



Australian Government
Repatriation Medical Authority

Statement of Principles
concerning
HUMAN T-CELL LYMPHOTROPIC VIRUS
TYPE-1 INFECTION
(Reasonable Hypothesis)
(No. 96 of 2018)

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

Dated 26 October 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 *human T-cell lymphotropic virus type-1 infection (Reasonable Hypothesis)* (No. 96 of 2018).

2 Commencement

This instrument commences on 26 November 2018.

3 Authority

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

4 Repeal

The Statement of Principles concerning human T-cell lymphotropic virus type-1 No. 7 of 2010 (Federal Register of Legislation No. F2010L00014) made under subsection 196B(2) of the VEA is repealed.

5 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.

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 human T-cell lymphotropic virus type-1 infection and death from human T-cell lymphotropic virus type-1 infection.

Meaning of human T-cell lymphotropic virus type-1 infection

- (2) For the purposes of this Statement of Principles, human T-cell lymphotropic virus type-1 infection means an infection that is caused by the retrovirus human T-cell lymphotropic virus type-1 (HTLV-1).
- (3) While human T-cell lymphotropic virus type-1 infection attracts ICD-10-AM code Z22.6, in applying this Statement of Principles the meaning of human T-cell lymphotropic virus type-1 infection 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 human T-cell lymphotropic virus type-1 infection

- (5) For the purposes of this Statement of Principles, human T-cell lymphotropic virus type-1 infection, in relation to a person, includes death from a terminal event or condition that was contributed to by the person's human T-cell lymphotropic virus type-1 infection.

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

8 Basis for determining the factors

The Repatriation Medical Authority is of the view that there is sound medical-scientific evidence that indicates that human T-cell lymphotropic virus type-1 infection and death from human T-cell lymphotropic virus type-1 infection 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: *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 as a minimum exist before it can be said that a reasonable hypothesis has been raised connecting human T-cell lymphotropic virus type-1 infection or death from human T-cell lymphotropic virus type-1 infection with the circumstances of a person's relevant service:

- (1) being exposed to HTLV-1 before the clinical onset of human T-cell lymphotropic virus type-1 infection;

Note: *being exposed to HTLV-1* is defined in the Schedule 1 - Dictionary.

- (2) having:

- (a) herpes simplex virus type 2 anogenital infection; or
(b) a genital ulcerative disease; or
(c) a non-ulcerative anogenital sexually transmitted infection with clinical symptoms or signs, excluding genital warts;

within the four weeks before the clinical onset of human T-cell lymphotropic virus type-1 infection;

- (3) having infection with human immunodeficiency virus at the time of the clinical worsening of human T-cell lymphotropic virus type-1 infection;
- (4) inability to obtain appropriate clinical management for human T-cell lymphotropic virus type-1 infection.

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 factors set out in subsections 9(3) and 9(4) apply only to material contribution to, or aggravation of, human T-cell lymphotropic virus type-1 infection where the person's human T-cell lymphotropic virus type-1 infection 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(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 6

1 Definitions

In this instrument:

being exposed to HTLV-1 means:

- (a) having percutaneous exposure (intravenous, intramuscular, subcutaneous or intradermal) or permucosal exposure to a specified body substance which is derived from a person infected with HTLV-1; or
- (b) having a tissue or organ transplant, where the tissue or organ is derived from a person infected with HTLV-1.

Note: *specified body substance* is also defined in the Schedule 1 - Dictionary.

human T-cell lymphotropic virus type-1 infection—see subsection 7(2).

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

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.

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

specified body substance means:

- (a) blood, cellular blood products or any body fluid containing blood; or
- (b) semen or vaginal secretions.

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*.