



Australian Government
Repatriation Medical Authority

Statement of Principles
concerning
COLORECTAL ADENOMA
(Balance of Probabilities)
(No. 16 of 2022)

The Repatriation Medical Authority determines the following Statement of Principles under subsection 196B(3) of the *Veterans' Entitlements Act 1986*.

Dated 24 December 2021

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

Professor Terence Campbell AM
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	6
Schedule 1 - Dictionary		7
1	Definitions	7

1 Name

This is the Statement of Principles concerning *colorectal adenoma (Balance of Probabilities)* (No. 16 of 2022).

2 Commencement

This instrument commences on 31 January 2022.

3 Authority

This instrument is made under subsection 196B(3) of the *Veterans' Entitlements Act 1986*.

4 Repeal

The Statement of Principles concerning colorectal adenoma No. 36 of 2013 (Federal Register of Legislation No. F2013L01141) made under subsection 196B(3) of the VEA is repealed.

5 Application

This instrument applies to a claim to which section 120B of the VEA or section 339 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 colorectal adenoma and death from colorectal adenoma.

Meaning of colorectal adenoma

- (2) For the purposes of this Statement of Principles, colorectal adenoma:
- (a) means a benign neoplasm arising from the epithelial cells of the colorectum; and
 - (b) includes:
 - (i) adenomatous polyp;
 - (ii) sessile serrated adenoma; and
 - (iii) traditional serrated adenoma; and
 - (c) excludes:
 - (i) benign neoplasms of the anus and anal canal;
 - (ii) familial adenomatous polyposis;

- (iii) non-neoplastic polyps of the colon;
 - (iv) non-epithelial neoplasms of the colon; and
 - (v) non-polypoid dysplasia.
- (3) While colorectal adenoma attracts ICD-10-AM code D12.0, D12.1, D12.2, D12.3, D12.4, D12.5, D12.7 or D12.8, in applying this Statement of Principles the meaning of colorectal adenoma 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 colorectal adenoma

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

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

8 Basis for determining the factors

On the sound medical-scientific evidence available, the Repatriation Medical Authority is of the view that it is more probable than not that colorectal adenoma and death from colorectal adenoma can be related to relevant service rendered by veterans 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 exist before it can be said that, on the balance of probabilities, colorectal adenoma or death from colorectal adenoma is connected with the circumstances of a person's relevant service:

- (1) having smoked tobacco products:
- (a) in an amount of at least 20 pack-years before the clinical onset of colorectal adenoma; and
 - (b) commencing at least 5 years before the clinical onset of colorectal adenoma; and

if smoking has ceased before the clinical onset of colorectal adenoma, then that onset occurred within 15 years of cessation;

Note: *one pack-year* is defined in the Schedule 1 - Dictionary.

- (2) consuming at least 500 kilograms of alcohol before the clinical onset of colorectal adenoma;

Note: Alcohol consumption is calculated utilising the Australian Standard of 10 grams of alcohol per standard alcoholic drink.

- (3) being obese for at least 10 years within the 30 years before the clinical onset of colorectal adenoma;

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

- (4) having diabetes mellitus for at least 5 years before the clinical onset of colorectal adenoma;

- (5) inability to consume an average of at least 20 grams per day of fibre in food, for at least 5 consecutive years within the 10 years before the clinical onset of colorectal adenoma;

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

- (6) for adenoma of the colon only:

- (a) inability to undertake any physical activity greater than 3 METs for at least 10 consecutive years within the 30 years before the clinical onset of adenoma of the colon;

Note: *adenoma of the colon* and *MET* are defined in the Schedule 1 - Dictionary.

- (b) consuming an average of at least 100 grams per day of red meat, for at least 5 years within the 10 years before the clinical onset of adenoma of the colon;

Note: *adenoma of the colon* and *red meat* are defined in the Schedule 1 - Dictionary.

- (c) consuming an average of at least 25 grams per day of processed meat product, for at least 5 years within the 10 years before the clinical onset of adenoma of the colon;

Note: *adenoma of the colon* and *processed meat product* are defined in the Schedule 1 - Dictionary.

- (7) inability to obtain appropriate clinical management for colorectal adenoma.

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 factor set out in subsection 9(7) applies only to material contribution to, or aggravation of, colorectal adenoma where the person's colorectal adenoma 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(3) 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:

adenoma of the colon means a benign epithelial neoplasm of the colon. Anatomically the colon is defined as extending from the caecum, including the ileocaecal junction and the vermiform appendix, to the sigmoid colon, not including the rectosigmoid junction.

being obese means:

- (a) having a Body Mass Index (BMI) of 30 or greater; or
- (b) for males, having a waist circumference exceeding 102 centimetres; or
- (c) for females, having a waist circumference exceeding 88 centimetres.

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

BMI means W/H^2 where:

- (a) W is the person's weight in kilograms; and
- (b) H is the person's height in metres.

colorectal adenoma—see subsection 7(2).

fibre in food means complex carbohydrates of plant origin consumed as vegetables, fruits or cereals which resist digestion by gastrointestinal enzymes in the gastrointestinal tract, and include plant cell walls and non-starch polysaccharides from sources other than cell walls, including cellulose and pectins.

MET means a unit of measurement of the level of physical exertion. 1 MET = 3.5 ml of oxygen/kg of body weight per minute, or 1.0 kcal/kg of body weight per hour, or resting metabolic rate.

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

one pack-year means the amount of tobacco consumed in smoking 20 cigarettes per day for a period of 1 year, or an equivalent amount of tobacco products.

Note 1: An equivalent amount of tobacco products is 7,300 grams of smoking tobacco by weight, either in cigarettes, pipe tobacco or cigars, or a combination of same. For pipe tobacco, cigars or combinations of multiple tobacco types, 1 gram of tobacco is considered to be equal to one cigarette.

Note 2: Pack-years are calculated by dividing the number of cigarettes smoked per day by 20 and multiplying this number by the number of years the person has smoked. For example, smoking 10 cigarettes per day for 10 years is equal to 5 pack-years, and smoking 40 cigarettes per day for 10 years is equal to 20 pack-years.

processed meat product means preserved or cured meats, including ham, frankfurters, salami and bacon.

red meat means all types of mammalian meat, including beef, veal, pork, lamb, mutton, horse and goat.

relevant service means:

- (a) eligible war service (other than operational service) under the VEA;
- (b) defence service (other than hazardous service and British nuclear test defence service) under the VEA; or
- (c) peacetime service under the MRCA.

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

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*.