



Australian Government
Repatriation Medical Authority

Statement of Principles
concerning
MESENTERIC PANNICULITIS
(Balance of Probabilities)
(No. 50 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

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

A handwritten signature in black ink, appearing to read 'Nicholas Saunders'.

Professor Nicholas Saunders AO
Chairperson

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1 Name

This is the Statement of Principles concerning *mesenteric panniculitis* (*Balance of Probabilities*) (No. 50 of 2018).

2 Commencement

This instrument commences on 28 May 2018.

3 Authority

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

4 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.

5 Definitions

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

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

- (1) This Statement of Principles is about mesenteric panniculitis and death from mesenteric panniculitis.

Meaning of mesenteric panniculitis

- (2) For the purposes of this Statement of Principles, mesenteric panniculitis:
- (a) means an inflammatory condition of the fatty layer (panniculus) that underlies the mesentery, omentum and peritoneum in the abdominal cavity, and which is clinically symptomatic or requires treatment; and
 - (b) excludes sclerosing encapsulating peritonitis, retroperitoneal fibrosis (Ormond disease), peritoneal adhesions, acute peritonitis, infectious peritonitis, and the radiological phenomenon of "misty mesentery" not diagnosed specifically as mesenteric panniculitis.

Note 1: Clinical symptoms commonly include acute or chronic abdominal pain, an abdominal mass or abdominal swelling, fever, weight loss, diarrhoea or vomiting. The symptoms are often due to obstruction of the bowel or mesenteric vessels.

Note 2: The inflammation is histologically characterised by chronic inflammatory infiltration by lymphocytes and macrophages, fat necrosis and fibrosis. Mesenteric panniculitis is diagnosed by histology or by abdominal imaging using established radiological criteria.

Note 3: Mesenteric panniculitis may also be known as mesenteric lipodystrophy or sclerosing mesenteritis.

- (3) While mesenteric panniculitis attracts ICD-10-AM code K65.8, in applying this Statement of Principles the meaning of mesenteric panniculitis is that given in subsection (2).
- (4) 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 mesenteric panniculitis

- (5) For the purposes of this Statement of Principles, mesenteric panniculitis, in relation to a person, includes death from a terminal event or condition that was contributed to by the person's mesenteric panniculitis.

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

7 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 mesenteric panniculitis and death from mesenteric panniculitis 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.

8 Factor that must exist

The factor that must exist before it can be said that, on the balance of probabilities, mesenteric panniculitis or death from mesenteric panniculitis is connected with the circumstances of a person's relevant service is inability to obtain appropriate clinical management for mesenteric panniculitis.

9 Relationship to service

The existence in a person of the factor referred to in section 8, applies only to material contribution to, or aggravation of, mesenteric panniculitis where the person's mesenteric panniculitis was suffered or contracted before or during (but did not arise out of) the person's relevant service.

Schedule 1 - Dictionary

Note: See Section 5

1 Definitions

In this instrument:

mesenteric panniculitis—see subsection 6(2).

MRCA means the *Military Rehabilitation and Compensation Act 2004*.

relevant service means:

- (a) eligible war service (other than operational service) under the VEA;
- (b) defence service (other than hazardous service and British nuclear test defence service) under the VEA; or
- (c) peacetime service under the MRCA.

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

terminal event means the proximate or ultimate cause of death and includes the following:

- (a) pneumonia;
- (b) respiratory failure;
- (c) cardiac arrest;
- (d) circulatory failure; or
- (e) cessation of brain function.

VEA means the *Veterans' Entitlements Act 1986*.