalent thereof in other tobacco products, before the clinical onset of motor neurone disease; or
 - (b) having a moderate to severe traumatic brain injury more than one year before the clinical onset of motor neurone disease; or
 - (c) having received at least 250 blows to the head while participating in a high impact contact activity, where these blows occurred more than one year before the clinical onset of motor neurone disease; or
 - (d) inability to obtain appropriate clinical management for motor neurone disease.

Factors that apply only to material contribution or aggravation

7. Paragraph **6(d)** applies only to material contribution to, or aggravation of, motor neurone disease where the person's motor neurone disease 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:
"a high impact contact activity" means a sport or pastime in which there is forceful impact of the head with another object or person;

"blows to the head" means episodes in which blunt, non-penetrating rotatory or linear acceleration or deceleration forces, of at least of the intensity that would be received from a forceful punch to the head from a gloved fist, are applied (directly or indirectly) to the head, with or without concussion or loss of consciousness;

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

"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), Eighth Edition, effective date of 1 July 2013, copyrighted by the Independent Hospital Pricing Authority, and having ISBN 978-1-74128-213-9;

"pack-years of cigarettes, or the equivalent thereof in other tobacco products" means a calculation of consumption where one pack-year of cigarettes equals twenty tailor-made cigarettes per day for a period of one calendar year, or 7 300 cigarettes. One tailor-made cigarette approximates one gram of tobacco or one gram of cigar or pipe tobacco by weight. One pack-year of tailor-made cigarettes equates to 7.3 kilograms of smoking tobacco by weight. Tobacco products mean cigarettes, pipe tobacco or cigars, smoked alone or in any combination;

"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 4 September 2013.

Dated this **twenty-sixth** day of **August** 2013

The Common Seal of the
Repatriation Medical Authority
was affixed to this instrument
at the direction of:

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PROFESSOR NICHOLAS SAUNDERS AO
CHAIRPERSON