



Australian Government
Repatriation Medical Authority

Statement of Principles
concerning
MALIGNANT NEOPLASM OF THE
ENDOMETRIUM
(Reasonable Hypothesis)
(No. 11 of 2016)

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

Dated 4 March 2016

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

A handwritten signature in black ink, appearing to read 'N. Saunders'.

Professor Nicholas Saunders AO
Chairperson

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1 Name

This is the Statement of Principles concerning *malignant neoplasm of the endometrium (Reasonable Hypothesis)* (No. 11 of 2016).

2 Commencement

This instrument commences on 4 April 2016.

3 Authority

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

4 Revocation

The Statement of Principles concerning malignant neoplasm of the endometrium No. 99 of 2007, 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 malignant neoplasm of the endometrium and death from malignant neoplasm of the endometrium.

Meaning of malignant neoplasm of the endometrium

- (2) For the purposes of this Statement of Principles, malignant neoplasm of the endometrium means:
- (a) a primary malignant neoplasm arising from the cells of the mucous membrane that lines the uterine cavity; and
 - (b) includes carcinoma in situ and carcinosarcoma (also known as malignant mesodermal mixed tumour); and
 - (c) excludes malignant neoplasm of the cervix, carcinoid tumour, soft tissue sarcoma of the uterus, non-Hodgkin's lymphoma and Hodgkin's lymphoma.
- (3) While malignant neoplasm of the endometrium attracts ICD-10-AM code C54.1, in applying this Statement of Principles the meaning of

malignant neoplasm of the endometrium 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)*, Ninth Edition, effective date of 1 July 2015, copyrighted by the Independent Hospital Pricing Authority, ISBN 978-1-76007-020-5.

Death from malignant neoplasm of the endometrium

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

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 malignant neoplasm of the endometrium and death from malignant neoplasm of the endometrium 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 malignant neoplasm of the endometrium or death from malignant neoplasm of the endometrium with the circumstances of a person's relevant service:

- (1) for females aged over 35 years only, being nulliparous at the time of the clinical onset of malignant neoplasm of the endometrium;

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

- (2) using oestrogen-only hormone replacement therapy for at least three months before the clinical onset of malignant neoplasm of the endometrium, and where the use of oestrogen-only hormone replacement therapy has ceased, the clinical onset of malignant neoplasm of the endometrium has occurred within 30 years of cessation;

Note: *oestrogen-only hormone replacement therapy* is defined in the Schedule 1 - Dictionary.

- (3) having cyclical combined hormone replacement therapy for a continuous period of at least two years before the clinical onset of

malignant neoplasm of the endometrium, and where the use of cyclical combined hormone replacement therapy has ceased, the clinical onset of malignant neoplasm of the endometrium has occurred within ten years of cessation;

Note: *cyclical combined hormone replacement therapy* is defined in the Schedule 1 - Dictionary.

- (4) having polycystic ovary syndrome at the time of the clinical onset of malignant neoplasm of the endometrium;

Note: *polycystic ovary syndrome* is defined in the Schedule 1 - Dictionary.

- (5) for post-menopausal females only, undergoing treatment with tamoxifen for a period of at least three months before the clinical onset of malignant neoplasm of the endometrium, and where treatment has ceased, the clinical onset of malignant neoplasm of the endometrium has occurred within 20 years of that period;

- (6) using the sequential oral contraceptive pill Oracon within the 20 years before the clinical onset of malignant neoplasm of the endometrium;

Note: *sequential oral contraceptive pill Oracon* is defined in the Schedule 1 - Dictionary.

- (7) being overweight or obese for a period of at least five years within the 20 years before the clinical onset of malignant neoplasm of the endometrium;

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

- (8) an inability to undertake any physical activity greater than three METs for at least ten years within the 30 years before the clinical onset of malignant neoplasm of the endometrium;

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

- (9) having an oestrogen-secreting ovarian tumour before the clinical onset of malignant neoplasm of the endometrium;

Note: *oestrogen-secreting ovarian tumour* is defined in the Schedule 1 - Dictionary.

- (10) having diabetes mellitus for at least five years before the clinical onset of malignant neoplasm of the endometrium;

- (11) for post-menopausal females with a history of a regular smoking habit as specified only, having not smoked for the ten years before the clinical onset of malignant neoplasm of the endometrium;

Note: *regular smoking habit as specified* is defined in the Schedule 1 - Dictionary.

- (12) for carcinosarcoma only, having received a cumulative equivalent dose of at least 0.1 sievert of ionising radiation to the uterus at least two years before the clinical onset of malignant neoplasm of the endometrium; or

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

- (13) inability to obtain appropriate clinical management for malignant neoplasm of the endometrium.

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 factor set out in subsection 9(13) applies only to material contribution to, or aggravation of, malignant neoplasm of the endometrium where the person's malignant neoplasm of the endometrium 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:

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

BMI means 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. The formula used to calculate the cumulative equivalent dose allows doses from multiple types of ionising radiation to be combined, by accounting for their differing biological effect. The unit of equivalent dose is the sievert. For the purposes of this Statement of Principles, the calculation of cumulative equivalent dose excludes doses received from normal background radiation, but includes therapeutic radiation, diagnostic radiation, cosmic radiation at high altitude, radiation from occupation-related sources and radiation from nuclear explosions or accidents.

cyclical combined hormone replacement therapy means the administration of oestrogen combined with the cyclical administration of progestogen for less than 15 days during each treatment cycle, to combat surgically induced or naturally occurring menopause.

malignant neoplasm of the endometrium—see subsection 7(2).

MET means a unit of measurement of the level of physical exertion. 1 MET = 3.5 ml of oxygen/kg of body weight per minute, 1.0 kcal/kg of body weight per hour or resting metabolic rate.

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

nulliparous means having never given birth to a viable infant.

oestrogen-only hormone replacement therapy means the continuous, cyclical or intermittent administration of unopposed oestrogen, including diethylstilbestrol, to combat surgically induced or naturally occurring menopause.

oestrogen-secreting ovarian tumour means a tumour of the ovary which secretes oestrogen, including a granulosa cell tumour (a type of malignant neoplasm of the ovary).

pack-years of cigarettes, or the equivalent thereof in other tobacco products means a calculation of consumption where one pack-year of cigarettes equals 20 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.

polycystic ovary syndrome means a clinical symptom complex, also known as Stein-Leventhal syndrome, associated with polycystic ovaries and characterised by oligomenorrhea or amenorrhea, anovulation and hirsutism.

regular smoking habit as specified means having smoked at least ten pack-years of cigarettes, or the equivalent thereof in other tobacco products.

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

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.

sequential oral contraceptive pill Oracon means a contraceptive pill containing a potent oestrogen (0.1 g ethinyloestradiol) and a weak progestogen (25 mg dimethisterone), in which oestrogen was given alone for the first 16 days of the cycle, followed by five to seven days of combined oestrogen plus progestogen.

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*.