



Australian Government
Repatriation Medical Authority

Statement of Principles concerning

SPONDYLOLISTHESIS AND SPONDYLOLYSIS

No. 59 of 2015

for the purposes of the

Veterans' Entitlements Act 1986
and
Military Rehabilitation and Compensation Act 2004

Title

1. This Instrument may be cited as Statement of Principles concerning spondylolisthesis and spondylolysis No. 59 of 2015.

Determination

2. The Repatriation Medical Authority under subsection **196B(2)** and **(8)** of the *Veterans' Entitlements Act 1986* (the VEA):
 - (a) revokes Instrument No. 5 of 2006, as amended, concerning spondylolisthesis and spondylolysis; and
 - (b) determines in its place this Statement of Principles.

Kind of injury, disease or death

3.
 - (a) This Statement of Principles is about **spondylolisthesis and spondylolysis** and **death from spondylolisthesis and spondylolysis**.
 - (b) For the purposes of this Statement of Principles:

"spondylolisthesis" means forward displacement of one vertebra over another; and

"spondylolysis" means a defect or fracture, unilateral or bilateral, involving the pars interarticularis of a vertebra. The pars interarticularis is that part of the vertebral arch that extends between the superior and inferior articular processes.

- (c) Spondylolisthesis attracts ICD-10-AM code M43.1 or Q76.21; and spondylolysis attracts ICD-10-AM code M43.0 or Q76.22.
- (d) In the application of this Statement of Principles, the definition of **"spondylolisthesis and spondylolysis"** is that given at paragraph 3(b) above.

Basis for determining the factors

- 4. The Repatriation Medical Authority is of the view that there is sound medical-scientific evidence that indicates that **spondylolisthesis or spondylolysis** and **death from spondylolisthesis or spondylolysis** 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 *Military Rehabilitation and Compensation Act 2004* (the MRCA).

Factors that must be related to service

- 5. Subject to clause 7, at least one of the factors set out in clause 6 must be related to the relevant service rendered by the person.

Factors

- 6. The factor that must as a minimum exist before it can be said that a reasonable hypothesis has been raised connecting **spondylolisthesis or spondylolysis** or **death from spondylolisthesis or spondylolysis** with the circumstances of a person's relevant service is:
 - (a) experiencing a high impact trauma to the spine resulting in an acute fracture of the vertebral arch at the time of the clinical onset of spondylolisthesis or spondylolysis; or
 - (b) for spondylolisthesis only, experiencing a high impact trauma to the spine resulting in an acute fracture of the vertebral arch or dislocation of the involved vertebra within the one year before the clinical onset of spondylolisthesis; or
 - (c) for persons less than 25 years of age with lumbar spondylolysis or lumbar spondylolytic spondylolisthesis only, engaging in activities involving:
 - (i) repetitive and forceful hyperextension, torsion or rotation against resistance of the lumbar spine; or
 - (ii) increased lordosis of the lumbar spine;
 for an average period of at least ten hours per week for the six months before the clinical onset of spondylolisthesis or spondylolysis; or
 - (d) for lumbar spondylolysis or lumbar spondylolytic spondylolisthesis only, having undergone a posterior lumbar spinal fusion of a segment of adjoining vertebrae, within the five years before the clinical onset of spondylolisthesis or spondylolysis; or
 - (e) for the lumbar spine only, having undergone posterior spinal decompression surgery, at the level of the involved vertebra, within the five years before the clinical onset of spondylolisthesis or spondylolysis; or

- (f) for degenerative lumbar spondylolisthesis only, having lumbar spondylosis affecting the vertebral facet joints, at the level of the involved vertebra, before the clinical onset of spondylolisthesis; or
- (g) having a destructive bone lesion, involving the affected vertebra, at the time of the clinical onset of spondylolisthesis or spondylolysis; or
- (h) having rheumatoid arthritis involving the affected vertebra at the time of the clinical onset of spondylolisthesis or spondylolysis; or
- (i) for degenerative spondylolisthesis only, being obese for the ten years before the clinical onset of spondylolisthesis; or
- (j) for persons less than 25 years of age with lumbar spondylolysis or lumbar spondylolytic spondylolisthesis only, engaging in activities involving:
 - (i) repetitive and forceful hyperextension, torsion or rotation against resistance of the lumbar spine; or
 - (ii) increased lordosis of the lumbar spine;
 for an average period of at least ten hours per week for the six months before the clinical worsening of spondylolisthesis or spondylolysis; or
- (k) for the lumbar spine only, having undergone posterior spinal decompression surgery, at the level of the involved vertebra, within the five years before the clinical worsening of spondylolisthesis or spondylolysis; or
- (l) having a destructive bone lesion, involving the affected vertebra, at the time of the clinical worsening of spondylolisthesis or spondylolysis; or
- (m) having rheumatoid arthritis involving the affected vertebra at the time of the clinical worsening of spondylolisthesis or spondylolysis; or
- (n) inability to obtain appropriate clinical management for spondylolisthesis or spondylolysis in the presence of the following:
 - (i) acute traumatic spondylolisthesis or spondylolysis;
 - (ii) neurological manifestations; or
 - (iii) severe progressive symptoms warranting surgical intervention.

Factors that apply only to material contribution or aggravation

7. Paragraphs **6(j) to 6(n)** apply only to material contribution to, or aggravation of, spondylolisthesis or spondylolysis where the person's spondylolisthesis or spondylolysis was suffered or contracted before or during (but not arising out of) the person's relevant service.

Inclusion of Statements of Principles

8. In this Statement of Principles if a relevant factor applies and that factor includes an injury or disease in respect of which there is a Statement of Principles then the factors in that last mentioned Statement of Principles apply in accordance with the terms of that Statement of Principles as in force from time to time.

Other definitions

9. For the purposes of this Statement of Principles:

"acute traumatic spondylolisthesis or spondylolysis" means spondylolisthesis or spondylolysis arising as the direct result of a severe, high energy trauma to the spine;

"being obese" means having a Body Mass Index (BMI) of 30 or greater.

The $BMI = W/H^2$ and where:

W is the person's weight in kilograms; and

H is the person's height in metres;

"death from spondylolisthesis or spondylolysis" in relation to a person includes death from a terminal event or condition that was contributed to by the person's spondylolisthesis or spondylolysis;

"degenerative lumbar spondylolisthesis" means forward displacement of a lumbar vertebra, in the presence of osteoarthritis of the facet joints formed by the involved vertebra and the subjacent one, and in the absence of spondylolysis of the involved vertebra;

"destructive bone lesion" means lytic or erosive lesion of the bone resulting from pathology such as benign and malignant tumours, tuberculosis or osteomyelitis;

"ICD-10-AM code" means a number assigned to a particular kind of injury or disease in The International Statistical Classification of Diseases and Related Health Problems, 10th Revision, Australian Modification (ICD-10-AM), Eighth Edition, effective date of 1 July 2013, copyrighted by the Independent Hospital Pricing Authority, and having ISBN 978-1-74128-213-9;

"posterior lumbar spinal fusion" means surgical procedure involving immobilisation of the posterior elements, particularly the spinous processes, of two or more lumbar vertebrae, by the use of bone grafting, in the absence of immobilisation of the lateral elements, particularly the transverse processes, of the same vertebrae. This definition specifically excludes posterolateral lumbar spinal fusion;

"posterior spinal decompression surgery" means a surgical procedure involving the removal of the posterior elements of the spine, such as laminectomy, laminotomy or facetectomy;

"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;

"spondylolytic spondylolisthesis" means spondylolisthesis which develops secondary to spondylolysis;

"terminal event" means the proximate or ultimate cause of death and includes:

- (a) pneumonia;
- (b) respiratory failure;
- (c) cardiac arrest;
- (d) circulatory failure; or
- (e) cessation of brain function.

Application

- 10.** This Instrument applies to all matters to which section 120A of the VEA or section 338 of the MRCA applies.

Date of effect

- 11.** This Instrument takes effect from 30 March 2015.

Dated this **twenty-seventh**

day of **February** 2015



The Common Seal of the)
Repatriation Medical Authority)
was affixed at the direction of:)

PROFESSOR NICHOLAS SAUNDERS AO
CHAIRPERSON