

Statement of Principles concerning MYASTHENIA GRAVIS (No. 76 of 2015)

The Repatriation Medical Authority determines the following Statement of Principles.

Dated 19 June 2015

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

Professor Nicholas Saunders AO

Chairperson

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1 Name

This is the Statement of Principles concerning **myasthenia gravis** (No. 76 of 2015).

2 Commencement

This instrument commences on 20 July 2015.

3 Authority

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

4 Revocation

The Statement of Principles concerning myasthenia gravis No. 16 of 2007 made under subsection 196B(3) of the VEA is revoked.

5 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.

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 myasthenia gravis and death from myasthenia gravis.

Meaning of **myasthenia gravis**

- (2) For the purposes of this Statement of Principles, myasthenia gravis:
 - (a) means an autoimmune neuromuscular disorder characterised by weakness and fatigability of skeletal muscles; and
 - (b) excludes temporary weakness and fatigability of skeletal muscles due to medication and myasthenic syndromes.
- (3) While myasthenia gravis attracts ICD-10-AM code G70.0, in applying this Statement of Principles the meaning of myasthenia gravis 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 International Statistical Classification of Diseases and Related Health Problems, Tenth Revision, Australian Modification* (ICD-10-AM),

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Death from myasthenia gravis

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

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

8 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 myasthenia gravis and death from myasthenia gravis can be related to relevant service rendered by veterans 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 exist before it can be said that, on the balance of probabilities, myasthenia gravis or death from myasthenia gravis is connected with the circumstances of a person's relevant service:

- (1) having systemic treatment with a drug from Specified List of Drugs No. 1 at the time of the clinical onset of myasthenia gravis;
 - Note: Specified List of Drugs No. 1 is defined in the Schedule 1 Dictionary.
- (2) undergoing stem cell or bone marrow transplantation before the clinical onset of myasthenia gravis;
- (3) being treated with a drug from a class of drugs from Specified List of Drugs No. 2 at the time of the clinical worsening of myasthenia gravis;

 Note: *Specified List of Drugs No. 2* is defined in the Schedule 1 Dictionary.
- (4) being treated with a drug from Specified List of Drugs No. 3 at the time of the clinical worsening of myasthenia gravis;
 - Note: *Specified List of Drugs No. 3* is defined in the Schedule 1 Dictionary.
- (5) having an injection of iothalamic acid, diatrizoate meglumine or diatrizoate sodium, within the 24 hours before the clinical worsening of myasthenia gravis;
- (6) undergoing stem cell or bone marrow transplantation before the clinical worsening of myasthenia gravis;
- (7) being pregnant within the six weeks before the clinical worsening of myasthenia gravis;

(8) inability to obtain appropriate clinical management for myasthenia gravis.

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(3) to 9(8) apply only to material contribution to, or aggravation of, myasthenia gravis where the person's myasthenia gravis 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(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 6

1 Definitions

In this instrument:

MRCA means the Military Rehabilitation and Compensation Act 2004.

myasthenia gravis - see subsection 7(2).

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.

Specified List of Drugs No. 1 means:

- (a) chloroquine;
- (b) interferon alpha;
- (c) lithium carbonate;
- (d) penicillamine;
- (e) phenytoin; or
- (f) trimethadione.

Specified List of Drugs No. 2 means:

- (a) anaesthetic agents;
- (b) antibiotics;
- (c) beta-blockers:
- (d) calcium channel blockers;
- (e) HMG coenzyme A reductase inhibitors (statins);
- (f) systemic corticosteroids;
- (g) potassium losing diuretics;
- (h) sedative analgesics including barbiturates, muscle relaxants, narcotics and tranquillisers; or
- (i) thyroid hormone replacement therapy.

Specified List of Drugs No. 3 means any of the following drugs (including where those drugs are contained in preparations):

- (a) acetazolamide;
- (b) amantadine:
- (c) amitriptyline;
- (d) botulinum toxin;
- (e) carbamazepine;
- (f) chloroquine;
- (g) chlorpromazine;
- (h) cocaine;
- (i) colchicine;
- (i) diphenhydramine;

- (k) droperidol;
- (1) echothiophate;
- (m) ementine;
- (n) ergometrine;
- (o) etafenone;
- (p) ethosuximide;
- (q) gabapentin;
- (r) haloperidol;
- (s) imipramine;
- (t) interferon alpha;
- (u) interleukin-2;
- (v) levonorgestrel implant;
- (w) lithium carbonate;
- (x) magnesium sulphate;
- (y) mefloquine;
- (z) nicotine transdermal patch;
- (aa) paraldehyde;
- (bb) penicillamine;
- (cc) peruvoside;
- (dd) phenytoin;
- (ee) procainamide;
- (ff) proguanil;
- (gg) propafenone;
- (hh) pyrantel pamoate;
- (ii) quinidine;
- (jj) quinine;
- (kk) ribavirin;
- (ll) tiopronin;
- (mm) trientine;
- (nn) trihexyphenidyl;
- (oo) trimethadione; or
- (pp) trimethaphan.

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*.