

Statement of Principles

concerning

LYME DISEASE  
(Reasonable Hypothesis)

(No. 25 of 2016)

The Repatriation Medical Authority determines the following Statement of Principles under subsection 196B(2) of the *Veterans’ Entitlements Act 1986*.

Dated 4 March 2016

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



Professor Nicholas Saunders AO

Chairperson

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1 Definitions 6

1. Name

This is the Statement of Principles concerning *Lyme disease* *(Reasonable Hypothesis)* (No. 25 of 2016).

1. Commencement

This instrument commences on 4 April 2016.

1. Authority

This instrument is made under subsection 196B(2) of the *Veterans’ Entitlements Act 1986*.

1. Application

This instrument applies to a claim to which section 120A of the VEA or section 338 of the *Military Rehabilitation and Compensation Act 2004* applies.

1. Definitions

The terms defined in the Schedule 1 - Dictionary have the meaning given when used in this instrument.

1. Kind of injury, disease or death to which this Statement of Principles relates
   1. This Statement of Principles is about Lyme disease and death from Lyme disease.

Meaning of **Lyme disease**

* 1. For the purposes of this Statement of Principles, Lyme disease means a clinical illness caused by infection with specified bacteria belonging to the *Borrelia burgdorferi* sensu lato complex which has been confirmed by laboratory testing as specified. This condition is characterised in most cases by an initial illness involving a distinctive skin lesion (erythema migrans), sometimes with an accompanying systemic flu-like illness. In some cases there may be neurologic, rheumatologic or cardiac involvement occurring weeks to years after infection.

Note: ***erythema migrans***, ***laboratory testing as specified*** and ***specified bacteria belonging to the Borrelia burgdorferi sensu lato complex*** are defined in the Schedule 1 – Dictionary.

* 1. While Lyme disease attracts ICD‑10‑AM code A69.2, in applying this Statement of Principles the meaning of Lyme disease is that given in subsection (2).
  2. For subsection (3), a reference to an ICD‑10‑AM codeis a reference to the code assigned to a particular kind of injury or disease in *The International Statistical Classification of Diseases and Related Health Problems*, *Tenth Revision, Australian Modification* (ICD‑10‑AM), Ninth Edition, effective date of 1 July 2015, copyrighted by the Independent Hospital Pricing Authority, ISBN 978‑1‑76007‑020‑5.

Death from **Lyme disease**

* 1. For the purposes of this Statement of Principles, Lyme disease,in relation to a person, includes death from a terminal event or condition that was contributed to by the person’s Lyme disease.

Note: ***terminal event*** is defined in the Schedule 1 – Dictionary.

1. Basis for determining the factors

The Repatriation Medical Authority is of the view that there is sound medical‑scientific evidence that indicates that Lyme disease and death from Lyme 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 MRCA.

Note: ***relevant service*** is defined in the Schedule 1 – Dictionary.

1. Factors that must exist

At least one of the following factors must as a minimum exist before it can be said that a reasonable hypothesis has been raised connecting Lyme disease or death from Lyme disease with the circumstances of a person’s relevant service:

* 1. being in an area that is endemic for Lyme disease at least three days before the clinical onset of Lyme disease;

Note: ***an area that is endemic for Lyme disease*** is defined in the Schedule 1 - Dictionary.

* 1. for cases presenting with erythema migrans, being in an area that is endemic for Lyme disease between three and 32 days before the clinical onset of Lyme disease;

Note: ***an area that is endemic for Lyme disease*** and ***erythema migrans*** are defined in the Schedule 1 - Dictionary.

* 1. inability to obtain appropriate clinical management for Lyme disease.

1. Relationship to service
   1. The existence in a person of any factor referred to in section 8, must be related to the relevant service rendered by the person.
   2. The factor set out in subsection 8(3) applies only to material contribution to, or aggravation of, Lyme disease where the person’s Lyme disease was suffered or contracted before or during (but did not arise out of) the person’s relevant service.
2. Factors referring to an injury or disease covered by another Statement of Principles

In this Statement of Principles:

* 1. if a factor referred to in section 8 applies in relation to a person; and
  2. that factor refers to an injury or disease in respect of which a Statement of Principles has been determined under subsection 196B(2) of the VEA;

then the factors in that Statement of Principles apply in accordance with the terms of that Statement of Principles as in force from time to time.

Schedule 1 - Dictionary

Note: See Section 5

1. Definitions
   1. In this instrument:
      1. ***an area that is endemic for Lyme disease*** means an area with an established vector tick population and evidence of enzootic transmission of relevant Borrelia species between the tick and the resident animal population. This definition applies to the United States of America, Europe, the United Kingdom, Russia, Japan, China, Iraq, Iran and Afghanistan.

Note: ***vector tick*** is also defined in the Schedule 1 - Dictionary.

* + 1. ***erythema migrans*** means an expanding red or bluish-red patch with or without central clearing that is at least five centimetres in diameter; or if less than five centimetres in diameter, there is also a history of a bite from a vector tick, a delay in appearance after the tick bite of at least two days and an expanding rash at the site of the tick bite.

Note: ***vector tick*** is also defined in the Schedule 1 - Dictionary.

* + 1. ***laboratory testing as specified*** means testing which has been performed in a laboratory which has Lyme disease testing in its scope of accreditation and which is compliant with relevant Australian standards, or testing in a nationally accredited laboratory where the patient was infected. Methods of laboratory testing include culture, nucleic acid amplification (PCR) and serology. Where serology has been performed, the testing must follow a two tiered approach involving a screening immunoassay and a confirmatory immunoblot in which five of ten specific bands are present.
    2. ***Lyme disease***—see subsection 6(2).
    3. ***MRCA*** means the *Military Rehabilitation and Compensation Act 2004*.
    4. ***relevant service*** means:
       1. operational service under the VEA;
       2. peacekeeping service under the VEA;
       3. hazardous service under the VEA;
       4. British nuclear test defence service under the VEA;
       5. warlike service under the MRCA; or
       6. non-warlike service under the MRCA.
    5. ***specified bacteria belonging to the Borrelia burgdorferi sensu lato complex*** means *Borrelia burgdorferi* sensu stricto, *Borrelia afzelii*, *Borrelia garinii*, *Borrelia spielmanii*, *Borrelia bavariensis*, *Borrelia bissettii*, *Borrelia lusitaniae*, *Borrelia valaisiana* or *Borrelia mayonii.*
    6. ***terminal event*** means the proximate or ultimate cause of death and includes the following:
       1. pneumonia;
       2. respiratory failure;
       3. cardiac arrest;
       4. circulatory failure; or
       5. cessation of brain function.
    7. ***VEA*** means the *Veterans' Entitlements Act 1986*.
    8. ***vector tick*** means *Ixodes ricinus*, *Ixodes persulcatus*, *Ixodes scapularis* or *Ixodes pacificus*.