



**Australian Government**  
**Repatriation Medical Authority**

**Statement of Principles**  
**concerning**  
**UMBILICAL HERNIA**  
**(Reasonable Hypothesis)**  
**(No. 93 of 2016)**

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

Dated 28 October 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 *umbilical hernia (Reasonable Hypothesis)* (No. 93 of 2016).

**2 Commencement**

This instrument commences on 28 November 2016.

**3 Authority**

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

**4 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.

**5 Definitions**

The terms defined in the Schedule 1 - Dictionary have the meaning given when used in this instrument.

**6 Kind of injury, disease or death to which this Statement of Principles relates**

- (1) This Statement of Principles is about umbilical hernia and death from umbilical hernia.

*Meaning of **umbilical hernia***

- (2) For the purposes of this Statement of Principles, umbilical hernia means:
- (a) a protrusion of intra-abdominal tissue through an incompletely closed or weakened umbilical ring; and
  - (b) includes peri-umbilical and para-umbilical hernias; and
  - (c) excludes incisional hernia located at the umbilicus.
- (3) While umbilical hernia attracts ICD-10-AM code K42.0, K42.1 or K42.9, in applying this Statement of Principles the meaning of umbilical hernia 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 **umbilical hernia***

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

Note: *terminal event* is defined in the Schedule 1 – Dictionary.

## **7 Basis for determining the factors**

The Repatriation Medical Authority is of the view that there is sound medical-scientific evidence that indicates that umbilical hernia and death from umbilical hernia 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.

## **8 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 umbilical hernia or death from umbilical hernia with the circumstances of a person's relevant service:

- (1) being obese at the time of the clinical onset of umbilical hernia;  
Note: *being obese* is defined in the Schedule 1 - Dictionary.
- (2) having ascites, chronic ambulatory or automated peritoneal dialysis, extensive intra-abdominal neoplastic disease or mass, or being pregnant at the time of the clinical onset of umbilical hernia;
- (3) being treated with antiretroviral therapy for at least six months within the two years before the clinical onset of umbilical hernia;
- (4) being obese at the time of the clinical worsening of umbilical hernia;  
Note: *being obese* is defined in the Schedule 1 - Dictionary.
- (5) having increased intra-abdominal pressure as specified at the time of the clinical worsening of umbilical hernia;  
Note: *increased intra-abdominal pressure as specified* is defined in the Schedule 1 - Dictionary.
- (6) being treated with antiretroviral therapy for at least six months within the two years before the clinical worsening of umbilical hernia;
- (7) inability to obtain appropriate clinical management for umbilical hernia.

**9 Relationship to service**

- (1) The existence in a person of any factor referred to in section 8, must be related to the relevant service rendered by the person.
- (2) The factors set out in subsections 8(4) to 8(7) apply only to material contribution to, or aggravation of, umbilical hernia where the person's umbilical hernia was suffered or contracted before or during (but did not arise out of) the person's relevant service.

**10 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 8 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 5

## 1 Definitions

In this instrument:

***being obese*** means having a Body Mass Index (BMI) of 30 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.

***increased intra-abdominal pressure as specified*** means acute or chronic (intermittent or continuous) elevation of pressure within the abdominal cavity due to any one of the following:

- (a) anti-G straining manoeuvre;
- (b) ascites;
- (c) chronic ambulatory or automated peritoneal dialysis;
- (d) extensive intra-abdominal neoplastic disease or mass;
- (e) gastrointestinal endoscopy;
- (f) lifting heavy weights;
- (g) physical trauma to the abdomen involving a direct blow to the abdomen;
- (h) pneumoperitoneum;
- (i) pregnancy;
- (j) significant coughing;
- (k) significant sneezing;
- (l) significant vomiting;
- (m) straining at micturition due to bladder outlet or urethral obstruction; or
- (n) straining at stool due to constipation or diarrhoea.

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

***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.

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.

***umbilical hernia***—see subsection 6(2).

***VEA*** means the *Veterans' Entitlements Act 1986*.