

Statement of Principles concerning BRUXISM (Balance of Probabilities) (No. 92 of 2016)

The Repatriation Medical Authority determines the following Statement of Principles under subsection 196B(3) 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:

Professor Nicholas Saunders AO

Chairperson

Contents

1	Name	3
2	Commencement	3
3	Authority	3
4	Application	3
5	Definitions	3
6	Kind of injury, disease or death to which this Statement of Principles relates	3
7	Basis for determining the factors	3
8	Factors that must exist	4
9	Relationship to service	5
10	Factors referring to an injury or disease covered by another Statement of Principles	5
Schedule	1 - Dictionary	6
1	Definitions	6

1 Name

This is the Statement of Principles concerning *bruxism (Balance of Probabilities)* (No. 92 of 2016).

2 Commencement

This instrument commences on 28 November 2016

3 Authority

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

4 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.

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 bruxism and death from bruxism.

Meaning of bruxism

(2) For the purposes of this Statement of Principles, bruxism means a disorder of jaw muscle activity characterised by repetitive, involuntary clenching or grinding of the teeth or by bracing or thrusting of the mandible, occurring during wakefulness or sleep.

Death from bruxism

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

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

7 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 bruxism and death from bruxism 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.

8 Factors that must exist

At least one of the following factors must exist before it can be said that, on the balance of probabilities, bruxism or death from bruxism is connected with the circumstances of a person's relevant service:

- (1) experiencing a moderate to severe traumatic brain injury within the 30 days before the clinical onset of bruxism;
- (2) having a clinically significant neurological condition as specified at the time of the clinical onset of bruxism;
 - Note: *clinically significant neurological condition as specified* is defined in the Schedule 1 Dictionary.
- (3) taking a drug or a drug from a class of drugs from the specified list of drugs, at the time of the clinical onset of bruxism;
 - Note: *specified list of drugs* is defined in the Schedule 1 Dictionary.
- (4) smoking at least one pack-year of cigarettes, or the equivalent thereof in other tobacco products, before the clinical onset of bruxism, and where smoking has ceased, the clinical onset of bruxism has occurred within one year of cessation;
 - Note: *pack-year of cigarettes, or the equivalent thereof in other tobacco products* is defined in the Schedule 1 Dictionary.
- (5) having gastro-oesophageal reflux disease at the time of the clinical onset of bruxism;
- (6) experiencing a moderate to severe traumatic brain injury within the 30 days before the clinical worsening of bruxism;
- (7) having a clinically significant neurological condition as specified at the time of the clinical worsening of bruxism;
 - Note: *clinically significant neurological condition as specified* is defined in the Schedule 1 Dictionary.
- (8) taking a drug or a drug from a class of drugs from the specified list of drugs, at the time of the clinical worsening of bruxism;
 - Note: specified list of drugs is defined in the Schedule 1 Dictionary.
- (9) smoking at least one pack-year of cigarettes, or the equivalent thereof in other tobacco products, before the clinical worsening of bruxism, and where smoking has ceased, the clinical worsening of bruxism has occurred within one year of cessation;
 - Note: *pack-year of cigarettes, or the equivalent thereof in other tobacco products* is defined in the Schedule 1 Dictionary.
- (10) having gastro-oesophageal reflux disease at the time of the clinical worsening of bruxism;
- (11) inability to obtain appropriate clinical management for bruxism.

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(6) to 8(11) apply only to material contribution to, or aggravation of, bruxism where the person's bruxism 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(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 5

1 Definitions

In this instrument:

bruxism—see subsection 6(2).

clinically significant neurological condition as specified means one of the following conditions:

- (a) craniocervical dystonia;
- (b) Huntington's chorea; or
- (c) Parkinson's disease or secondary parkinsonism.

Note: craniocervical dystonia is also defined in the Schedule 1 - Dictionary.

craniocervical dystonia means cervical, facial, cranial or oromandibular dystonia, including spasmodic torticollis.

MRCA means the Military Rehabilitation and Compensation Act 2004.

pack-year of cigarettes, or the equivalent thereof in other tobacco products means a calculation of consumption where one pack-year of cigarettes equals 20 tailor-made cigarettes per day for a period of one calendar year, or 7 300 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 mean cigarettes, pipe tobacco or cigars, smoked alone or in any combination.

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 drugs means:

- (a) amphetamines and amphetamine-type substances including methamphetamine, 3,4-methylenedioxymethamphetamine (ecstasy), dexamphetamine (Dexedrine) and methylphenidate (Ritalin);
- (b) antipsychotics;
- (c) levodopa;
- (d) selective serotonin reuptake inhibitors;
- (e) serotonin and noradrenaline (norepinephrine) reuptake inhibitors; or
- (f) tricyclic antidepressants.

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.