



**Australian Government**  
**Repatriation Medical Authority**

**Statement of Principles**  
**concerning**  
**REACTIVE ARTHRITIS**  
**(Balance of Probabilities)**  
**(No. 76 of 2018)**

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

Dated 24 August 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 'N. Saunders'.

Professor Nicholas Saunders AO  
Chairperson

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**1 Name**

This is the Statement of Principles concerning *reactive arthritis (Balance of Probabilities)* (No. 76 of 2018).

**2 Commencement**

This instrument commences on 24 September 2018.

**3 Authority**

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

**4 Repeal**

The Statement of Principles concerning reactive arthritis No. 27 of 2010 (Federal Register of Legislation No. F2010L01043) made under subsection 196B(3) of the VEA is repealed.

**5 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.

**6 Definitions**

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

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

- (1) This Statement of Principles is about reactive arthritis and death from reactive arthritis.

*Meaning of reactive arthritis*

- (2) For the purposes of this Statement of Principles, reactive arthritis:
- (a) means an immune-mediated arthritis of more than four weeks' duration; and
  - (b) is usually associated with evidence of a preceding extra-articular infection; and
  - (c) excludes:
    - (i) acute rheumatic fever;
    - (ii) arthritis associated with viruses which are known to cause arthritis as part of the usual spectrum of clinical manifestations (for example, Ross River virus infection, Barmah Forest virus, rubella virus, parvovirus B19);

- (iii) leptospirosis;
- (iv) Lyme disease;
- (v) post-streptococcal reactive arthritis; and
- (vi) septic arthritis.

Note: Typical clinical manifestations include a predominantly lower limb, asymmetric oligoarthritis and may include extra-articular manifestations, such as urethritis, cervicitis, conjunctivitis, skin lesions, sacroiliitis, spondylitis and enthesitis.

- (3) While reactive arthritis attracts ICD-10-AM code M02, in applying this Statement of Principles the meaning of reactive arthritis 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 reactive arthritis*

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

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

## **8 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 reactive arthritis and death from reactive arthritis 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.

## **9 Factors that must exist**

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

- (1) having an infection as specified within the three months before the clinical onset of reactive arthritis;
- (2) having infection with human immunodeficiency virus at the time of the clinical onset of reactive arthritis;
- (3) being vaccinated with hepatitis B vaccine within the 30 days before the clinical onset of reactive arthritis;

- (4) having intravesical BCG therapy for malignant neoplasm of the bladder or intradermal BCG therapy for a malignant neoplasm within the 30 days before the clinical onset of reactive arthritis;

Note: *BCG therapy* is defined in the Schedule 1 - Dictionary.

- (5) having active mycobacterial disease within the 30 days before the clinical onset of reactive arthritis;

Note: *active mycobacterial disease* is defined in the Schedule 1 - Dictionary.

- (6) having intestinal bypass surgery within the one year before the clinical onset of reactive arthritis;

- (7) inability to obtain appropriate clinical management for reactive arthritis.

## **10 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 factor set out in subsection 9(7) applies only to material contribution to, or aggravation of, reactive arthritis where the person's reactive arthritis was suffered or contracted before or during (but did not arise out of) the person's relevant service.

## **11 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

In this instrument:

***active mycobacterial disease*** means an illness in which tuberculosis bacteria or atypical mycobacteria are multiplying and inducing an inflammatory response.

***BCG therapy*** means treatment with the Bacille Calmette-Guerin vaccine.

***infection as specified*** means:

- (a) clinical or laboratory evidence of a bowel infection; or
- (b) clinical or laboratory evidence of a sexually acquired urogenital infection (including proctitis and excluding genital warts and herpes simplex); or
- (c) clinical or laboratory evidence of an infection with *Staphylococcus aureus*, *Chlamydia pneumoniae*, *Chlamydia psittaci* or *Chlamydia trachomatis*.

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

***reactive arthritis***—see subsection 7(2).

***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*.