

Amendment Statement of Principles concerning DEPRESSIVE DISORDER (Reasonable Hypothesis)

(No. 29 of 2016)

The Repatriation Medical Authority determines the following Amendment Statement of Principles under subsections 196B(2) and (8) 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:

Professor Nicholas Saunders AO

Chairperson

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1 Name

This is the Amendment Statement of Principles concerning *depressive* disorder (Reasonable Hypothesis) (No. 29 of 2016).

2 Commencement

This instrument commences on 4 April 2016.

3 Authority

This instrument is made under subsections 196B(2) and (8) of the *Veterans' Entitlements Act 1986*.

4 Application

This instrument applies to a claim to which section 120A of the *Veterans' Entitlements Act 1986* or section 338 of the *Military Rehabilitation and Compensation Act 2004* applies.

5 Amendment

The Statement of Principles concerning depressive disorder and death from depressive disorder No. 83 of 2015 is amended in the following manner:

Section	Amendment
9(1)(1)	Replace the existing factor in subsection $9(1)(1)$ with the following:
	having a severe, chronic medical condition for the two years before the clinical onset of depressive disorder;
	Note: <i>severe, chronic medical condition</i> is defined in the Schedule 1 - Dictionary.
9(15)	Replace the existing factor in subsection 9(15) with the following:
	having a severe, chronic medical condition for the two years before the clinical worsening of depressive disorder;
	Note: <i>severe, chronic medical condition</i> is defined in the Schedule 1 - Dictionary.
Schedule 1 – Dictionary	Delete the definition of "chronic medical condition".
Schedule 1 – Dictionary	Insert the following definition of "severe, chronic medical condition" in alphabetical order:
	severe, chronic medical condition means an illness which substantially impacts on social, occupational or other important areas of functioning; and requires ongoing daily or almost daily management of symptoms.

This management may include, but is not limited to, assistance with activities of daily living; bed rest; dietary modification; drug therapy; nursing care; oxygen therapy or physiotherapy. This management must be supervised by a registered health practitioner.

Severe, chronic medical conditions do not usually resolve spontaneously, are rarely cured completely and may progress to life threatening illnesses. Examples of these conditions include poorly controlled asthma, chronic obstructive pulmonary disease, poorly controlled diabetes mellitus, inflammatory bowel disease, pemphigus, psoriasis and rheumatoid arthritis.