



Statement of Principles concerning Guillain-Barre syndrome (Balance of Probabilities) (No. 24 of 2018)

made under subsection 196B(3) of the

Veterans' Entitlements Act 1986

Compilation No. 1

Compilation date: 24 May 2021

Includes amendments up to: Amendment Statement of Principles concerning Guillain-Barre syndrome (Balance of Probabilities) (No. 58 of 2021) (F2021L00484)

The day of commencement of this Amendment Statement of Principles concerning Guillain-Barre syndrome is 24 May 2021.

Prepared by the Repatriation Medical Authority Secretariat, Brisbane

About this compilation

This compilation

This is a compilation of the *Statement of Principles concerning Guillain-Barre syndrome (Balance of Probabilities)* (No. 24 of 2018) that shows the text of the law as amended and in force on 24 May 2021.

The notes at the end of this compilation (the *endnotes*) include information about amending laws and the amendment history of provisions of the compiled law.

Uncommenced amendments

The effect of uncommenced amendments is not shown in the text of the compiled law. Any uncommenced amendments affecting the law are accessible on the Legislation Register (www.legislation.gov.au). The details of amendments made up to, but not commenced at, the compilation date are underlined in the endnotes. For more information on any uncommenced amendments, see the series page on the Legislation Register for the compiled law.

Application, saving and transitional provisions for provisions and amendments

If the operation of a provision or amendment of the compiled law is affected by an application, saving or transitional provision that is not included in this compilation, details are included in the endnotes.

Modifications

If the compiled law is modified by another law, the compiled law operates as modified but the modification does not amend the text of the law. Accordingly, this compilation does not show the text of the compiled law as modified. For more information on any modifications, see the series page on the Legislation Register for the compiled law.

Self-repealing provisions

If a provision of the compiled law has been repealed in accordance with a provision of the law, details are included in the endnotes.



Australian Government
Repatriation Medical Authority

Statement of Principles
concerning
GUILLAIN-BARRE SYNDROME
(Balance of Probabilities)
(No. 24 of 2018)

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

Dated 2 March 2018

Statement of Principles concerning
Guillain-Barre Syndrome (Balance of Probabilities) (No. 24 of 2018)
Veterans' Entitlements Act 1986

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1 Name

This is the Statement of Principles concerning *Guillain-Barre syndrome (Balance of Probabilities)* (No. 24 of 2018).

3 Authority

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

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 Guillain-Barre syndrome and death from Guillain-Barre syndrome.

*Meaning of **Guillain-Barre syndrome***

- (2) For the purposes of this Statement of Principles, Guillain-Barre syndrome:
- (a) means an acute or subacute immune-mediated disorder of the peripheral nervous system producing symptoms and signs of impaired motor, sensory or autonomic functioning; and
 - (b) includes:
 - (i) acute inflammatory demyelinating polyneuropathy;
 - (ii) acute motor axonal neuropathy;
 - (iii) acute motor sensory axonal neuropathy;
 - (iv) Miller Fisher syndrome; and
 - (v) other variant forms of Guillain-Barre syndrome; and
 - (c) excludes chronic inflammatory demyelinating polyneuropathy.

Note 1: The most common variant of Guillain-Barre syndrome is acute inflammatory demyelinating polyneuropathy, which is characterised by rapidly progressive symmetrical limb weakness, loss of tendon reflexes, mild sensory signs and variable autonomic dysfunction.

Note 2: The diagnosis of Guillain-Barre syndrome is normally confirmed by electrodiagnostic testing or elevated protein concentration in cerebrospinal fluid without an elevated white cell count (cytoalbuminologic dissociation).

- (3) While Guillain-Barre syndrome attracts ICD-10-AM code G61.0, in applying this Statement of Principles the meaning of Guillain-Barre syndrome 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), Tenth Edition, effective date of 1 July 2017, copyrighted by the Independent Hospital Pricing Authority, ISBN 978-1-76007-296-4.

*Death from **Guillain-Barre syndrome***

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

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 Guillain-Barre syndrome and death from Guillain-Barre syndrome can be related to relevant service rendered by veterans or members of the Forces under the VEA, or members under the MRCA.

Note: **MRCA**, **relevant service** and **VEA** are 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, Guillain-Barre syndrome or death from Guillain-Barre syndrome is connected with the circumstances of a person's relevant service:

- (1) having an infection from the specified list of infections, where that infection has been acquired within the two months before the clinical onset of Guillain-Barre syndrome;

Note: **specified list of infections** is defined in the Schedule 1 - Dictionary.

- (2) being infected with human immunodeficiency virus at the time of the clinical onset of Guillain-Barre syndrome;

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- (3) having a clinically apparent herpes zoster infection in the two months before the clinical onset of Guillain-Barre syndrome;
 - (4) having a symptomatic gastrointestinal or respiratory tract infection in the two months before the clinical onset of Guillain-Barre syndrome;
 - (5) receiving an influenza vaccine or a nerve tissue derived rabies vaccine within the two months before the clinical onset of Guillain-Barre syndrome;
 - (6) having a malignant neoplasm, other than non-melanotic malignant neoplasm of the skin, at the time of the clinical onset of Guillain-Barre syndrome;
 - (7) having a solid organ or stem cell transplant before the clinical onset of Guillain-Barre syndrome;
 - (8) being treated with a tumour necrosis factor- α inhibitor in the two months before the clinical onset of Guillain-Barre syndrome;
 - (9) inability to obtain appropriate clinical management for Guillain-Barre syndrome.

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(9) applies only to material contribution to, or aggravation of, Guillain-Barre syndrome where the person's Guillain-Barre syndrome 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:

Guillain-Barre syndrome—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.

specified list of infections means:

- (a) *Campylobacter jejuni*;
- (b) Chikungunya virus;
- (c) cytomegalovirus;
- (d) dengue virus;
- (e) Epstein-Barr virus;
- (f) hepatitis A virus;
- (g) hepatitis E virus;
- (h) influenza virus;
- (i) Japanese encephalitis virus;
- (j) *Mycoplasma pneumoniae*;
- (k) *Orientia tsutsugamushi* (scrub typhus);
- (ka) severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2);
- (l) West Nile virus; or
- (m) Zika virus.

Note: SARS-CoV-2 is the virus which causes coronavirus disease 2019 (COVID-19).

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*.

Endnotes

Endnote 1—About the endnotes

The endnotes provide information about this compilation and the compiled law.

The following endnotes are included in every compilation:

Endnote 1—About the endnotes

Endnote 2—Abbreviation key

Endnote 3—Legislation history

Endnote 4—Amendment history

Abbreviation key—Endnote 2

The abbreviation key sets out abbreviations that may be used in the endnotes.

Legislation history and amendment history—Endnotes 3 and 4

Amending laws are annotated in the legislation history and amendment history.

The legislation history in endnote 3 provides information about each law that has amended (or will amend) the compiled law. The information includes commencement details for amending laws and details of any application, saving or transitional provisions that are not included in this compilation.

The amendment history in endnote 4 provides information about amendments at the provision (generally section or equivalent) level. It also includes information about any provision of the compiled law that has been repealed in accordance with a provision of the law.

Misdescribed amendments

A misdescribed amendment is an amendment that does not accurately describe the amendment to be made. If, despite the misdescription, the amendment can be given effect as intended, the amendment is incorporated into the compiled law and the abbreviation “(md)” added to the details of the amendment included in the amendment history.

If a misdescribed amendment cannot be given effect as intended, the abbreviation “(md not incorp)” is added to the details of the amendment included in the amendment history.

Endnote 2—Abbreviation key

ad = added or inserted	o = order(s)
am = amended	Ord = Ordinance
amdt = amendment	orig = original
c = clause(s)	par = paragraph(s)/subparagraph(s) /sub-subparagraph(s)
C[x] = Compilation No. x	pres = present
Ch = Chapter(s)	prev = previous
def = definition(s)	(prev...) = previously
Dict = Dictionary	Pt = Part(s)
disallowed = disallowed by Parliament	r = regulation(s)/rule(s)
Div = Division(s)	
exp = expires/expired or ceases/ceased to have effect	reloc = relocated
F = Federal Register of Legislation	renum = renumbered
gaz = gazette	rep = repealed
LA = <i>Legislation Act 2003</i>	rs = repealed and substituted
LIA = <i>Legislative Instruments Act 2003</i>	s = section(s)/subsection(s)
(md) = misdescribed amendment can be given effect	Sch = Schedule(s)
(md not incorp) = misdescribed amendment cannot be given effect	Sdiv = Subdivision(s)
mod = modified/modification	SLI = Select Legislative Instrument
No. = Number(s)	SR = Statutory Rules
	Sub-Ch = Sub-Chapter(s)
	SubPt = Subpart(s)
	<u>underlining</u> = whole or part not commenced or to be commenced

Endnote 3—Legislation history

Endnote 3—Legislation history

Name	Registration	Commencement	Application, saving and transitional provisions
<i>Statement of Principles concerning Guillain-Barre syndrome (Balance of Probabilities) (No. 24 of 2018)</i>	5 March 2018 F2018L00189	2 April 2018	
<i>Amendment Statement of Principles concerning Guillain-Barre syndrome (Balance of Probabilities) (No. 58 of 2021)</i>	23 April 2021 F2021L00484	24 May 2021	

Endnote 4—Amendment history

Endnote 4—Amendment history

Provision affected	How affected
Section 2.....	rep LA s 48D
Section 4.....	rep LA s 48C
Subsection 9(1).....	am No. 58 of 2021
Schedule 1 – Dictionary – specified list of infections.....	am No. 58 of 2021