Statement of Principles concerning malignant neoplasm of the colorectum No. 37 of 2013

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
About this compilation

This compilation

This is a compilation of the Statement of Principles concerning malignant neoplasm of the colorectum No. 37 of 2013 that shows the text of the law as amended and in force on 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). 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If a provision of the compiled law has been repealed in accordance with a provision of the law, details are included in the endnotes.
Statement of Principles
concerning
MALIGNANT NEOPLASM OF THE
COLORECTUM
No. 37 of 2013
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 colorectum No. 37 of 2013.

Determination
2. The Repatriation Medical Authority under subsection 196B(2) and (8) of the Veterans’ Entitlements Act 1986 (the VEA):
   (a) revokes Instrument No. 1 of 2004, as amended by Instrument No. 39 of 2011, concerning malignant neoplasm of the colorectum; and
   (b) determines in their place this Statement of Principles.

Kind of injury, disease or death
3. (a) This Statement of Principles is about malignant neoplasm of the colorectum and death from malignant neoplasm of the colorectum.
(b) For the purposes of this Statement of Principles, "malignant neoplasm of the colorectum" means a primary malignant neoplasm arising from the epithelial cells of the colorectum. Anatomically the colorectum is defined as extending from the caecum, including the ileocaecal junction, to the junction with the anal canal. This definition of malignant neoplasm of the colorectum excludes soft tissue sarcoma, carcinoid tumour, non-Hodgkin’s lymphoma and Hodgkin’s lymphoma.

(c) Malignant neoplasm of the colorectum attracts ICD-10-AM code C18, C19 or C20.

(d) In the application of this Statement of Principles, the definition of "malignant neoplasm of the colorectum" 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 colorectum and death from malignant neoplasm of the colorectum 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 colorectum or death from malignant neoplasm of the colorectum with the circumstances of a person’s relevant service is:

   (a) having a colorectal adenoma before the clinical onset of malignant neoplasm of the colorectum; or

   (b) smoking at least 15 pack-years of cigarettes, or the equivalent thereof in other tobacco products, before the clinical onset of malignant neoplasm of the colorectum, and

      (i) smoking commenced at least 15 years before the clinical onset of malignant neoplasm of the colorectum; and
(ii) where smoking has ceased, the clinical onset of malignant neoplasm of the colorectum has occurred within 30 years of cessation; or

(c) drinking at least 250 kilograms of alcohol before the clinical onset of malignant neoplasm of the colorectum; or

(d) consuming an average daily intake of at least 100 grams per day of red meat, for at least ten years within the 25 years before the clinical onset of malignant neoplasm of the colorectum; or

(e) consuming an average daily intake of at least 25 grams per day of processed meat product, for at least ten years within the 25 years before the clinical onset of malignant neoplasm of the colorectum; or

(f) having ulcerative colitis for at least five years before the clinical onset of malignant neoplasm of the colorectum; or

(g) having Crohn’s disease of the colorectum for at least five years before the clinical onset of malignant neoplasm of the colorectum; or

(h) having familial adenomatous polyposis before the clinical onset of malignant neoplasm of the colorectum; or

(i) having received a cumulative equivalent dose of at least 0.1 sievert of ionising radiation to the colorectum at least five years before the clinical onset of malignant neoplasm of the colorectum; or

(j) being obese for at least five years within the 30 years before the clinical onset of malignant neoplasm of the colorectum; or

(k) inhaling respirable asbestos fibres in an enclosed space:
(i) for a cumulative period of at least 1,000 hours before the clinical onset of malignant neoplasm of the colorectum; and
(ii) at the time material containing respirable asbestos fibres was being applied, removed, dislodged, cut or drilled; and
(iii) the first inhalation of asbestos fibres commenced at least five years before the clinical onset of malignant neoplasm of the colorectum; or

(l) inhaling respirable asbestos fibres in an open environment:
(i) for a cumulative period of at least 3,000 hours before the clinical onset of malignant neoplasm of the colorectum; and
(ii) at the time material containing respirable asbestos fibres was being applied, removed, dislodged, cut or drilled; and
(iii) the first inhalation of asbestos fibres commenced at least five years before the clinical onset of malignant neoplasm of the colorectum; or
(m) for malignant neoplasm of the colon only,

(i) an inability to undertake any physical activity greater than three METs for at least ten consecutive years within the 30 years before the clinical onset of malignant neoplasm of the colorectum; or

(ii) having acromegaly before the clinical onset of malignant neoplasm of the colorectum; or

(n) an inability to consume an average daily intake of 20 grams of fibre in food for a period of at least five consecutive years within the 25 years before the clinical onset of malignant neoplasm of the colorectum; or

(o) an inability to consume an average daily intake of 150 micrograms of folate in food for a period of at least five consecutive years, where this period commenced at least ten years before the clinical onset of malignant neoplasm of the colorectum; or

(p) an inability to consume an average daily intake of 100 millilitres of dairy milk for at least five consecutive years within the 25 years before the clinical onset of malignant neoplasm of the colorectum; or

(q) having diabetes mellitus for at least five years before the clinical onset of malignant neoplasm of the colorectum; or

(r) inability to obtain appropriate clinical management for malignant neoplasm of the colorectum.

Factors that apply only to material contribution or aggravation

7. Paragraph 6(r) applies only to material contribution to, or aggravation of, malignant neoplasm of the colorectum where the person’s malignant neoplasm of the colorectum 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 10 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 = W/H\(^2\) and where:
W is the person’s weight in kilograms; and
H is the person’s height in metres;

"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 colorectum" 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 colorectum;

"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;

"folate in food" means a B group vitamin found in natural foods, which consists of a family of monoglutamates or polyglutamates of pteroic acid that is used in DNA methylation, synthesis and repair;

"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), Eighth Edition, effective date of 1 July 2013, copyrighted by the Independent Hospital Pricing Authority, and having ISBN 978-1-74128-213-9;

"malignant neoplasm of the colon" means a primary malignant neoplasm arising from the epithelial cells of the colon. Anatomically the colon is
defined as extending from the caecum, including the ileo-caecal junction, to the sigmoid colon, not including the recto-sigmoid junction. This definition of malignant neoplasm of the colon excludes soft tissue sarcoma, carcinoid tumour, non-Hodgkin’s lymphoma and Hodgkin’s lymphoma;

"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;

"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 7.3 kilograms of smoking tobacco by weight. Tobacco products means either cigarettes, pipe tobacco or cigars, smoked alone or in any combination;

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

"red meat" means beef, veal, pork, lamb or mutton;

"relevant service" means:

(a) operational service under the VEA;
(b) peacekeeping service under the VEA;
(c) hazardous service under the VEA;
(d) British nuclear test defence service under the VEA;
(e) warlike service under the MRCA; or
(f) 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.

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 3 July 2013.
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.
Statement of Principles concerning Malignant Neoplasm Of The Colorectum

No. 37 of 2013

Veterans’ Entitlements Act 1986

Compilation No. 1

Compilation date: 18/09/2017

Authorised Version F2017C00777 registered 18/09/2017
### Endnote 3—Legislation history

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