

Determination
of
Statement of Principles
concerning
PRURITUS ANI

ICD CODE: 698.0

Veterans' Entitlements Act 1986

1. This Statement of Principles is determined by the Repatriation Medical Authority under subsection **196B(2)** of the *Veterans' Entitlements Act 1986* (the Act).

Kind of injury, disease or death

2. (a) This Statement of Principles is about **pruritus ani** and **death from pruritus ani**.

(b) For the purposes of this Statement of Principles, "**pruritus ani**" means a chronic unpleasant cutaneous sensation that provokes the desire to rub or scratch the perianal skin to obtain relief, attracting ICD code 698.0.

Basis for determining the factors

3. The Repatriation Medical Authority is of the view that there is sound medical-scientific evidence that indicates that **pruritus ani** can be related to relevant service rendered by veterans, members of Peacekeeping Forces, or members of the Forces.

Factors that must be related to service

4. Subject to clause 6, the factors set out in at least one of the paragraphs in clause 5 must be related to any relevant service rendered by the person.

Factors

5. The factors that must as a minimum exist before it can be said that a reasonable hypothesis has been raised connecting **pruritus ani** or **death from pruritus ani** with the circumstances of a person's relevant service are:
- (a) inability to maintain adequate anal hygiene, daily, over the 30 days immediately before the clinical onset of pruritus ani; or
 - (b) suffering from episodes of diarrhoea, daily, over the seven days immediately before the time of the clinical onset of pruritus ani; or
 - (c) suffering from a colorectal or anal condition from the specified list of colorectal and anal conditions at the time of the clinical onset of pruritus ani; or
 - (d) suffering from a local perianal or anal infection or infestation from the specified list of infections and infestations at the time of the clinical onset of pruritus ani; or
 - (e) suffering from pathological vaginal discharge at the time of the clinical onset of pruritus ani; or
 - (f) suffering from a dermatological disease from the specified list at the time of the clinical onset of pruritus ani; or
 - (g) undergoing a course of therapeutic radiation to the perianal area within the 30 days immediately before the clinical onset of pruritus ani; or
 - (h) applying high potency topical corticosteroid-containing preparations and experiencing steroid related atrophy of the perianal skin, in the 30 days immediately before the clinical onset of pruritus ani; or
 - (j) being systemically treated with water-soluble corticosteroid phosphates within the 24 hours immediately before the clinical onset of pruritus ani; or
 - (k) being systemically treated with nicosamide, clioquinol or mineral oil within the 72 hours immediately before the clinical onset of pruritus ani; or
 - (m) inability to maintain adequate anal hygiene, daily, over the 30 days immediately before the clinical worsening of pruritus ani; or

- (n) suffering from a colorectal or anal condition from the specified list of colorectal and anal conditions at the time of the clinical worsening of pruritus ani; or
- (o) suffering from a local perianal or anal infection or infestation from the specified list of infections and infestations at the time of the clinical worsening of pruritus ani; or
- (p) suffering from pathological vaginal discharge at the time of the clinical worsening of pruritus ani; or
- (q) suffering from a dermatological disease from the specified list at the time of the clinical worsening of pruritus ani; or
- (r) undergoing a course of therapeutic radiation to the perianal area within the 30 days immediately before the clinical worsening of pruritus ani; or
- (s) applying high potency topical corticosteroid-containing preparations, and experiencing steroid related atrophy of the perianal skin, over the 30 days immediately before the clinical worsening of pruritus ani; or
- (t) being systemically treated with water-soluble corticosteroid phosphates within the 24 hours immediately before the clinical worsening of pruritus ani; or
- (u) being systemically treated with nicosamide, clioquinol or mineral oil within the 72 hours immediately before the clinical worsening of pruritus ani; or
- (v) inability to obtain appropriate clinical management for pruritus ani.

Factors that apply only to material contribution or aggravation

6. Paragraphs 5(m) to 5(v) apply only to material contribution to, or aggravation of, pruritus ani where the person's pruritus ani was suffered or contracted before or during (but not arising out of) the person's relevant service; paragraph 8(1)(e), 9(1)(e), 70(5)(d) or 70(5A)(d) of the Act refers.

Other definitions

7. For the purposes of this Statement of Principles:

“anal hygiene” means the personal maintenance of cleanliness of the perianal area by wiping with paper or washing with water;

“course of therapeutic radiation” means one or more fractions (treatment portions) of therapeutic radiation given with the aim of achieving palliation or cure with ionising radiation;

“dermatological disease from the specified list” means the following:

- (i) contact dermatitis, attracting an ICD code in the range 692.0 to 692.6, or ICD code 692.8, or ICD code 692.9; or
- (ii) seborrhoeic dermatitis, attracting ICD code 690; or
- (iii) psoriasis, attracting ICD code 696.1; or
- (iv) lichen planus, attracting ICD code 697.0; or
- (v) lichen sclerosus et atrophicus, attracting ICD code 701.0;

“diarrhoea” means predominantly liquid faecal discharge, attracting ICD code 001, 004, 006.0, 006.1, 007, 009.2, 009.3, 306.4, 558.9, 564.4 or 564.5;

“high potency topical corticosteroid-containing preparations” means all corticosteroid-containing creams, gels, pastes, powders, ointments and lotions except those preparations containing 1% or less of hydrocortisone and those containing methylprednisolone acetate 0.25% or less;

“ICD code” means a number assigned to a particular kind of injury or disease in the Australian Version of The International Classification of Diseases, 9th revision, Clinical Modification (ICD-9-CM), effective date of 1 July 1995, copyrighted by the National Coding Centre, Faculty of Health Sciences, University of Sydney, NSW, and having ISBN 0 642 22235 5;

“malignant lesion of the anal or perianal region” means:

- (i) Paget's disease of skin, attracting ICD code 173.5; or
- (ii) Bowen's disease, attracting ICD code 232.5; or
- (iii) basal cell carcinoma, attracting ICD code 173.5; or
- (iv) squamous cell carcinoma, attracting ICD code 173.5;
- (v) malignant melanoma of the skin, attracting ICD code 172.5; or
- (vi) Kaposi's sarcoma, attracting ICD code 176.0 or 176.1; or
- (vii) the presence of secondary tumour deposits from any primary malignant neoplasm;

“pathological vaginal discharge” means a discharge of fluid from the vagina which is related to, or caused by, one of the following diseases:

vulvovaginal candidiasis, trichomonal vaginitis, bacterial vaginosis, chlamydia trachomatis cervicitis and gonorrhoea of the lower genitourinary tract, attracting ICD code 098.0, 098.15, 098.16, 098.2, 098.35, 098.36, 099.53, 112.1, 131.01 or 616.1;

“perianal area” means the area of skin immediately surrounding the anus and within the anal cleft, extending anteriorly as far as the genitals and posteriorly to the tip of the coccyx;

“relevant service” means:

- (a) operational service; or
- (b) peacekeeping service; or
- (c) hazardous service.

“specified list of colorectal or anal conditions ” means the following:

- (i) anal fistula, attracting ICD code 565.1; or
- (ii) anal fissure, attracting ICD code 565.0 or 877; or
- (iii) anal skin tags, attracting ICD code 455.9; or
- (iv) anal sphincter incompetence, attracting ICD code 787.6; or
- (v) malignant lesion of the anal or perianal region (see separate definition); or
- (vi) colorectal adenomatous polyp, attracting ICD code 211.3 or 211.4; or
- (vii) haemorrhoids, attracting ICD code 455; or
- (viii) ulcerative colitis , attracting ICD code 556; or
- (ix) Crohn’s disease, attracting ICD code 555; or
- (x) malignant neoplasm of the rectum, attracting ICD code 154.0 or 154.1; or
- (xi) malignant neoplasm of the colon, attracting ICD code 153;

“specified list of infections and infestations” means the following:

- (i) erythrasma, attracting ICD code 039.0; or
- (ii) streptococcal or staphylococcal impetigo, attracting ICD code 684; or
- (iii) condylomata lata, attracting ICD code 091.3; or
- (iv) human papilloma virus, attracting ICD code 078.1; or
- (v) herpes simplex virus, attracting ICD code 054; or
- (vi) candidiasis, attracting ICD code 112.1 or 112.2; or
- (vii) tinea, attracting ICD code 110.3; or
- (viii) gonorrhoea, attracting ICD code 098.7; or
- (ix) pin worm, attracting ICD code 127.4; or
- (x) strongyloides, attracting ICD code 127.2; or
- (xi) scabies, attracting ICD code 133.0; or

(xii) lice, attracting ICD code 132.2;

“therapeutic radiation” means medical treatment by irradiation to the person with gamma rays, x-rays, alpha particles or beta particles;

Dated this *Fourteenth* day of *March* 1996

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

KEN DONALD
CHAIRMAN