

Amendment Statement of Principles concerning HYPOPITUITARISM (Reasonable Hypothesis) (No. 53 of 2022)

The Repatriation Medical Authority determines the following Amendment Statement of Principles under subsections 196B(2) and (8) of the *Veterans' Entitlements Act 1986*.

Dated 29 April 2022

The Common Seal of the Repatriation Medical Authority was affixed to this instrument at the direction of:

Professor Terence Campbell AM Chairperson

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1 Name

This is the Amendment Statement of Principles concerning *hypopituitarism* (*Reasonable Hypothesis*) (No. 53 of 2022).

2 Commencement

This instrument commences on 30 May 2022.

3 Authority

This instrument is made under subsections 196B(2) and (8) of the Veterans' Entitlements Act 1986.

4 Amendment

The Statement of Principles concerning *hypopituitarism (Reasonable Hypothesis)* (No. 11 of 2019) (Federal Register of Legislation No. F2019L00009) is amended in the following manner:

Section	Amendment
9(16)	<i>Replace the existing factor in subsection 9(16) with the following:</i>
	taking an immune checkpoint inhibitor or an interferon within the one year before the clinical onset of hypopituitarism;
	Note: <i>immune checkpoint inhibitor</i> is defined in the Schedule 1 - Dictionary.
9(34)	<i>Replace the existing factor in subsection 9(34) with the following:</i>
	taking an immune checkpoint inhibitor or an interferon within the one year before the clinical worsening of hypopituitarism;
	Note: <i>immune checkpoint inhibitor</i> is defined in the Schedule 1 - Dictionary.
Schedule 1 – Dictionary	<i>Replace the existing definition of "immune checkpoint inhibitor" with the following:</i>
	<i>immune checkpoint inhibitor</i> means a form of cancer immunotherapy that uses monoclonal antibodies targeting the immune checkpoint proteins. Examples include ipilimumab, tremelimumab, nivolumab and pembrolizumab.