Statement of Principles
concerning

STEATOHEPATITIS
No. 55 of 2005
for the purposes of the
Veterans’ Entitlements Act 1986
and
Military Rehabilitation and Compensation Act 2004

Title
1. This Instrument may be cited as Statement of Principles concerning steatohepatitis No. 55 of 2005.

Determination
2. This Statement of Principles is determined by the Repatriation Medical Authority under subsection 196B(2) of the Veterans’ Entitlements Act 1986 (the VEA).

Kind of injury, disease or death
3. (a) This Statement of Principles is about steatohepatitis and death from steatohepatitis.

(b) For the purposes of this Statement of Principles, “steatohepatitis” means fatty change of the liver together with lobular inflammation, ballooning degeneration, and when advanced, Mallory bodies and fibrosis. This definition includes alcoholic steatohepatitis and non alcoholic steatohepatitis (NASH), but excludes hepatitis associated with viruses, drugs (other than alcohol), Wilson’s disease, haemochromatosis, biliary obstruction or alpha-1 antitrypsin deficiency.
Basis for determining the factors

4. The Repatriation Medical Authority is of the view that there is sound medical-scientific evidence that indicates that steatohepatitis and death from steatohepatitis 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 Military Rehabilitation and Compensation Act 2004 (the MRCA).

Factors that must be related to service

5. Subject to clause 7, at least one of the factors set out in clause 6 must be related to the relevant service rendered by the person.

Factors

6. The factor that must as a minimum exist before it can be said that a reasonable hypothesis has been raised connecting steatohepatitis or death from steatohepatitis with the circumstances of a person’s relevant service is:

(a) being obese at the time of the clinical onset of steatohepatitis; or

(b) having diabetes mellitus at the time of the clinical onset of steatohepatitis; or

(c) having hypertriglyceridaemia at the time of the clinical onset of steatohepatitis; or

(d) receiving total parenteral nutrition for at least three months within the one year before the clinical onset of steatohepatitis; or

(e) for men, consuming at least 150 kilograms of alcohol within any ten year period before the clinical onset of steatohepatitis; or

(f) for women, consuming at least seventy-five kilograms of alcohol within any ten year period before the clinical onset of steatohepatitis; or

(g) undergoing jejunoileal bypass surgery before the clinical onset of steatohepatitis; or

(h) experiencing rapid weight loss within the one year before the clinical onset of steatohepatitis; or

(i) inability to obtain appropriate clinical management for steatohepatitis.
Factors that apply only to material contribution or aggravation

7. Paragraph 6(i) applies only to material contribution to, or aggravation of, steatohepatitis where the person’s steatohepatitis was suffered or contracted before or during (but not arising out of) the person’s relevant service.

Inclusion of Statements of Principles

8. In this Statement of Principles if a relevant factor applies and that factor includes an injury or disease in respect of which there is a Statement of Principles then the factors in that last mentioned Statement of Principles apply in accordance with the terms of that Statement of Principles as in force from time to time.

Other definitions

9. For the purposes of this Statement of Principles:

“alcohol” is measured by the alcohol consumption calculations utilising the Australian Standard of ten grams of alcohol per standard alcoholic drink;

“being obese” means an increase in body weight by way of fat accumulation which results in a Body Mass Index (BMI) of thirty or greater. The BMI = \( \frac{W}{H^2} \) and where:
W is the person’s weight in kilograms and
H is the person’s height in metres;

“death from steatohepatitis” in relation to a person includes death from a terminal event or condition that was contributed to by the person’s steatohepatitis;

“hypertriglyceridaemia” means a persistently elevated serum triglyceride level, evaluated following a twelve hour overnight fast, and estimated on a minimum of two occasions to be 2.0 mmol/L or greater;

“rapid weight loss” means reduction of body mass by at least twenty percent, within a continuous period of no more than three months;
“relevant service” means:
(a) operational service under the VEA;
(b) peacekeeping service under the VEA;
(c) hazardous service under the VEA;
(d) warlike service under the MRCA; or
(e) non-warlike service under the MRCA;

“terminal event” means the proximate or ultimate cause of death and includes:
(a) pneumonia;
(b) respiratory failure;
(c) cardiac arrest;
(d) circulatory failure; or
(e) cessation of brain function;

“total parenteral nutrition” means delivery of nutriments solely by the intravenous route.

Date of effect

10. This Instrument takes effect from 28 December 2005.

Dated this fifteenth day of December 2005

The Common Seal of the Repatriation Medical Authority was affixed to this instrument in the presence of:

KEN DONALD
CHAIRPERSON