

Statement of Principles

concerning

TENSION-TYPE HEADACHE  
(Balance of Probabilities)

(No. 38 of 2018)

The Repatriation Medical Authority determines the following Statement of Principles under subsection 196B(3) of the *Veterans' Entitlements Act 1986*.

Dated 27 April 2018

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| The Common Seal of the Repatriation Medical Authority was affixed to this instrument at the direction of: |
| Professor Nicholas Saunders AO  Chairperson |

Contents

1 Name 3

2 Commencement 3

3 Authority 3

4 Revocation 3

5 Application 3

6 Definitions 3

7 Kind of injury, disease or death to which this Statement of Principles relates 3

8 Basis for determining the factors 4

9 Factors that must exist 5

10 Relationship to service 5

11 Factors referring to an injury or disease covered by another Statement of Principles 5

Schedule 1 - Dictionary 6

1 Definitions 6

1. Name

This is the Statement of Principles concerning *tension-type headache* *(Balance of Probabilities)* (No. 38 of 2018).

1. Commencement

This instrument commences on 28 May 2018.

1. Authority

This instrument is made under subsection 196B(3) of the *Veterans' Entitlements Act 1986*.

1. Revocation

The Statement of Principles concerning tension-type headache No. 2 of 2010 made under subsection 196B(3) of the VEA is revoked.

1. Application

This instrument applies to a claim to which section 120B of the VEA or section 339 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 tension-type headache and death from tension-type headache.

Meaning of **tension-type headache**

* 1. For the purposes of this Statement of Principles, tension-type headache:
     1. means a condition in which within a 12 month period, there are episodes of headache lasting at least 30 minutes, occurring on at least one day per month for at least three consecutive months, and a minimum of ten episodes occur within that 12 month period; and
     2. has at least two of the following characteristics:
        1. bilateral location;
        2. pressing/tightening (nonpulsating) quality;
        3. mild or moderate intensity;
        4. not aggravated by routine physical activity (such as walking or climbing stairs); and
     3. causes clinically significant distress or impairment of social, occupational, educational, or other important areas of functioning; and
     4. excludes:
        1. cluster headache;
        2. migraine;
        3. headache attributable to structural abnormalities or inflammatory disorders of the head and neck;
        4. headache attributable to systemic disease; and
        5. headache that results from normal physiological stress such as exercise, or the temporary effect of extraneous agents.
  2. While tension-type headache attracts ICD‑10‑AM code G44.2, in applying this Statement of Principles the meaning of tension-type headache is that given in subsection (2).
  3. For subsection (3), a reference to an ICD-10-AM code is 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), Tenth Edition, effective date of 1 July 2017, copyrighted by the Independent Hospital Pricing Authority, ISBN 978-1-76007-296-4.

Death from **tension-type headache**

* 1. For the purposes of this Statement of Principles, tension-type headache,in relation to a person, includes death from a terminal event or condition that was contributed to by the person's tension-type headache.

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

1. Basis for determining the factors

On the sound medical‑scientific evidence available, the Repatriation Medical Authority is of the view that it is more probable than not that tension-type headache and death from tension-type headache can be related to relevant service rendered by veterans or members of the Forces under the VEA, or members under the MRCA.

Note: ***MRCA***, ***relevant service*** and ***VEA*** are defined in the Schedule 1 – Dictionary.

1. Factors that must exist

At least one of the following factors must exist before it can be said that, on the balance of probabilities, tension-type headache or death from tension-type headache is connected with the circumstances of a person's relevant service:

* 1. for chronic tension-type headache in migraine and cluster headache sufferers only, taking a drug as specified, for at least the three months before the clinical onset of tension-type headache;

Note: ***chronic tension-type headache*** and ***taking a drug as specified*** are defined in the Schedule 1 - Dictionary.

* 1. taking a drug as specified, for at least the three months before the clinical worsening of tension-type headache;

Note: ***taking a drug as specified*** is defined in the Schedule 1 - Dictionary.

* 1. undergoing treatment with a nitric oxide donor, at the time of the clinical worsening of tension-type headache;

Note: ***nitric oxide donor*** is defined in the Schedule 1 - Dictionary.

* 1. inability to obtain appropriate clinical management for tension-type headache.

1. Relationship to service
   1. The existence in a person of any factor referred to in section 9, must be related to the relevant service rendered by the person.
   2. The factors set out in subsections 9(2) to 9(4) apply only to material contribution to, or aggravation of, tension-type headache where the person's tension-type headache 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 9 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(3) 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 6

1. Definitions
   1. In this instrument:
      1. ***chronic tension-type headache*** means tension-type headache that lasts for hours or may be continuous, occurring on at least 15 days per month on average, for more than three months.
      2. ***combination analgesic medication*** means medication containing a simple analgesic combined with an opioid, butalbital or caffeine.
      3. ***MRCA*** means the *Military Rehabilitation and Compensation Act 2004*.
      4. ***nitric oxide donor*** means a pharmacologically active substance that releases nitric oxide *in vivo* or *in vitro* and includes amyl nitrate, glyceryl trinitrate, isosorbide mononitrate, isosorbide dinitrate, sodium nitroprusside, mannitol hexanitrate and nitrous oxide.
      5. ***relevant service*** means:
         1. eligible war service (other than operational service) under the VEA;
         2. defence service (other than hazardous service and British nuclear test defence service) under the VEA; or
         3. peacetime service under the MRCA.

Note: ***MRCA*** and ***VEA*** are also defined in the Schedule 1 - Dictionary.

* + 1. ***taking a drug as specified*** means:
       1. taking a simple analgesic on at least three days per week; or
       2. taking a triptan, ergotamine, an opioid, or a combination analgesic medication on at least two days per week.

Note: ***combination analgesic medication*** and ***triptan*** are also defined in the Schedule 1 – Dictionary.

* + 1. ***tension-type headache***—see subsection 7(2).
    2. ***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.
    3. ***triptan*** means a 5-hydroxytryptamine receptor agonist.
    4. ***VEA*** means the *Veterans' Entitlements Act 1986*.