



Australian Government
Repatriation Medical Authority

Statement of Principles
concerning
RHEUMATIC HEART DISEASE
(Reasonable Hypothesis)
(No. 51 of 2019)

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

Dated 26 April 2019

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

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	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 *rheumatic heart disease (Reasonable Hypothesis)* (No. 51 of 2019).

2 Commencement

This instrument commences on 27 May 2019.

3 Authority

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

4 Repeal

The Statement of Principles concerning rheumatic heart disease No. 19 of 2011 (Federal Register of Legislation No. F2011L00493) made under subsection 196B(2) of the VEA is repealed.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 rheumatic heart disease and death from rheumatic heart disease.

Meaning of rheumatic heart disease

- (2) For the purposes of this Statement of Principles, rheumatic heart disease:
- (a) means a clinically or echocardiographically documented cardiac disease, commonly involving the mitral or aortic valve, that follows acute rheumatic fever; and
 - (b) includes pathological stenosis or regurgitation in the presence of scarring, deformity or morphological change of at least one heart valve, chronic rheumatic myocarditis and chronic rheumatic pericarditis; and
 - (c) excludes acute carditis of acute rheumatic fever.

Note: Rheumatic heart disease can be diagnosed in the absence of previously documented acute rheumatic fever.

- (3) While rheumatic heart disease attracts ICD-10-AM code I05, I06, I07, I08 or I09, in applying this Statement of Principles the meaning of rheumatic heart disease 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 rheumatic heart disease

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

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 rheumatic heart disease and death from rheumatic heart disease 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 rheumatic heart disease or death from rheumatic heart disease with the circumstances of a person's relevant service:

- (1) having acute rheumatic fever at least three months before the clinical onset of rheumatic heart disease;
- (2) having a group A beta-haemolytic streptococcal infection of the skin or the pharynx at least three months before the clinical onset of rheumatic heart disease;
- (3) experiencing crowded living or working conditions at least three months before the clinical onset of rheumatic heart disease;
- (4) having acute rheumatic fever before the clinical worsening of rheumatic heart disease;
- (5) having a group A beta-haemolytic streptococcal infection of the skin or the pharynx before the clinical worsening of rheumatic heart disease;

- (6) experiencing crowded living or working conditions within the ten years before the clinical worsening of rheumatic heart disease;
- (7) being pregnant within the 30 days before the clinical worsening of rheumatic heart disease;
- (8) inability to obtain appropriate clinical management for rheumatic heart disease.

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(4) to 9(8) apply only to material contribution to, or aggravation of, rheumatic heart disease where the person's rheumatic heart disease 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:

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.

rheumatic heart disease—see subsection 7(2).

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*.