



# **Statement of Principles concerning malignant neoplasm of the bladder No. 96 of 2011**

made under subsection 196B(2) of the

*Veterans' Entitlements Act 1986*

## **Compilation No. 1**

**Compilation date:** 18 September 2017

**Includes amendments up to:** Veterans' Entitlements (Statements of Principles—Cumulative Equivalent Dose) Amendment Determination 2017 (No. 58 of 2017) (F2017L01067)

The day of commencement of this Amendment Determination is 18 September 2017.

Prepared by the Repatriation Medical Authority Secretariat, Brisbane

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## About this compilation

### **This compilation**

This is a compilation of the *Statement of Principles concerning malignant neoplasm of the bladder No. 96 of 2011* that shows the text of the law as amended and in force 18 September 2017.

The notes at the end of this compilation (the *endnotes*) include information about amending laws and the amendment history of provisions of the compiled law.

### **Uncommenced amendments**

The effect of uncommenced amendments is not shown in the text of the compiled law. Any uncommenced amendments affecting the law are accessible on the Legislation Register ([www.legislation.gov.au](http://www.legislation.gov.au)). The details of amendments made up to, but not commenced at, the compilation date are underlined in the endnotes. For more information on any uncommenced amendments, see the series page on the Legislation Register for the compiled law.

### **Application, saving and transitional provisions for provisions and amendments**

If the operation of a provision or amendment of the compiled law is affected by an application, saving or transitional provision that is not included in this compilation, details are included in the endnotes.

### **Modifications**

If the compiled law is modified by another law, the compiled law operates as modified but the modification does not amend the text of the law. Accordingly, this compilation does not show the text of the compiled law as modified. For more information on any modifications, see the series page on the Legislation Register for the compiled law.

### **Self-repealing provisions**

If a provision of the compiled law has been repealed in accordance with a provision of the law, details are included in the endnotes.



Australian Government  
Repatriation Medical Authority

Statement of Principles  
concerning

**MALIGNANT NEOPLASM OF THE  
BLADDER**

**No. 96 of 2011**

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 malignant neoplasm of the bladder No. 96 of 2011.

**Determination**

2. The Repatriation Medical Authority under subsection **196B(2)** and **(8)** of the *Veterans' Entitlements Act 1986* (the VEA):
  - (a) revokes Instrument No. 95 of 2007 concerning malignant neoplasm of the bladder; and
  - (b) determines in its place this Statement of Principles.

**Kind of injury, disease or death**

3. (a) This Statement of Principles is about **malignant neoplasm of the bladder and death from malignant neoplasm of the bladder.**

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*Statement of Principles concerning Malignant Neoplasm Of The Bladder*  
*No. 96 of 2011*  
*Veterans' Entitlements Act 1986*

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- (b) For the purposes of this Statement of Principles, "**malignant neoplasm of the bladder**" means a primary malignancy arising from epithelial tissues of the urinary bladder, including malignant neoplasm of the ureteric orifice of the bladder. This definition includes transitional cell carcinomas of urothelial origin and carcinoma-in situ, but excludes soft tissue sarcoma, non-Hodgkin's lymphoma and Hodgkin's lymphoma.
  - (c) Malignant neoplasm of the bladder attracts ICD-10-AM code C67 or D09.0.
  - (d) In the application of this Statement of Principles, the definition of "**malignant neoplasm of the bladder**" is that given at paragraph 3(b) above.

#### **Basis for determining the factors**

- 4. The Repatriation Medical Authority is of the view that there is sound medical-scientific evidence that indicates that **malignant neoplasm of the bladder** and **death from malignant neoplasm of the bladder** 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 **malignant neoplasm of the bladder** or **death from malignant neoplasm of the bladder** with the circumstances of a person's relevant service is:
  - (a) smoking at least 2.5 pack-years of cigarettes, or the equivalent thereof in other tobacco products, before the clinical onset of malignant neoplasm of the bladder, where smoking commenced at least ten years before the clinical onset of malignant neoplasm of the bladder; or
  - (b) having received a cumulative equivalent dose of at least 0.1 sievert of ionising radiation to the bladder at least five years before the clinical onset of malignant neoplasm of the bladder; or

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- (c) inhaling fumes containing high concentrations of polycyclic aromatic hydrocarbons, or ingesting polycyclic aromatic hydrocarbons, in the specified circumstances for a cumulative period of at least 5000 hours before the clinical onset of malignant neoplasm of the bladder, where the first exposure occurred at least ten years before the clinical onset of malignant neoplasm of the bladder; or
  - (d) being heavily exposed to diesel engine exhaust for a cumulative period of at least 15 000 hours, at least ten years before the clinical onset of malignant neoplasm of the bladder; or
  - (e) inhaling fumes containing a high concentration of an aromatic amine from the specified list, or ingesting or having cutaneous contact with an aromatic amine from the specified list, excluding exposure to cigarette smoking and hair dyes, for a cumulative period of at least 250 days within a continuous period of five years before the clinical onset of malignant neoplasm of the bladder, where the first exposure occurred at least ten years before the clinical onset of malignant neoplasm of the bladder; or
  - (f) inhaling fumes containing a high concentration of an aromatic amine while working in the rubber manufacturing industry, magenta production, or auramine production industries for a cumulative period of at least 5000 hours before the clinical onset of malignant neoplasm of the bladder, where the first exposure occurred at least ten years before the clinical onset of malignant neoplasm of the bladder; or
  - (g) working as a hairdresser or barber for a cumulative period of at least 10 000 hours before the clinical onset of malignant neoplasm of the bladder, where the first exposure occurred at least ten years before the clinical onset of malignant neoplasm of the bladder; or
  - (h) working as a painter for a cumulative period of at least 5000 hours before the clinical onset of malignant neoplasm of the bladder, where the first exposure occurred at least ten years before the clinical onset of malignant neoplasm of the bladder; or
  - (i) inhaling, ingesting or having cutaneous contact with tetrachloroethylene for a cumulative period of at least 5000 hours before the clinical onset of malignant neoplasm of the bladder, where the first exposure occurred at least ten years before the clinical onset of malignant neoplasm of the bladder; or

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- (j) being exposed to arsenic as specified before the clinical onset of malignant neoplasm of the of the bladder, where the first exposure to arsenic occurred at least ten years before the clinical onset of malignant neoplasm of the bladder; or
  - (k) ingesting aristolochic acid as specified at least five years before the clinical onset of malignant neoplasm of the bladder; or
  - (l) having renal stone disease or a bladder stone at least five years before the clinical onset of malignant neoplasm of the bladder; or
  - (m) having a chronic renal condition, of sufficient severity to require dialysis or renal transplanation, at least one year before the clinical onset of malignant neoplasm of the bladder; or
  - (n) consuming a total of at least 100 grams of phenacetin at least five years before the clinical onset of malignant neoplasm of the bladder; or
  - (o) being treated with systemic cyclophosphamide or systemic ifosfamide, at least five years before the clinical onset of malignant neoplasm of the bladder; or
  - (p) being treated with chlornaphazine at least five years before the clinical onset of malignant neoplasm of the bladder; or
  - (q) being treated with pioglitazone, or a medication containing pioglitazone, for a continuous period of at least one year, within the ten years before the clinical onset of malignant neoplasm of the bladder; or
  - (r) having diabetes mellitus for at least five years before the clinical onset of malignant neoplasm of the bladder; or
  - (s) having an infection of the bladder with *Schistosoma haematobium* before the clinical onset of malignant neoplasm of the bladder; or
  - (t) having an indwelling bladder catheter or other foreign body in the bladder for a continuous period of at least ten years, excepting routine catheter changes, before the clinical onset of malignant neoplasm of the bladder; or

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- (u) having neurogenic bladder dysfunction, or spinal cord injury (paraplegia or quadriplegia) within the one year before the clinical onset of malignant neoplasm of the bladder; or
  - (v) undergoing transurethral resection for treatment of benign prostatic hyperplasia at least five years before the clinical onset of malignant neoplasm of the bladder; or
  - (w) inability to obtain appropriate clinical management for malignant neoplasm of the bladder.

#### **Factors that apply only to material contribution or aggravation**

- 7. Paragraph 6(w) applies only to material contribution to, or aggravation of, malignant neoplasm of the bladder where the person's malignant neoplasm of the bladder 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:

**"an aromatic amine from the specified list"** means:

- (a) 2-naphthylamine;
- (b) 4-aminobiphenyl;
- (c) 4-chloro-ortho-toluidine;
- (d) benzidine;
- (e) benzidine-based dyes; or
- (f) *ortho*-toluidine;

**"an enclosed space"** means a substantially enclosed area, for example the interior of a building, ship or aircraft, a covered workshop or factory;

**"being exposed to arsenic as specified"** means:

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- (a) consuming drinking water with an average arsenic concentration of at least 50 micrograms per litre for a cumulative period of at least ten years;
  - (b) consuming drinking water resulting in a cumulative total arsenic exposure equivalent to having consumed drinking water containing at least 50 micrograms per litre for at least ten years; or
  - (c) having clinical evidence of chronic arsenic toxicity;

**"being heavily exposed to diesel engine exhaust"** means:

- (a) being an occupant in an enclosed diesel-powered vehicle cabin contaminated with diesel fumes;
- (b) working in an enclosed space where diesel-powered engines or motors are being operated; or
- (c) repairing and/or servicing diesel engines;

**"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.

**"death from malignant neoplasm of the bladder"** 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 bladder;

**"ICD-10-AM code"** means a number assigned to a particular kind of injury or disease in The International Statistical Classification of Diseases and Related Health Problems, 10th Revision, Australian Modification (ICD-10-AM), Seventh Edition, effective date of 1 July 2010, copyrighted by the National Centre for Classification in Health, Sydney, NSW, and having ISBN 978 1 74210 154 5;



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**"in the specified circumstances"** means:

- (a) while working with creosote;
- (b) while working with coal-tar pitch, coal-tar or asphalt;
- (c) while working in the coal gasification, fuel coke production, carbon electrode manufacturing or the coal-tar distillation industries;
- (d) while being exposed to coke oven emissions;
- (e) while being exposed to soot during chimney sweeping;
- (f) while working in the aluminium production industry; or
- (g) while working in iron or steel foundries;

**"ingesting aristolochic acid as specified"** means:

- (a) consuming a total of at least 100 grams of plant material of the genus *Aristolochia* as a constituent of herbal medication; or
- (b) consuming plant material of the genus *Aristolochia* or foods containing plant material of the genus *Aristolochia*, as part of the regular diet for a period of at least 15 months;

**"neurogenic bladder dysfunction"** means impairment of normal bladder functioning due to disease or injury of the central nervous system or peripheral nerves involved in the control of micturition, leading to an inability to pass urine;

**"pack-years of cigarettes, or the equivalent thereof in other tobacco products"** means a calculation of consumption where one pack-year of cigarettes equals twenty tailor-made cigarettes per day for a period of one calendar year, or 7300 cigarettes. One tailor-made cigarette approximates one gram of tobacco or one gram of cigar or pipe tobacco by weight. One pack-year of tailor-made cigarettes equates to 7300 cigarettes, or 7.3 kilograms of smoking tobacco by weight. Tobacco products means either cigarettes, pipe tobacco or cigars smoked, alone or in any combination;

**"phenacetin"** means an aniline derivative that has analgesic and antipyretic properties, that was formerly used as a constituent of several over-the-counter compound analgesic medications, including Bex or Vincent's powder, Empirin Compound and Bromo seltzer. Phenacetin is also known as acetophenetidin, aceto-p-phenetidine, acetylphenetidin, phenacetinum, N-(4-ethoxyphenyl)acetamide, p-ethoxyacetanilide, or CAS 62-44-2;

**"polycyclic aromatic hydrocarbons"** means hydrocarbons with three or more condensed aromatic rings in which certain carbon atoms are common to two or three rings. Polycyclic aromatic hydrocarbons occur in crude oil, shale oil and coal tars, and can be formed during the combustion of organic material

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or during high temperature processing of crude oil, coal, coke or other industrial carbon compounds;

**"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;

**"working as a hairdresser or barber"** means the cutting and styling of hair, including the application of hair colourants and other chemicals;

**"working as a painter"** means applying paints, including solvent- or water-based conventional paints, spray paints, varnishes, enamels, lacquers, water-emulsion and solution finishes, nonaqueous dispersions or organosols, plastisols, and powder coatings, during the course of activities such as building, maintenance and construction, interior and exterior decoration, artistic painting, and wood and metal painting. This definition includes mixed activities in which application of paints occurs with other tasks such as wallpapering and plastering. This definition includes activities that are preparatory to painting, such as mixing paints, maintaining painting equipment, and background preparation of surfaces for application of paint.

### **Application**

10. This Instrument applies to all matters to which section 120A of the VEA or section 338 of the MRCA applies.

### **Date of effect**

11. This Instrument takes effect from 31 August 2011.

## Endnotes

### Endnote 1—About the endnotes

The endnotes provide information about this compilation and the compiled law.

The following endnotes are included in every compilation:

Endnote 1—About the endnotes

Endnote 2—Abbreviation key

Endnote 3—Legislation history

Endnote 4—Amendment history

### Abbreviation key—Endnote 2

The abbreviation key sets out abbreviations that may be used in the endnotes.

### Legislation history and amendment history—Endnotes 3 and 4

Amending laws are annotated in the legislation history and amendment history.

The legislation history in endnote 3 provides information about each law that has amended (or will amend) the compiled law. The information includes commencement details for amending laws and details of any application, saving or transitional provisions that are not included in this compilation.

The amendment history in endnote 4 provides information about amendments at the provision (generally section or equivalent) level. It also includes information about any provision of the compiled law that has been repealed in accordance with a provision of the law.

### Misdescribed amendments

A misdescribed amendment is an amendment that does not accurately describe the amendment to be made. If, despite the misdescription, the amendment can be given effect as intended, the amendment is incorporated into the compiled law and the abbreviation “(md)” added to the details of the amendment included in the amendment history.

If a misdescribed amendment cannot be given effect as intended, the abbreviation “(md not incorp)” is added to the details of the amendment included in the amendment history.

**Endnote 2—Abbreviation key**

ad = added or inserted	o = order(s)
am = amended	Ord = Ordinance
amdt = amendment	orig = original
c = clause(s)	par = paragraph(s)/subparagraph(s) /sub-subparagraph(s)
C[x] = Compilation No. x	pres = present
Ch = Chapter(s)	prev = previous
def = definition(s)	(prev...) = previously
Dict = Dictionary	Pt = Part(s)
disallowed = disallowed by Parliament	r = regulation(s)/rule(s)
Div = Division(s)	
exp = expires/expired or ceases/ceased to have effect	reloc = relocated
F = Federal Register of Legislation	renum = renumbered
gaz = gazette	rep = repealed
LA = <i>Legislation Act 2003</i>	rs = repealed and substituted
LIA = <i>Legislative Instruments Act 2003</i>	s = section(s)/subsection(s)
(md) = misdescribed amendment can be given effect	Sch = Schedule(s)
(md not incorp) = misdescribed amendment cannot be given effect	Sdiv = Subdivision(s)
mod = modified/modification	SLI = Select Legislative Instrument
No. = Number(s)	SR = Statutory Rules
	Sub-Ch = Sub-Chapter(s)
	SubPt = Subpart(s)
	<u>underlining</u> = whole or part not commenced or to be commenced

**Endnote 3—Legislation history**

<b>Name</b>	<b>Registration</b>	<b>Commencement</b>	<b>Application, saving and transitional provisions</b>
<i>Statement of Principles concerning malignant neoplasm of the bladder No. 96 of 2011</i>	25 August 2011 F2011L01728	31 August 2011	
<i>Veterans' Entitlements (Statements of Principles—Cumulative Equivalent Dose) Amendment Determination 2017 (No. 58 of 2017)</i>	22 August 2017 F2017L01067	18 September 2017	

**Endnote 4—Amendment history**

<b>Provision affected</b>	<b>How affected</b>
Clause 9 – ' "cumulative equivalent dose".....'	rs. Instrument No. 58 of 2017