

Statement of Principles

concerning

CONDUCTIVE HEARING LOSS
(Reasonable Hypothesis)

(No. 81 of 2019)

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

Dated 23 August 2019

|  |
| --- |
| The Common Seal of theRepatriation Medical Authoritywas affixed to this instrumentat the direction of: |
| Professor Nicholas Saunders AOChairperson |

Contents

1 Name 3

2 Commencement 3

3 Authority 3

4 Repeal 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 4

10 Relationship to service 7

11 Factors referring to an injury or disease covered by another Statement of Principles 7

Schedule 1 - Dictionary 8

1 Definitions 8

1. Name

This is the Statement of Principles concerning *conductive hearing loss* *(Reasonable Hypothesis)* (No. 81 of 2019).

1. Commencement

 This instrument commences on 23 September 2019.

1. Authority

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

1. Repeal

The Statement of Principles concerning conductive hearing loss No. 7 of 2011 (Federal Register of Legislation No. F2010L03255) made under subsection 196B(2) of the VEA is repealed.

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 conductive hearing loss and death from conductive hearing loss.

Meaning of **conductive hearing loss**

* 1. For the purposes of this Statement of Principles, conductive hearing loss:
		1. means acquired hearing loss due to defective conduction of sound from the external environment to the inner ear, with a permanent shift to a hearing threshold level of 25 decibels (dB) or more in the frequency of 500, 1 000, 2 000, 3 000, 4 000 or 6 000 hertz (Hz), and an air-bone gap in the affected ear of:
			1. at least 10 dB at three or more of these frequencies; or
			2. at least 15 dB at any one of these frequencies.

Note 1: The hearing loss is related to defective conduction of sound through the external auditory canal, the tympanic membrane (ear drum), middle ear ossicles or the middle ear space.

Note 2: ***air-bone gap*** is defined in the Schedule 1 – Dictionary.

Death from **conductive hearing loss**

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

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 conductive hearing loss and death from conductive hearing loss 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.

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 conductivehearing loss or death from conductive hearing loss with the circumstances of a person's relevant service:

* 1. having otosclerosis on the affected side at the time of the clinical onset of conductive hearing loss;
	2. having a disease from the specified list of bone diseases, involving the conductive hearing apparatus of the affected side, at the time of the clinical onset of conductive hearing loss;

Note: ***conductive hearing apparatus*** and ***specified list of bone diseases*** are defined in the Schedule 1 - Dictionary.

* 1. having osteoporosis at the time of the clinical onset of conductive hearing loss;
	2. having an episode of otitic barotrauma involving the affected ear, within the seven days before the clinical onset of conductive hearing loss;
	3. being exposed to a peak sound pressure level at the tympanic membrane of at least 140 dB(C), within the seven days before the clinical onset of conductive hearing loss;

Note: ***dB(C)*** is defined in the Schedule 1 - Dictionary.

* 1. being exposed to an explosive blast within the seven days before the clinical onset of conductive hearing loss;
	2. being struck by lightning within the seven days before the clinical onset of conductive hearing loss;
	3. having blunt trauma, penetrating trauma or surgery, involving the conductive hearing apparatus of the affected ear, within the seven days before the clinical onset of conductive hearing loss;

Note: ***conductive hearing apparatus*** is defined in the Schedule 1 - Dictionary.

* 1. having acquired, permanent narrowing or obstruction of the external auditory canal of the affected ear, at the time of the clinical onset of conductive hearing loss;

Note 1: Examples of causes of narrowing or obstruction of the external auditory canal include, but are not limited to:

1. benign fibro-osseous lesion;
2. benign or malignant neoplasm;
3. chronic otitis externa;
4. exostosis of the external auditory canal;
5. granuloma; and
6. necrotising otitis externa.

Note 2: ***exostosis of the external auditory canal*** is defined in the Schedule 1 – Dictionary.

* 1. having chronic otitis media, involving the middle ear of the affected side, at the time of the clinical onset of conductive hearing loss;

Note: ***chronic otitis media*** is defined in the Schedule 1 - Dictionary.

* 1. having:
		1. a benign or malignant neoplasm; or
		2. other mass lesion;

involving the middle ear of the affected side, at the time of the clinical onset of conductive hearing loss;

Note: Examples of neoplasms or mass lesions involving the middle ear include, but are not limited to:

1. cholesteatoma;
2. granuloma; and
3. neuroendocrine adenoma.
	1. having a disease from the specified list of autoimmune diseases, at the time of the clinical onset of conductive hearing loss;

Note: ***specified list of autoimmune diseases*** is defined in the Schedule 1 – Dictionary.

* 1. undergoing a course of therapeutic radiation for cancer, where the conductive hearing apparatus of the affected side was in the field of radiation, before the clinical onset of conductive hearing loss;

Note: ***conductive hearing apparatus*** is defined in the Schedule 1 – Dictionary.

* 1. having otosclerosis on the affected side at the time of the clinical worsening of conductive hearing loss;
	2. having a disease from the specified list of bone diseases, involving the conductive hearing apparatus of the affected side, at the time of the clinical worsening of conductive hearing loss;

Note: ***conductive hearing apparatus*** and ***specified list of bone diseases*** are defined in the Schedule 1 - Dictionary.

* 1. having osteoporosis at the time of the clinical worsening of conductive hearing loss;
	2. having an episode of otitic barotrauma involving the affected ear, within the seven days before the clinical worsening of conductive hearing loss;
	3. being exposed to a peak sound pressure level at the tympanic membrane of at least 140 dB(C), within the seven days before the clinical worsening of conductive hearing loss;

Note: ***dB(C)*** is defined in the Schedule 1 - Dictionary.

* 1. being exposed to an explosive blast within the seven days before the clinical worsening of conductive hearing loss;
	2. being struck by lightning within the seven days before the clinical worsening of conductive hearing loss;
	3. having blunt trauma, penetrating trauma or surgery, involving the conductive hearing apparatus of the affected ear, within the seven days before the clinical worsening of conductive hearing loss;

Note: ***conductive hearing apparatus*** is defined in the Schedule 1 - Dictionary.

* 1. having acquired, permanent narrowing or obstruction of the external auditory canal of the affected ear, at the time of the clinical worsening of conductive hearing loss;

Note 1: Examples of causes of narrowing or obstruction of the external auditory canal include, but are not limited to:

1. benign fibro-osseous lesion;
2. benign or malignant neoplasm;
3. chronic otitis externa;
4. exostosis of the external auditory canal;
5. granuloma; and
6. necrotising otitis externa.

Note 2: ***exostosis of the external auditory canal*** is defined in the Schedule 1 – Dictionary.

* 1. having chronic otitis media, involving the middle ear of the affected side, at the time of the clinical worsening of conductive hearing loss;

Note: ***chronic otitis media*** is defined in the Schedule 1 - Dictionary.

* 1. having:
		1. a benign or malignant neoplasm; or
		2. other mass lesion;

involving the middle ear of the affected side, at the time of the clinical worsening of conductive hearing loss;

Note: Examples of neoplasms or mass lesions involving the middle ear include, but are not limited to:

1. cholesteatoma;
2. granuloma; and
3. neuroendocrine adenoma.
	1. having a disease from the specified list of autoimmune diseases, at the time of the clinical worsening of conductive hearing loss;

Note: ***specified list of autoimmune diseases*** is defined in the Schedule 1 – Dictionary.

* 1. undergoing a course of therapeutic radiation for cancer, where the conductive hearing apparatus of the affected side was in the field of radiation, before the clinical worsening of conductive hearing loss;

Note: ***conductive hearing apparatus*** is defined in the Schedule 1 – Dictionary.

* 1. inability to obtain appropriate clinical management for conductive hearing loss.
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(14) to 9(27) apply only to material contribution to, or aggravation of, conductive hearing loss where the person's conductive hearing loss 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(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
	1. In this instrument:

***air-bone gap*** means a difference between the air conduction and bone conduction thresholds, as measured by pure-tone audiometry.

***chronic otitis media*** means a chronic inflammation of the middle ear that is characterised by discharge from the middle ear through a perforated tympanic membrane that persists for at least six weeks.

***conductive hearing apparatus*** means the external auditory canal or middle ear, including the tympanic membrane (ear drum) and middle ear ossicles.

* + 1. ***conductive hearing loss***—see subsection 7(2).

***dB(C)*** is the sound pressure level in decibels measured by a sound level meter using a type C electronic filter. The type C filter is used to measure peak or impact sound pressure levels.

***exostosis of the external auditory canal*** means abnormal bone growth within the external auditory ear canal caused by irritation from prolonged or repeated exposure to cold wind and water. It is also known as surfer's ear.

***fibrous dysplasia*** is a benign disorder that causes marrow fibrosis, abnormal matrix production, and stimulation of osteoclastic reabsorption.

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

***osteoma***means a benign neoplasm in which a new piece of bone usually grows on another piece of bone.

***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.

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

***specified list of autoimmune diseases*** means:

* + - 1. chronic psoriasis
			2. granulomatosis with polyangiitis (Wegener granulomatosis);
			3. polyarteritis nodosa;
			4. relapsing polychondritis;
			5. rheumatoid arthritis;
			6. systemic lupus erythematosus; or
			7. systemic sclerosis.

***specified list of bone diseases*** means:

* + - 1. acromegaly;
			2. fibrous dysplasia;
			3. osteoma;
			4. osteonecrosis; or
			5. Paget's disease of bone.

Note: ***fibrous dysplasia*** and ***osteoma*** are also defined in the Schedule 1 – Dictionary.

***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.

***VEA*** means the *Veterans' Entitlements Act 1986*.