Statement of Principles
concerning
COELIAC DISEASE
(Reasonable Hypothesis)
(No. 29 of 2020)

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

Dated 24 April 2020

The Common Seal of the Repatriation Medical Authority was affixed to this instrument at the direction of:

[Signature]

Professor Nicholas Saunders AO
Chairperson
Contents

1 Name.................................................................................................................................3
2 Commencement ....................................................................................................................3
3 Authority..............................................................................................................................3
4 Repeal .................................................................................................................................3
5 Application...........................................................................................................................3
6 Definitions............................................................................................................................3
7 Kind of injury, disease or death to which this Statement of Principles relates ..............3
8 Basis for determining the factors .......................................................................................4
9 Factors that must exist..........................................................................................................4
10 Relationship to service ........................................................................................................5
11 Factors referring to an injury or disease covered by another Statement of Principles. ........................................................................................................................................5

Schedule 1 - Dictionary .......................................................................................................6
1 Definitions.............................................................................................................................6
1 Name
This is the Statement of Principles concerning *coeliac disease (Reasonable Hypothesis)* (No. 29 of 2020).

2 Commencement
This instrument commences on 25 May 2020.

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

4 Repeal
The Statement of Principles concerning coeliac disease No. 1 of 2011 (Federal Register of Legislation No. F2010L03248) made under subsection 196B(2) of the VEA is repealed.

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 coeliac disease and death from coeliac disease.

*Meaning of coeliac disease*

(2) For the purposes of this Statement of Principles, coeliac disease:

(a) means a malabsorption disorder in susceptible people due to immune-mediated mucosal inflammation of the small intestine, characterised by villous atrophy and crypt hyperplasia, and triggered by hypersensitivity to ingested gluten; and

(b) excludes:

(i) non-coeliac gluten sensitivity;

(ii) non-coeliac wheat protein sensitivity; and

(iii) wheat allergy.

Note 1: Coeliac disease is associated with autoantibodies to tissue transglutaminase (tTG-IgA) and to endomysium (EMA-IgA).
Note 2: Coeliac disease is characterised by other gastrointestinal manifestations in addition to malabsorption, and by extraintestinal manifestations involving a wide range of organ systems.

(3) While coeliac disease attracts ICD-10-AM code K90.0, in applying this Statement of Principles the meaning of coeliac disease is that given in subsection (2).


**Death from coeliac disease**

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

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 coeliac disease and death from coeliac disease 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: *MRCA, relevant service* and *VEA* are 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 coeliac disease or death from coeliac disease with the circumstances of a person's relevant service:

(1) being treated with interferon alpha within the six months before the clinical worsening of coeliac disease;

(2) being treated with ribavirin within the six months before the clinical worsening of coeliac disease;

(3) being treated with a proton pump inhibitor or a histamine-2 receptor antagonist, on more days than not, for at least the six months before the clinical worsening of coeliac disease;

Note 1: Examples of proton pump inhibitors include esomeprazole, lansoprazole, omeprazole, pantoprazole and rabeprazole.

Note 2: Examples of histamine-2 receptor antagonists include cimetidine, famotidine, nizatidine and ranitidine.
(4) being treated with a non-selective, non-steroidal, anti-inflammatory agent, on more days than not, for at least the six months before the clinical worsening of coeliac disease;

Note: Examples of non-selective, non-steroidal, anti-inflammatory agents include aspirin, diclofenac, ibuprofen, indomethacin, ketoprofen, ketorolac, mefenamic acid, naproxen, piroxicam and sulindac.

(5) inability to maintain a gluten-free diet at the time of the clinical worsening of coeliac disease;

(6) inability to obtain appropriate clinical management for coeliac disease.

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(1) to 9(6) apply only to material contribution to, or aggravation of, coeliac disease where the person's coeliac disease 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:

celiac disease—see subsection 7(2).


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.

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.