



Australian Government
Repatriation Medical Authority

Statement of Principles
concerning

HERPES ZOSTER

No. 47 of 2015

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 herpes zoster No. 47 of 2015.

Determination

2. The Repatriation Medical Authority under subsection **196B(2)** and **(8)** of the *Veterans' Entitlements Act 1986* (the VEA):
 - (a) revokes Instrument No. 27 of 2007 concerning herpes zoster; and
 - (b) determines in its place this Statement of Principles.

Kind of injury, disease or death

3.
 - (a) This Statement of Principles is about **herpes zoster** and **death from herpes zoster**.
 - (b) For the purposes of this Statement of Principles, "**herpes zoster**" means a vesicular eruption, usually unilateral and within a single dermatome, resulting from the reactivation of a dormant varicella-zoster virus infection.
 - (c) Herpes zoster attracts ICD-10-AM code B02.
 - (d) In the application of this Statement of Principles, the definition of "**herpes zoster**" 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 **herpes zoster** and **death from herpes zoster** 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 **herpes zoster** or **death from herpes zoster** with the circumstances of a person's relevant service is:
 - (a) having chickenpox before the clinical onset of herpes zoster; or
 - (b) for vaccine strain herpes zoster only, having live attenuated varicella vaccine before the clinical onset of herpes zoster; or
 - (c) being in an immunocompromised state as specified at the time of the clinical onset of herpes zoster; or
 - (d) having trauma, including surgery, involving:
 - (i) the dermatome affected by herpes zoster or a contiguous dermatome; or
 - (ii) the nerve supply to the dermatome affected by herpes zoster or a contiguous dermatome;within the eight weeks before the clinical onset of herpes zoster;
 - (e) having diabetes mellitus at the time of the clinical onset of herpes zoster; or
 - (f) being in an immunocompromised state as specified at the time of the clinical worsening of herpes zoster; or
 - (g) having diabetes mellitus at the time of the clinical worsening of herpes zoster; or
 - (h) inability to obtain appropriate clinical management for herpes zoster.

Factors that apply only to material contribution or aggravation

7. Paragraphs **6(f) to 6(h)** apply only to material contribution to, or aggravation of, herpes zoster where the person's herpes zoster 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:

"an immunocompromised state as specified" means a condition of substantially lowered immune function, such as would occur in the following conditions or circumstances:

- (a) being infected with human immunodeficiency virus;
- (b) being treated with an immunosuppressive drug;
- (c) having a haematological or solid organ malignancy;
- (d) having chronic renal failure;
- (e) having severe malnutrition; or
- (f) undergoing solid organ, stem cell or bone marrow transplantation;

"being treated with an immunosuppressive drug" means being treated with a drug or an agent which results in significant suppression of immune responses. This definition includes corticosteroids other than inhaled or topical corticosteroids, drugs used to prevent transplant rejection, tumour necrosis factor- α inhibitors and chemotherapeutic agents used for the treatment of cancer;

"chronic renal failure" means having a glomerular filtration rate of less than 60 mL/min/1.73 m² for a period of at least three months, or the presence of irreversible kidney damage;

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

"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;

"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;

"vaccine strain herpes zoster" means herpes zoster attributed to the vaccine strain varicella-zoster virus by means of isolating the vaccine strain virus from the lesions.

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 30 March 2015.

Dated this **twenty-seventh** day of **February** 2015

The Common Seal of the
Repatriation Medical Authority
was affixed at the direction of:)
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PROFESSOR NICHOLAS SAUNDERS AO
CHAIRPERSON