Statement of Principles concerning temporomandibular disorder (Balance of Probabilities) (No. 48 of 2018)

made under subsection 196B(3) of the

Veterans' Entitlements Act 1986

Compilation No. 1

Compilation date: 25 May 2020

Includes amendments up to: Amendment Statement of Principles concerning temporomandibular disorder (Balance of Probabilities) (No. 43 of 2020) (F2020L00507)

The day of commencement of this Amendment Statement of Principles concerning temporomandibular disorder is 25 May 2020.

Prepared by the Repatriation Medical Authority Secretariat, Brisbane
About this compilation

This compilation

This is a compilation of the Statement of Principles concerning temporomandibular disorder (Balance of Probabilities) (No. 48 of 2018) that shows the text of the law as amended and in force on 25 May 2020.

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If a provision of the compiled law has been repealed in accordance with a provision of the law, details are included in the endnotes.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

TEMPOROMANDIBULAR DISORDER
(Balance of Probabilities)
(No. 48 of 2018)

The Repatriation Medical Authority determines the following Statement of Principles under subsection 196B(3) of the Veterans' Entitlements Act 1986.

Dated 27 April 2018
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1 Definitions ............................................................................................................. 8
1 Name
This is the Statement of Principles concerning *temporomandibular disorder (Balance of Probabilities)* (No. 48 of 2018).

2 Commencement
This instrument commences on 28 May 2018.

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

4 Application
This instrument applies to a claim to which section 120B of the VEA or section 339 of the *Military Rehabilitation and Compensation Act 2004* applies.

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

6 Kind of injury, disease or death to which this Statement of Principles relates

(1) This Statement of Principles is about temporomandibular disorder and death from temporomandibular disorder.

*Meaning of temporomandibular disorder*

(2) For the purposes of this Statement of Principles, temporomandibular disorder:

(a) means a heterogeneous group of conditions affecting the anatomical and functional characteristics of the temporomandibular joint, masticatory muscles and associated structures of the masticatory system, with:

(i) clinically significant pain localised in the temple, front of ear or jaw, that is modified with jaw movement, and which is experienced on more days than not within a continuous six month period; and

(ii) clinically significant distress or substantial impairment of social, occupational, educational or other important areas of functioning due to pain, limitation, deviation or other abnormality of jaw motion; and
(iii) clinical signs or imaging evidence of myalgia, arthralgia, or another pathological process affecting the temporomandibular joint, muscles of mastication and/or associated structures; and

(b) excludes:

(i) orofacial pain of dental origin;
(ii) headache or pain better accounted for by another pain or headache disorder; and
(iii) congenital or developmental orofacial disorders.

Note 1: Symptoms of temporomandibular disorder include orofacial pain, muscle or joint tenderness, pain referred to the angle of the mandible and muscles of the neck, deviated mouth opening, limitation of range of mandibular movements, headache produced or exacerbated by jaw movements, abnormal joint sounds, and otolaryngological symptoms.

Signs of temporomandibular disorder include modification of pain by passive movements through the range of motion of the jaw or provocative manoeuvres applied to temporomandibular structures.

Note 2: masticatory muscles and associated structures of the masticatory system is defined in the Schedule 1 – Dictionary.

(3) While temporomandibular disorder attracts ICD-10-AM code M26.60, in applying this Statement of Principles the meaning of temporomandibular disorder is that given in subsection (2).


Death from temporomandibular disorder

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

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

7 Basis for determining the factors

On the sound medical-scientific evidence available, the Repatriation Medical Authority is of the view that it is more probable than not that temporomandibular disorder and death from temporomandibular disorder can be related to relevant service rendered by veterans or members of the Forces under the VEA, or members under the MRCA.
8 Factors that must exist

At least one of the following factors must exist before it can be said that, on the balance of probabilities, temporomandibular disorder or death from temporomandibular disorder is connected with the circumstances of a person's relevant service:

1. having a specified joint disease involving the affected temporomandibular joint, at the time of the clinical onset of temporomandibular disorder;
   Note: specified joint disease is defined in the Schedule 1 - Dictionary.

2. having a specified maxillofacial disease involving the affected masticatory muscles and associated structures of the masticatory system, at the time of the clinical onset of temporomandibular disorder;
   Note: masticatory muscles and associated structures of the masticatory system and specified maxillofacial disease are defined in the Schedule 1 - Dictionary.

3. having an infection as specified of the affected temporomandibular joint, masticatory muscles and associated structures of the masticatory system, at the time of the clinical onset of temporomandibular disorder;
   Note: infection as specified and masticatory muscles and associated structures of the masticatory system are defined in the Schedule 1 - Dictionary.

4. having orofacial dyskinesia or oromandibular dystonia at the time of the clinical onset of temporomandibular disorder;

5. having acute trauma to the affected temporomandibular joint, masticatory muscles and associated structures of the masticatory system, within the 30 days before the clinical onset of temporomandibular disorder;
   Note: acute trauma and masticatory muscles and associated structures of the masticatory system are defined in the Schedule 1 - Dictionary.

6. having a sudden cervical flexion-extension (whiplash) injury requiring hospitalisation, within the 30 days before the clinical onset of temporomandibular disorder;

7. having a clinically significant disorder of mental health as specified, within the one year before the clinical onset of temporomandibular disorder;
   Note: clinically significant disorder of mental health as specified is defined in the Schedule 1 - Dictionary.
(8) undertaking scuba diving:
   (a) for a cumulative period of at least 200 hours within a continuous
       period of six months before the clinical onset of
       temporomandibular disorder; and
   (b) where this activity has ceased, the clinical onset of
       temporomandibular disorder has occurred within 30 days of
       cessation;

(9) having a specified joint disease involving the affected
    temporomandibular joint, at the time of the clinical worsening of
    temporomandibular disorder;
    Note: specified joint disease is defined in the Schedule 1 - Dictionary.

(10) having a specified maxillofacial disease involving the affected
     masticatory muscles and associated structures of the masticatory
     system, at the time of the clinical worsening of temporomandibular
     disorder;
     Note: masticatory muscles and associated structures of the masticatory system
     and specified maxillofacial disease are defined in the Schedule 1 - Dictionary.

(11) having an infection as specified of the affected temporomandibular
     joint, masticatory muscles and associated structures of the masticatory
     system, at the time of the clinical worsening of temporomandibular
     disorder;
     Note: infection as specified and masticatory muscles and associated structures of the
     masticatory system are defined in the Schedule 1 - Dictionary.

(12) having orofacial dyskinesia or oromandibular dystonia at the time of
    the clinical worsening of temporomandibular disorder;

(13) having acute trauma to the affected temporomandibular joint,
    masticatory muscles and associated structures of the masticatory
    system, within the 30 days before the clinical worsening of
    temporomandibular disorder;
    Note: acute trauma and masticatory muscles and associated structures of the masticatory
    system are defined in the Schedule 1 - Dictionary.

(14) having a sudden cervical flexion-extension (whiplash) injury requiring
    hospitalisation, within the 30 days before the clinical worsening of
    temporomandibular disorder;

(15) having a clinically significant disorder of mental health as specified,
    within the one year before the clinical worsening of
    temporomandibular disorder;
    Note: clinically significant disorder of mental health as specified is defined in the
    Schedule 1 - Dictionary.
(16) undertaking scuba diving:

   (a) for a cumulative period of at least 200 hours within a continuous period of six months before the clinical worsening of temporomandibular disorder; and
   
   (b) where this activity has ceased, the clinical worsening of temporomandibular disorder has occurred within 30 days of cessation;

(17) inability to obtain appropriate clinical management for temporomandibular disorder.

9 Relationship to service

(1) The existence in a person of any factor referred to in section 8, must be related to the relevant service rendered by the person.

(2) The factors set out in subsections 8(9) to 8(17) apply only to material contribution to, or aggravation of, temporomandibular disorder where the person's temporomandibular disorder was suffered or contracted before or during (but did not arise out of) the person's relevant service.

10 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 8 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(3) 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 5

1 Definitions

In this instrument:

acute trauma means a discrete event involving the application of significant physical force to or through the affected structures, that causes:

(a) damage to the joint, masticatory muscles and associated structures of the masticatory system; and
(b) the development, within 24 hours of the event occurring, of symptoms and signs of pain, tenderness or altered range of movement of the joint and associated structures. In the case of sustained unconsciousness or the masking of pain by analgesic medication, these symptoms and signs must appear on return to consciousness or the withdrawal of the analgesic medication; or
(c) distortion of the temporomandibular joint; or
(d) fracture of the temporal bone or mandible.

Note 1: Acute trauma includes craniotomy, osteotomy and reconstructive surgery involving the temporal bone or mandible, but excludes regular dental and orthodontic treatment.

Note 2: masticatory muscles and associated structures of the masticatory system is also defined in the Schedule 1 – Dictionary.

clinically significant disorder of mental health as specified means one of the following conditions, which is of sufficient severity to warrant ongoing management:

(a) acute stress disorder;
(b) anxiety disorder;
(c) depressive disorder; or
(d) posttraumatic stress disorder.

Note 1: "Management" of the condition may involve regular visits (for example, at least monthly) to a psychiatrist, counsellor or general practitioner.

Note 2: To "warrant ongoing management" does not require that any actual management was received or given for the condition.

contracture means the shortening of a muscle due to fibrosis of tendons, ligaments or muscle fibres. Common causes include radiation therapy, trauma and infection.

infection as specified means a bacterial, fungal, viral or parasitic infection resulting in inflammation and tissue destruction within the affected tissues.

masticatory muscles and associated structures of the masticatory system means any bony, muscular or tendinous structure of the masticatory system, including the temporalis, medial pterygoid, lateral pterygoid, digastric,
mylohyoid, geniohyoid and masseter muscles or tendons, and the temporal bone and mandible.

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

**relevant service** means:

(a) eligible war service (other than operational service) under the VEA;
(b) defence service (other than hazardous service and British nuclear test defence service) under the VEA; or
(c) peacetime service under the MRCA.

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

**specified joint disease** means one of the following:

(a) adhesions or adherence;
(b) ankylosing spondylitis;
(c) ankylosis (fibrous or osseous);
(d) condylysis or condylar resorption;
(e) disc displacement;
(f) dislocation;
(g) gout;
(h) joint instability;
(i) neoplasm;
(j) osteoarthritis;
(k) osteochondritis dissecans;
(l) osteonecrosis (avascular necrosis);
(m) psoriatic arthritis;
(n) rheumatoid arthritis;
(o) Sjögren syndrome;
(p) space-occupying lesion within the temporomandibular joint space;
(q) synovial chondromatosis;
(r) systemic lupus erythematosus;
(s) systemic sclerosis (scleroderma); or
(t) other degenerative or inflammatory disease of the joint.

Note: **contracture** is also defined in the Schedule 1 - Dictionary.

**specified maxillofacial disease** means one of the following:

(a) benign or malignant neoplasm;
(b) contracture;
(c) coronoid hyperplasia;
(d) myositis;
(e) osteonecrosis;
(f) space-occupying lesion within the bones of the jaw;
(g) systemic sclerosis (scleroderma);
(h) tendonitis; or
(i) another disease process causing distortion of the temporal bone, mandible or the temporomandibular joint.
temporomandibular disorder—see subsection 6(2).

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.

VEA means the Veterans’ Entitlements Act 1986.
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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**Amendment Statement of Principles concerning temporomandibular disorder (Balance of Probabilities) (No. 43 of 2020)**

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Statement of Principles concerning 14 Temporomandibular Disorder (Balance of Probabilities) (No. 48 of 2018)

Veterans’ Entitlements Act 1986

Compilation No. 1

Compilation date: 25/05/2020

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