



Australian Government
Repatriation Medical Authority

Statement of Principles
concerning
COLORECTAL ADENOMA
No. 35 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 colorectal adenoma No. 35 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. 62 of 2002 concerning colorectal adenoma; and
 - (b) determines in its place this Statement of Principles.

Kind of injury, disease or death

3.
 - (a) This Statement of Principles is about **colorectal adenoma** and **death from colorectal adenoma**.
 - (b) For the purposes of this Statement of Principles, "**colorectal adenoma**" means a benign neoplasm arising from the epithelial cells of the colorectum. Anatomically the colorectum is defined as extending from the caecum, including the ileocaecal junction, to the junction with the anal canal. This definition of colorectal adenoma includes colorectal adenomatous polyp and serrated adenoma, but excludes benign neoplasms of the anus and anal canal, familial adenomatous polyposis, non-neoplastic polyps of the large intestine and nonepithelial neoplasms of the large intestine.

- (c) Colorectal adenoma attracts ICD-10-AM code D12.0-D12.5, D12.7 or D12.8.
- (d) In the application of this Statement of Principles, the definition of "**colorectal adenoma**" 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 **colorectal adenoma** and **death from colorectal adenoma** 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 **colorectal adenoma** or **death from colorectal adenoma** with the circumstances of a person's relevant service is:
 - (a) smoking at least ten pack-years of cigarettes, or the equivalent thereof in other tobacco products, before the clinical onset of colorectal adenoma, and smoking commenced at least five years before the clinical onset of colorectal adenoma; or
 - (b) drinking at least 250 kilograms of alcohol before the clinical onset of colorectal adenoma; or
 - (c) an inability to undertake any physical activity greater than three METs for at least ten consecutive years within the 30 years before the clinical onset of colorectal adenoma; or
 - (d) being obese for at least five years within the 30 years before the clinical onset of colorectal adenoma; or
 - (e) consuming an average daily intake of at least 100 grams per day of red meat, for at least five years within the ten years before the clinical onset of colorectal adenoma; or
 - (f) consuming an average daily intake of at least 25 grams per day of processed meat product, for at least five years within the ten years before the clinical onset of colorectal adenoma; or
 - (g) an inability to consume an average daily intake of 20 grams of fibre in food for a period of at least five consecutive years within the ten years before the clinical onset of colorectal adenoma; or
 - (h) an inability to consume an average daily intake of 150 micrograms of folate in food for a period of at least five consecutive years within the ten years before the clinical onset of colorectal adenoma; or

- (i) an inability to consume an average daily intake of 100 millilitres of dairy milk for at least five consecutive years within the ten years before the clinical onset of colorectal adenoma; or
- (j) having ulcerative colitis for at least one year before the clinical onset of colorectal adenoma; or
- (k) having Crohn's disease of the colorectum for at least one year before the clinical onset of colorectal adenoma; or
- (l) having diabetes mellitus for at least five years before the clinical onset of colorectal adenoma; or
- (m) for adenoma of the colon only, having acromegaly before the clinical onset of colorectal adenoma; or
- (n) inability to obtain appropriate clinical management for colorectal adenoma.

Factors that apply only to material contribution or aggravation

- 7. Paragraph 6(n) applies only to material contribution to, or aggravation of, colorectal adenoma where the person's colorectal adenoma 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:

"adenoma of the colon" means a benign epithelial neoplasm of the colon. Anatomically the colon is defined as extending from the caecum, including the ileocaecal junction, to the sigmoid colon, not including the rectosigmoid junction;

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

"being obese" means an increase in body weight by way of fat accumulation which results in a Body Mass Index (BMI) of thirty 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 colorectal adenoma" in relation to a person includes death from a terminal event or condition that was contributed to by the person's colorectal adenoma;

"fibre in food" means complex carbohydrates of plant origin consumed as vegetables, fruits or cereals which resist digestion by gastrointestinal enzymes in the gastrointestinal tract, and include plant cell walls and non-starch polysaccharides from sources other than cell walls, including cellulose and pectins;

"folate in food" means a B group vitamin found in natural foods, which consists of a family of monoglutamates or polyglutamates of pteric acid that is used in DNA methylation, synthesis and repair;

"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;

"MET" means a unit of measurement of the level of physical exertion. 1 MET = 3.5 ml of oxygen/kg of body weight per minute, or 1.0 kcal/kg of body weight per hour, or resting metabolic rate;

"pack-years of cigarettes, or the equivalent thereof in other tobacco products" means a calculation of consumption where one pack-year of cigarettes equals twenty tailor-made cigarettes per day for a period of one calendar year, or 7300 cigarettes. One tailor-made cigarette approximates one gram of tobacco or one gram of cigar or pipe tobacco by weight. One pack-year of tailor-made cigarettes equates to 7.3 kilograms of smoking tobacco by weight. Tobacco products means either cigarettes, pipe tobacco or cigars, smoked alone or in any combination;

"processed meat product" means preserved or cured meats, including ham, frankfurters, salami and bacon;

"red meat" means beef, veal, pork, lamb or mutton;

"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 3 July 2013.

Dated this *twenty-first* day of *June* 2013

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

PROFESSOR NICHOLAS SAUNDERS AO
CHAIRPERSON