



Australian Government
Repatriation Medical Authority

Statement of Principles
concerning
HOOKWORM DISEASE
(Balance of Probabilities)
(No. 8 of 2017)

The Repatriation Medical Authority determines the following Statement of Principles under subsection 196B(3) of the *Veterans' Entitlements Act 1986*.

Dated 20 December 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 *hookworm disease (Balance of Probabilities)* (No. 8 of 2017).

2 Commencement

This instrument commences on 23 January 2017.

3 Authority

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

4 Revocation

The Statement of Principles concerning hookworm disease No. 65 of 2008 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 hookworm disease and death from hookworm disease.

Meaning of hookworm disease

- (2) For the purposes of this Statement of Principles, hookworm disease means an illness due to an infection with *Necator americanus*, *Ancylostoma duodenale*, *Ancylostoma ceylanicum* or *Ancylostoma caninum* hookworms. Symptoms and signs may arise at variable times following infection and include skin lesions, dry cough, wheezing, nausea and diarrhoea. Anaemia may also arise in the course of the illness.
- (3) While hookworm disease attracts ICD-10-AM code B76, in applying this Statement of Principles the meaning of hookworm disease 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 hookworm disease

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

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 hookworm disease and death from hookworm disease 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, hookworm disease or death from hookworm disease is connected with the circumstances of a person's relevant service:

- (1) ingesting or having cutaneous or mucosal contact with *Ancylostoma duodenale*, *Ancylostoma ceylanicum* or *Ancylostoma caninum* hookworm larvae within the six years before the clinical onset of hookworm disease;
- (2) having cutaneous or mucosal contact with *Necator americanus* hookworm larvae within the six years before the clinical onset of hookworm disease;
- (3) being in a tropical or subtropical region, where facilities for disposal of human waste are minimal and there is a high likelihood of the environment being contaminated with human faeces, within the six years before the clinical onset of hookworm disease;
- (4) living or working in warm and damp conditions, in the presence of material contaminated with human faeces such as may occur in mines or tunnels, within the six years before the clinical onset of hookworm disease;
- (5) inability to obtain appropriate clinical management for hookworm 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 factor set out in subsection 9(5) applies only to material contribution to, or aggravation of, hookworm disease where the person's hookworm 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(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:

hookworm disease—see subsection 7(2).

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

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.

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*.