Statement of Principles concerning narcolepsy
No. 7 of 2014
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 narcolepsy No. 7 of 2014 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If a provision of the compiled law has been repealed in accordance with a provision of the law, details are included in the endnotes.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
NARCOLEPSY
No. 7 of 2014
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 narcolepsy No. 7 of 2014.

Determination
2. The Repatriation Medical Authority under subsection 196B(2) and (8) of the Veterans’ Entitlements Act 1986 (the VEA):
   (a) revokes Instrument No. 57 of 2005 concerning narcolepsy; and
   (b) determines in its place this Statement of Principles.

Kind of injury, disease or death
3. (a) This Statement of Principles is about narcolepsy and death from narcolepsy.
   (b) For the purposes of this Statement of Principles, "narcolepsy" means a sleep disorder manifested by recurrent periods of an irrepressible need to sleep, lapsing into sleep, or napping occurring within the same
day. These periods of hypersomnia must occur at least three times per week over a three month period and at least one of the following criteria must be present:

A. episodes of cataplexy, defined as either (i) or (ii), occurring at least a few times per month:
   
   (i) in individuals with long-standing disease, brief (seconds to minutes) episodes of sudden bilateral loss of muscle tone with maintained consciousness that are precipitated by laughter or joking; or
   
   (ii) in children or in individuals within six months of onset, spontaneous grimaces or jaw-opening episodes with tongue thrusting or a global hypotonia, without any obvious emotional triggers;
   
B. hypocretin deficiency, as measured using cerebrospinal fluid (CSF) hypocretin-1 immunoreactivity values (less than or equal to one-third of values obtained in healthy subjects tested using the same assay, or less than or equal to 110 picograms per millilitre). Low CSF levels of hypocretin-1 must not be observed in the context of acute brain injury, inflammation or infection; or

C. nocturnal sleep polysomnography showing rapid eye movement (REM) sleep latency less than or equal to 15 minutes, or a multiple sleep latency test showing a mean sleep latency less than or equal to eight minutes and two or more sleep-onset REM periods.

This definition excludes narcolepsy due to another medical condition and sleepiness due to the direct physiological effects of a drug or medication.

(c) Narcolepsy attracts ICD-10-AM code G47.4.

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

(a) having a moderate to severe traumatic brain injury within the two years before the clinical onset of narcolepsy; or

(b) having concussion within the two years before the clinical onset of narcolepsy; or

(c) having a surgical procedure which involves a craniotomy within the two years before the clinical onset of narcolepsy; or

(d) having received a cumulative equivalent dose of at least ten sieverts of ionising radiation to the brain within the two years before the clinical onset of narcolepsy; or

(e) undergoing a course of therapeutic radiation for cancer, where the brain was in the field of radiation, within the two years before the clinical onset of narcolepsy; or

(f) having a specified neurological disorder with involvement in the region of the diencephalon or brainstem within the two years before the clinical onset of narcolepsy; or

(g) receiving Pandemrix™, an adjuvanted influenza H1N1 vaccine, before the age of 40 years, within the three years before the clinical onset of narcolepsy; or

(h) having a laboratory confirmed Streptococcus pyogenes infection within the three years before the clinical onset of narcolepsy; or

(i) inability to obtain appropriate clinical management for narcolepsy.

Factors that apply only to material contribution or aggravation

7. Paragraph 6(i) applies only to material contribution to, or aggravation of, narcolepsy where the person’s narcolepsy 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:

"a specified neurological disorder" means:
(a) a cerebrovascular accident;
(b) a focal inflammatory lesion;
(c) a neurodegenerative disorder, including dementia with Lewy bodies, multiple-system atrophy and progressive supranuclear palsy;
(d) acute disseminated encephalomyelitis;
(e) encephalitis;
(f) hypothalamic-pituitary failure;
(g) hypoxic cerebral insult;
(h) intracranial space occupying lesion;
(i) multiple sclerosis;
(j) neuromyelitis optica;
(k) parkinsonism;
(l) Parkinson's disease;
(m) Rasmussen's encephalitis; or
(n) sarcoidosis;

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

"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 15 January 2014.
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

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Statement of Principles concerning Narcolepsy
No. 7 of 2014
Veterans' Entitlements Act 1986
Compilation No. 1
Compilation date: 18/09/2017

Authorised Version F2017C00835 registered 18/09/2017
### Endnote 3—Legislation history

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Endnote 4—Amendment history

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