

Statement of Principles

concerning

PLEURAL PLAQUE
(Reasonable Hypothesis)

(No. 105 of 2022)

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

Dated 21 October 2022

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| The Common Seal of theRepatriation Medical Authoritywas affixed to this instrumentat the direction of: |
| Professor Terence Campbell AMChairperson |

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 4

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 *pleural plaque* *(Reasonable Hypothesis)* (No. 105 of 2022).

1. Commencement

 This instrument commences on 21 November 2022.

1. Authority

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

1. Repeal

The Statement of Principles concerning pleural plaque No. 45 of 2014 (Federal Register of Legislation No. F2014L00474) made under subsection 196B(2) of the VEA is repealed.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 pleural plaque and death from pleural plaque.

Meaning of **pleural plaque**

* 1. For the purposes of this Statement of Principles, pleural plaque means a circumscribed area of thickening of the pleura related to the inhalation of mineral fibres.

Note 1: Pleural plaque contains dense hyalinised collagen fibres and may be observed as an elevated flat or nodular lesion that may contain calcification.

Note 2: Pleural plaque is often bilateral and typically affects the parietal pleura, although pleural plaque may rarely occur on the visceral pleura.

Death from **pleural plaque**

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

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 pleural plaque and death from pleural plaque 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 pleural plaque or death from pleural plaque with the circumstances of a person's relevant service:

* 1. inhaling respirable asbestos fibres:
		1. at the time material containing asbestos was being applied, removed, cut, drilled, dislodged or disturbed; and
		2. where the first inhalation of asbestos fibres commenced at least 5 years before the clinical onset of pleural plaque;

Note: Disturbance of debris or dust contaminated with asbestos fibres already present in an enclosed space may result in exposure to respirable asbestos fibres.

* 1. inhaling respirable refractory ceramic fibres in an enclosed space at the time refractory ceramic fibres were being manufactured or processed; and
		1. for a cumulative period of at least 2,000 hours before the clinical onset of pleural plaque; and
		2. where the first inhalation of refractory ceramic fibres commenced at least 5 years before the clinical onset of pleural plaque;

Note: ***refractory ceramic fibres*** is defined in the Schedule 1 - Dictionary.

* 1. inhaling erionite fibres on more days than not for at least 5 years before the clinical onset of pleural plaque, where the first inhalation of erionite fibres occurred at least 10 years before the clinical onset of pleural plaque;

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

* 1. inability to obtain appropriate clinical management for pleural plaque.
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 factor set out in subsection 9(4) applies only to material contribution to, or aggravation of, pleural plaque where the person's pleural plaque 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:
		1. ***erionite*** means a naturally occurring fibrous mineral that belongs to a group of minerals called zeolites.
		2. ***MRCA*** means the *Military Rehabilitation and Compensation Act 2004*.
		3. ***pleural plaque***—see subsection 7(2).
		4. ***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.

* + 1. ***refractory ceramic fibres*** means man-made, amorphous fibres that belong to a class of materials termed synthetic vitreous fibres and which are used in high performance thermal insulation applications. Refractory ceramic fibres are also referred to as aluminium silicate fibres.
		2. ***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.
		3. ***VEA*** means the *Veterans' Entitlements Act 1986*.