

Statement of Principles
concerning

DENTAL MALOCCLUSION

No. 17 of 2011

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 dental malocclusion No. 17 of 2011.

Determination

2. The Repatriation Medical Authority under subsection **196B(2)** and **(8)** of the *Veterans' Entitlements Act 1986* (the VEA):
 - (a) revokes Instrument No. 372 of 1995 concerning dental malocclusion; and
 - (b) determines in its place this Statement of Principles.

Kind of injury, disease or death

3.
 - (a) This Statement of Principles is about **dental malocclusion** and **death from dental malocclusion**.
 - (b) For the purposes of this Statement of Principles, "**dental malocclusion**" means acquired malposition of the maxillary and mandibular teeth, resulting in abnormal contact which produces symptoms that interfere with mastication.
 - (c) Dental malocclusion attracts ICD-10-AM code K07.2 or K07.4.
 - (d) In the application of this Statement of Principles, the definition of "**dental malocclusion**" 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 **dental malocclusion** and **death from dental malocclusion** 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 **dental malocclusion** or **death from dental malocclusion** with the circumstances of a person's relevant service is:
 - (a) having maxillofacial trauma before the clinical onset of dental malocclusion; or
 - (b) having loss of teeth, resulting in the presence of at least one unopposed tooth with drifting, rotation or over-eruption of the tooth opposing the site of tooth loss, for at least the two years before the clinical onset of dental malocclusion; or
 - (c) having a maxillofacial disease process at the time of the clinical onset of dental malocclusion; or
 - (d) having a peripheral odontogenic fibroma or a peripheral ossifying fibroma adjacent to the affected tooth or teeth at the time of the clinical onset of dental malocclusion; or
 - (e) using a mandibular repositioning appliance for treatment of snoring or obstructive sleep apnoea for at least five hours per night, on at least five days per week, for at least the four months before the clinical onset of dental malocclusion; or
 - (f) having maxillofacial trauma before the clinical worsening of dental malocclusion; or
 - (g) having loss of teeth, resulting in the presence of at least one unopposed tooth with drifting, rotation or over-eruption of the tooth opposing the site of tooth loss, for at least the two years before the clinical worsening of dental malocclusion; or
 - (h) having a maxillofacial disease process at the time of the clinical worsening of dental malocclusion; or

- (i) having a peripheral odontogenic fibroma or a peripheral ossifying fibroma adjacent to the affected tooth or teeth at the time of the clinical worsening of dental malocclusion; or
- (j) using a mandibular repositioning appliance for treatment of snoring or obstructive sleep apnoea for at least five hours per night, on at least five days per week, for at least the four months before the clinical worsening of dental malocclusion; or
- (k) inability to obtain appropriate clinical management for dental malocclusion.

Factors that apply only to material contribution or aggravation

7. Paragraphs **6(f) to 6(k)** apply only to material contribution to, or aggravation of, dental malocclusion where the person's dental malocclusion 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 mandibular repositioning appliance" means an oral device that splints the upper airway open mechanically by anterior displacement of the mandible and other oropharyngeal structures;

"a maxillofacial disease process" means any disease process causing distortion of the maxilla, mandible or the temporomandibular joint leading to displacement of teeth, including a space-occupying lesion within the temporomandibular joint space or within the bones of the jaw, infiltration by primary or secondary malignancy, central bony pathology of the jaws, osteoarthritis, Paget's disease of bone or tuberculosis;

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

"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),

Seventh Edition, effective date of 1 July 2010, copyrighted by the National Centre for Classification in Health, Sydney, NSW, and having ISBN 978 1 74210 154 5;

"maxillofacial trauma" means:

- (a) an injury resulting in distortion of the temporomandibular joint or fracture of the maxilla or mandible; or
- (b) osteotomy or reconstructive surgery involving the maxilla or mandible;

"peripheral odontogenic fibroma" means a gingival mass of vascularised fibrous connective tissue with strands of odontogenic epithelium;

"peripheral ossifying fibroma" means a gingival fibroma consisting of cellular connective tissue with focal areas of calcification or ossification;

"relevant service" means:

- (a) operational service under the VEA;
- (b) peacekeeping service under the VEA;
- (c) hazardous service under the VEA;
- (d) warlike service under the MRCA; or
- (e) 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 30 March 2011.

Dated this *Seventeenth* day of *March* 2011

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

KEN DONALD
CHAIRPERSON