Statement of Principles concerning acquired cataract (Reasonable Hypothesis) (No. 87 of 2016)

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 acquired cataract (Reasonable Hypothesis) (No. 87 of 2016) 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If a provision of the compiled law has been repealed in accordance with a provision of the law, details are included in the endnotes.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 ACQUIRED CATARACT (Reasonable Hypothesis) (No. 87 of 2016)

The Repatriation Medical Authority determines the following Statement of Principles under subsection 196B(2) of the Veterans' Entitlements Act 1986.

Dated 28 October 2016
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1 Definitions .......................................................................................................................8
1 Name
This is the Statement of Principles concerning *acquired cataract (Reasonable Hypothesis)* (No. 87 of 2016).

2 Commencement
This instrument commences on 28 November 2016.

3 Authority
This instrument is made under subsection 196B(2) of the *Veterans’ Entitlements Act 1986*.

4 Revocation
The Statement of Principles concerning acquired cataract No. 39 of 2008, as amended, made under subsections 196B(2) and (8) of the VEA is revoked.

5 Application
This instrument applies to a claim to which section 120A of the VEA or section 338 of the *Military Rehabilitation and Compensation Act 2004* applies.

6 Definitions
The terms defined in the Schedule 1 - Dictionary have the meaning given when used in this instrument.

7 Kind of injury, disease or death to which this Statement of Principles relates
(1) This Statement of Principles is about acquired cataract and death from acquired cataract.

*Meaning of acquired cataract*

(2) For the purposes of this Statement of Principles, acquired cataract means an opacification of the lens or lens capsule of the eye which causes visual impairment and which is not due to congenital or infantile cataract or lens malformation.

(3) While acquired cataract attracts ICD-10-AM code H25, H26.1-H26.9, H28.1 or H28.2, in applying this Statement of Principles the meaning of acquired cataract is that given in subsection (2).

(4) 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
Death from acquired cataract

(5) For the purposes of this Statement of Principles, acquired cataract, in relation to a person, includes death from a terminal event or condition that was contributed to by the person's acquired cataract.

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

8 Basis for determining the factors

The Repatriation Medical Authority is of the view that there is sound medical-scientific evidence that indicates that acquired cataract and death from acquired cataract 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 MRCA.

Note: relevant service is defined in the Schedule 1 – Dictionary.

9 Factors that must exist

At least one of the following factors must as a minimum exist before it can be said that a reasonable hypothesis has been raised connecting acquired cataract or death from acquired cataract with the circumstances of a person’s relevant service:

(1) having sunlight exposure to the eye for at least 2 250 hours while in a tropical area, or having equivalent sunlight exposure in other latitude zones, before the clinical onset of acquired cataract;

Note: equivalent sunlight exposure in other latitude zones and tropical area are defined in the Schedule 1 - Dictionary.

(2) smoking at least five pack-years of cigarettes, or the equivalent thereof in other tobacco products, before the clinical onset of acquired cataract;

Note: pack-years of cigarettes, or the equivalent thereof in other tobacco products is defined in the Schedule 1 - Dictionary.

(3) having diabetes mellitus before the clinical onset of acquired cataract;

(4) having received a cumulative equivalent dose of at least 0.2 sievert of ionising radiation to the affected eye before the clinical onset of acquired cataract;

Note: cumulative equivalent dose is defined in the Schedule 1 - Dictionary.
(5) having physical trauma to the affected eye within the 20 years before the clinical onset of acquired cataract;

Note: physical trauma is defined in the Schedule 1 - Dictionary.

(6) having a severe thermal or chemical burn to the affected eye before the clinical onset of acquired cataract;

Note: severe thermal or chemical burn is defined in the Schedule 1 - Dictionary.

(7) having an electrical injury within the five years before the clinical onset of acquired cataract;

(8) being treated with a drug as specified before the clinical onset of acquired cataract;

Note: being treated with a drug as specified is defined in the Schedule 1 - Dictionary.

(9) being treated with a selective serotonin reuptake inhibitor or a serotonin and noradrenaline (norepinephrine) reuptake inhibitor for the six months before the clinical onset of acquired cataract;

(10) taking an antimalarial agent for a consecutive period of at least six months before the clinical onset of acquired cataract;

(11) being treated with an oral, topical or inhalational corticosteroid as specified within the ten years before the clinical onset of acquired cataract;

Note: being treated with an oral, topical or inhalational corticosteroid as specified is defined in the Schedule 1 - Dictionary.

(12) having uveitis or iridocyclitis of the affected eye before the clinical onset of acquired cataract;

(13) being overweight or obese for at least five years within the ten years before the clinical onset of acquired cataract;

Note: being overweight or obese is defined in the Schedule 1 - Dictionary.

(14) for cortical and subcapsular cataract only, having hypoparathyroidism at the time of the clinical onset of acquired cataract;

(15) having sunlight exposure to the eye for at least 2 250 hours while in a tropical area, or having equivalent sunlight exposure in other latitude zones, before the clinical worsening of acquired cataract;

Note: equivalent sunlight exposure in other latitude zones and tropical area are defined in the Schedule 1 - Dictionary.
(16) smoking at least five pack-years of cigarettes, or the equivalent thereof in other tobacco products, before the clinical worsening of acquired cataract;

Note: pack-years of cigarettes, or the equivalent thereof in other tobacco products is defined in the Schedule 1 - Dictionary.

(17) having diabetes mellitus before the clinical worsening of acquired cataract;

(18) having received a cumulative equivalent dose of at least 0.2 sievert of ionising radiation to the affected eye before the clinical worsening of acquired cataract;

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

(19) having physical trauma to the affected eye within the 20 years before the clinical worsening of acquired cataract;

Note: physical trauma is defined in the Schedule 1 - Dictionary.

(20) having a severe thermal or chemical burn to the affected eye before the clinical worsening of acquired cataract;

Note: severe thermal or chemical burn is defined in the Schedule 1 - Dictionary.

(21) having an electrical injury within the five years before the clinical worsening of acquired cataract;

(22) being treated with a drug as specified before the clinical worsening of acquired cataract;

Note: being treated with a drug as specified is defined in the Schedule 1 - Dictionary.

(23) being treated with a selective serotonin reuptake inhibitor or a serotonin and noradrenaline (norepinephrine) reuptake inhibitor for the six months before the clinical worsening of acquired cataract;

(24) taking an antimalarial agent for a consecutive period of at least six months before the clinical worsening of acquired cataract;

(25) being treated with an oral, topical or inhalational corticosteroid as specified within the ten years before the clinical worsening of acquired cataract;

Note: being treated with an oral, topical or inhalational corticosteroid as specified is defined in the Schedule 1 - Dictionary.

(26) having uveitis or iridocyclitis of the affected eye before the clinical worsening of acquired cataract;
(27) being overweight or obese for at least five years within the ten years before the clinical worsening of acquired cataract;

Note: *being overweight or obese* is defined in the Schedule 1 - Dictionary.

(28) for cortical and subcapsular cataract only, having hypoparathyroidism at the time of the clinical worsening of acquired cataract;

(29) inability to obtain appropriate clinical management for acquired cataract.

10 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 factors set out in subsections 9(15) to 9(29) apply only to material contribution to, or aggravation of, acquired cataract where the person's acquired cataract was suffered or contracted before or during (but did not arise out of) the person's relevant service.

11 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(2) 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

In this instrument:

**acquired cataract**—see subsection 7(2).

**being overweight or obese** means having a Body Mass Index (BMI) of 25 or greater.

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

**being treated with a drug as specified** means:

(a) for anterior subcapsular cataract only, receiving a cumulative dose of at least 750 grams of a phenothiazine; or

(b) receiving a cumulative dose of at least 200 grams of allopurinol; or

(c) receiving a cumulative dose of at least 200 grams of amiodarone; or

(d) receiving a cumulative dose of at least three grams of mepacrine (atebrin); or

(e) receiving a cumulative dose of at least 15 grams of tamoxifen.

**being treated with an oral, topical or inhalational corticosteroid as specified** means:

(a) applying a topical corticosteroid to the cornea of the affected eye equivalent to a cumulative dose of at least 100 drops of 0.1% dexamethasone; or

(b) applying a topical corticosteroid to the skin for a total of at least 365 days; or

(c) taking an oral corticosteroid equivalent to a cumulative dose of at least 450 milligrams of prednisone; or

(d) using an inhalational corticosteroid equivalent to a cumulative dose of at least 1 000 milligrams of budesonide.

**BMI** means \( \frac{W}{H^2} \) 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

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.

**equivalent sunlight exposure in other latitude zones** means the cumulative hours of sunlight exposure equivalent to that specified for a tropical area, calculated by multiplying the hours of exposure in each latitude zone by the latitude weighting factor for the zone as per the latitude weighting factor schedule and adding together the result for each zone:

**Latitude weighting factor schedule**

<table>
<thead>
<tr>
<th>Latitude zone</th>
<th>Latitude weighting factor</th>
</tr>
</thead>
<tbody>
<tr>
<td>a latitude between 23° 27' South and 23° 27' North</td>
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</tr>
<tr>
<td>a latitude from &gt; 23° 27' to 35°</td>
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<td>a latitude from &gt; 35° to 45°</td>
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<tr>
<td>a latitude from &gt; 45° to 65°</td>
<td>0.25</td>
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</table>

**MRCA** means the *Military Rehabilitation and Compensation Act 2004*.

**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 7 300 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 mean cigarettes, pipe tobacco or cigars, smoked alone or in any combination.

**physical trauma** means:

(a) penetrating injury; or
(b) intraocular surgery; or
(c) blunt trauma resulting in symptoms and signs lasting at least three days.

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

**severe thermal or chemical burn** means a burn involving at least one of the following clinical features:

(a) corneal anaesthesia;
(b) corneal opacification;
(c) symptoms and signs lasting at least three days and requiring medical attention; or
(d) for chemical burns only, penetration of the chemical into the anterior chamber.

**terminal event** means the proximate or ultimate cause of death and includes the following:

(a) pneumonia;
(b) respiratory failure;
(c) cardiac arrest;
(d) circulatory failure; or
(e) cessation of brain function.

**tropical area** means any area between the Tropic of Capricorn (23° 27' South) and the Tropic of Cancer (23° 27' North).

**VEA** means the *Veterans’ Entitlements Act 1986*. 

**Veterans’ Entitlements Act 1986** means the *Veterans’ Entitlements Act 1986*. 

**Acquired Cataract (Reasonable Hypothesis) (No. 87 of 2016)**

Compilation No. 1

Compilation date: 18/09/2017
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

Acquired Cataract (Reasonable Hypothesis) (No. 87 of 2016)

Veterans' Entitlements Act 1986

Compilation No. 1

Compilation date: 18/09/2017

Authorised Version F2017C00870 registered 19/09/2017
### Endnote 3—Legislation history

<table>
<thead>
<tr>
<th>Name</th>
<th>Registration</th>
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<th>Application, saving and transitional provisions</th>
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<td>28 November 2016</td>
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<td>18 September 2017</td>
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### Endnote 4—Amendment history

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<th>Provision affected</th>
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