

Statement of Principles

concerning

MALIGNANT NEOPLASM OF THE STOMACH
 (Balance of Probabilities)

(No. 75 of 2023)

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

Dated 23 June 2023.

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

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1. Name

This is the Statement of Principles concerning *malignant neoplasm of the stomach* *(Balance of Probabilities)* (No. 75 of 2023).

1. Commencement

 This instrument commences on 25 July 2023.

1. Authority

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

1. Repeal

The Statement of Principles concerning malignant neoplasm of the stomach No. 59 of 2014 (Federal Register of Legislation No. F2014L00938) made under subsections 196B(3) and (8) of the VEA is repealed.

1. 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.

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 malignant neoplasm of the stomach and death from malignant neoplasm of the stomach.

Meaning of **malignant neoplasm of the stomach**

* 1. For the purposes of this Statement of Principles, malignant neoplasm of the stomach:
		1. means a primary malignant neoplasm arising from the epithelial cells of the stomach; and
		2. excludes:
			1. stomach neuroendocrine tumours;
			2. gastroblastoma;
			3. haematolymphoid tumours including non-Hodgkin lymphoma, MALT lymphoma and Hodgkin lymphoma;
			4. malignant melanoma; and
			5. mesenchymal tumours including soft tissue sarcoma.

Note: The stomach extends from the lower border of the oesophageal sphincter, up to and including the pyloric sphincter.

* 1. While malignant neoplasm of the stomach attracts ICD‑10‑AM code C16, in applying this Statement of Principles the meaning of malignant neoplasm of the stomach is that given in subsection (2).
	2. 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 **malignant neoplasm of the stomach**

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

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

1. 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 malignant neoplasm of the stomach and death from malignant neoplasm of the stomach 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.

1. Factors that must exist

At least one of the following factors must exist before it can be said that, on the balance of probabilities, malignant neoplasm of the stomach or death from malignant neoplasm of the stomach is connected with the circumstances of a person's relevant service:

* 1. having smoked tobacco products:
		1. in an amount of at least 25 pack-years before the clinical onset of malignant neoplasm of the stomach; and
		2. commencing at least 10 years before the clinical onset of malignant neoplasm of the stomach; and

if smoking has ceased before the clinical onset of malignant neoplasm of the stomach, then that onset occurred within 15 years of cessation;

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

* 1. having received a cumulative equivalent dose of at least 0.5 sievert of ionising radiation to the stomach at least 10 years before the clinical onset of malignant neoplasm of the stomach;

Note: ***cumulative equivalent dose*** is defined in the Schedule 1 – Dictionary.

* 1. having infection with *Helicobacter pylori* at least 10 years before the clinical onset of malignant neoplasm of the stomach;
	2. having chronic atrophic gastritis, where the chronic atrophic gastritis commenced at least 5 years before the clinical onset of malignant neoplasm of the stomach;

Note: ***chronic atrophic gastritis*** is defined in the Schedule 1 – Dictionary.

* 1. having undergone a partial gastrectomy at least 10 years before the clinical onset of malignant neoplasm of the stomach;
	2. for cardia stomach carcinoma only, being obese for at least the 5 years before the clinical onset of malignant neoplasm of the stomach;

Note: ***cardia stomach carcinoma*** and ***being obese*** are defined in the Schedule 1 – Dictionary.

* 1. having a gastric ulcer at least 10 years before the clinical onset of malignant neoplasm of the stomach;
	2. having an autoimmune disease from the specified list of autoimmune diseases at the time of the clinical onset of malignant neoplasm of the stomach;

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

* 1. for non-cardia stomach carcinoma only, taking a proton pump inhibitor drug for at least a continuous period of 2 year within the 5 years before the clinical onset of malignant neoplasm of the stomach, and where the last dose of the drug was taken at least 1 year before the clinical onset of malignant neoplasm of the stomach;

Note: ***non-cardia stomach carcinoma*** is defined in the Schedule 1 – Dictionary.

* 1. inability to obtain appropriate clinical management for malignant neoplasm of the stomach before the clinical worsening of malignant neoplasm of the stomach.
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(10) applies only to material contribution to, or aggravation of, malignant neoplasm of the stomach where the person's malignant neoplasm of the stomach 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(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
	1. In this instrument:
		1. **being obese** means having a Body Mass Index (BMI) of 30 or greater.

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

* + 1. ***BMI*** means W/H2 where:
		2. (a) W is the person’s weight in kilograms; and
		3. (b) H is the person’s height in metres.
		4. ***cardia stomach carcinoma*** means a carcinoma that has arisen in the part of the stomach immediately adjacent to and surrounding the opening of the oesophagus (the cardia of the stomach) that is distinguished histologically by the presence of cardiac glands and the absence of parietal (acid secreting) and chief (pepsin secreting) cells.
		5. ***chronic atrophic gastritis*** means inflammation of the stomach mucosa characterised by variable gland loss and inflammatory infiltrate extending below the lamina propria with distortion and destruction of the stomach glands.
		6. ***cumulative equivalent dose*** means the total dose of ionising radiation received by the particular organ or tissue from external exposure, internal exposure or both, apart from normal background radiation exposure in Australia, calculated in accordance with the methodology set out in Guide to calculation of 'cumulative equivalent dose' for the purpose of applying ionising radiation factors contained in Statements of Principles determined under Part XIA of the *Veterans' Entitlements Act 1986 (Cth)*, Australian Radiation Protection and Nuclear Safety Agency, as in force on 2 August 2017.

Note 1: Examples of circumstances that might lead to exposure to ionising radiation include being present during or subsequent to the testing or use of nuclear weapons, undergoing diagnostic or therapeutic medical procedures involving ionising radiation, and being a member of an aircrew, leading to increased levels of exposure to cosmic radiation.

Note 2: For the purpose of dose reconstruction, dose is calculated as an average over the mass of a specific tissue or organ. If a tissue is exposed to multiple sources of ionising radiation, the various dose estimates for each type of radiation must be combined.

* + 1. ***malignant neoplasm of the stomach***—see subsection 7(2).
		2. ***MRCA*** means the *Military Rehabilitation and Compensation Act 2004*.
		3. ***non-cardia stomach carcinoma*** means a carcinoma that has arisen in the mucosa of any part of the stomach, excluding that part of the stomach immediately adjacent to and surrounding the opening of the oesophagus (the cardia of the stomach) that is distinguished histologically by the presence of cardiac glands and the absence of parietal (acid secreting) and chief (pepsin secreting) cells.
		4. ***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.

* + 1. ***relevant service*** means:
			1. eligible war service (other than operational service) under the VEA;
			2. defence service (other than hazardous service and British nuclear test defence service) under the VEA; or
			3. peacetime service under the MRCA.

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

* + 1. ***specified list of autoimmune diseases*** means:
			1. dermatomyositis; or
			2. pernicious anaemia.
		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*.