



Australian Government
Repatriation Medical Authority

Statement of Principles concerning

CHRONIC GASTRITIS AND CHRONIC GASTROPATHY

No. 25 of 2013

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 chronic gastritis and chronic gastropathy No. 25 of 2013.

Determination

2. The Repatriation Medical Authority under subsection **196B(2)** and **(8)** of the *Veterans' Entitlements Act 1986* (the VEA):
 - (a) revokes Instrument No. 75 of 2001 concerning chronic gastritis; and
 - (b) determines in its place this Statement of Principles.

Kind of injury, disease or death

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

"chronic gastritis" means inflammation of the gastric mucosa with histologically demonstrated chronic inflammatory cell infiltrate. This inflammation may be associated with a range of gastrointestinal symptoms including epigastric pain, nausea, bloating and burning; and

"chronic gastropathy" means histologically demonstrated gastric epithelial cell damage and regeneration with minimal or no associated inflammation, accompanied by epigastric pain, nausea, bloating or burning for at least three months.

These definitions exclude acute gastritis and acute gastropathy, autoimmune gastritis, eosinophilic gastritis, chronic non-infectious granulomatous gastritis, gastric antral vascular ectasia, portal hypertensive gastropathy, ischaemic gastritis, uraemic gastritis and lymphocytic gastritis.

Basis for determining the factors

4. The Repatriation Medical Authority is of the view that there is sound medical-scientific evidence that indicates that **chronic gastritis or chronic gastropathy** and **death from chronic gastritis or chronic gastropathy** 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 **chronic gastritis or chronic gastropathy** or **death from chronic gastritis or chronic gastropathy** with the circumstances of a person's relevant service is:
 - (a) for chronic gastritis only,
 - (i) having a *Helicobacter pylori* infection of the gastric mucosa at the time of the clinical onset of chronic gastritis; or
 - (ii) having *Helicobacter heilmannii* infection of the gastric mucosa at the time of the clinical onset of chronic gastritis; or
 - (iii) having a specified infection of the gastric mucosa at the time of the clinical onset of chronic gastritis; or
 - (iv) being in an immunocompromised state at the time of the clinical onset of chronic gastritis; or
 - (b) for chronic gastropathy only,
 - (i) having reflux of bile acids into the stomach at the time of the clinical onset of chronic gastropathy; or
 - (ii) being treated with a non-topical nonsteroidal anti-inflammatory drug, including aspirin, at least every other day during a continuous period of at least two weeks, within the one month before the clinical onset of chronic gastropathy; or

- (iii) being treated with a drug or a drug from a class of drugs from Specified List 1 for the one month before the clinical onset of chronic gastropathy; or
- (iv) consuming an average of at least 350 grams of alcohol per week for at least the two years before the clinical onset of chronic gastropathy; or
- (v) undergoing a course of therapeutic radiation for cancer, where the stomach was in the field of radiation, within the one year before the clinical onset of chronic gastropathy; or
- (vi) having received a cumulative equivalent dose of at least ten sieverts of ionising radiation to the stomach within the one year before the clinical onset of chronic gastropathy; or
- (vii) having received ⁹⁰Yttrium microspheres as therapy for primary and metastatic liver tumours, within the one year before the clinical onset of chronic gastropathy; or
- (c) for chronic gastritis only,
 - (i) having a *Helicobacter pylori* infection of the gastric mucosa at the time of the clinical worsening of chronic gastritis; or
 - (ii) having *Helicobacter heilmannii* infection of the gastric mucosa at the time of the clinical worsening of chronic gastritis; or
 - (iii) having a specified infection of the gastric mucosa at the time of the clinical worsening of chronic gastritis; or
 - (iv) being in an immunocompromised state at the time of the clinical worsening of chronic gastritis; or
- (d) having reflux of bile acids into the stomach at the time of the clinical worsening of chronic gastritis or chronic gastropathy; or
- (e) being treated with a non-topical nonsteroidal anti-inflammatory drug, including aspirin, at least every other day during a continuous period of at least eight days, within the one month before the clinical worsening of chronic gastritis or chronic gastropathy; or
- (f) being treated with a drug or a drug from a class of drugs from Specified List 2 at the time of the clinical worsening of chronic gastritis or chronic gastropathy; or
- (g) consuming an average of at least 350 grams of alcohol per week for at least the six months before the clinical worsening of chronic gastritis or chronic gastropathy; or
- (h) undergoing a course of therapeutic radiation for cancer, where the stomach was in the field of radiation, within the one year before the clinical worsening of chronic gastritis or chronic gastropathy; or
- (i) having received a cumulative equivalent dose of at least ten sieverts of ionising radiation to the stomach within the one year before the clinical worsening of chronic gastritis or chronic gastropathy; or

- (j) having received ⁹⁰Yttrium microspheres as therapy for primary and metastatic liver tumours, within the one year before the clinical worsening of chronic gastritis or chronic gastropathy; or
- (k) inability to obtain appropriate clinical management for chronic gastritis or chronic gastropathy.

Factors that apply only to material contribution or aggravation

- 7. Paragraphs **6(c) to 6(k)** apply only to material contribution to, or aggravation of, chronic gastritis or chronic gastropathy where the person's chronic gastritis or chronic gastropathy 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:

"a drug or a drug from a class of drugs from Specified List 1" means one of the following:

- (a) bisphosphonates;
- (b) chemotherapeutic agents delivered by hepatic arterial infusion;
- (c) colchicine;
- (d) dabigatran etexilate;
- (e) doxycycline;
- (f) highly active antiretroviral therapy;
- (g) non-topical corticosteroids;
- (h) oral iron supplements;
- (i) slow-release potassium chloride; or
- (j) sodium polystyrene sulfonate;

"a drug or a drug from a class of drugs from Specified List 2" means one of the following:

- (a) anticoagulants;
- (b) bisphosphonates;
- (c) chemotherapeutic agents delivered by hepatic arterial infusion;
- (d) colchicine;
- (e) doxycycline;
- (f) highly active antiretroviral therapy;
- (g) non-topical corticosteroids;
- (h) oral iron supplements;
- (i) slow-release potassium chloride; or
- (j) sodium polystyrene sulfonate;

"a specified infection" means:

- (a) anisakiasis;
- (b) *Capillaria* infection;
- (c) cryptosporidiosis;
- (d) cytomegalovirus infection;
- (e) Epstein-Barr virus infection;
- (f) herpes simplex virus infection;
- (g) hepatitis C virus infection;
- (h) human herpesvirus-6 infection;
- (i) mycobacteriosis;
- (j) strongyloidiasis; or
- (k) syphilis;

"an immunocompromised state" means a state where the immune response has been substantially diminished by administration of immunosuppressive drugs, ionising radiation, malnutrition, a malignant disease process or certain types of infection;

"alcohol" is measured by the alcohol consumption calculations utilising the Australian Standard of 10 grams of alcohol per standard alcoholic drink;

"cumulative equivalent dose" means the total dose of ionising radiation received by the particular organ or tissue. The formula used to calculate the cumulative equivalent dose allows doses from multiple types of ionising radiation to be combined, by accounting for their differing biological effect. The unit of equivalent dose is the sievert. For the purposes of this Statement of Principles, the calculation of cumulative equivalent dose excludes doses received from normal background radiation, but includes therapeutic radiation, diagnostic radiation, cosmic radiation at high altitude, radiation from occupation-related sources and radiation from nuclear explosions or accidents;

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

"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;

"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 8 May 2013.

Dated this *twenty-ninth* day of *April* 2013

The Common Seal of the)
Repatriation Medical Authority)
was affixed to this instrument)
in the presence of:)

PROFESSOR NICHOLAS SAUNDERS AO
CHAIRPERSON