

**Determination**

of

**Statement of Principles**  
concerning

**NEOPLASM OF THE PITUITARY GLAND**

**ICD CODES: 194.3, 227.3, 237.0**

*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 **neoplasm of the pituitary gland** and **death from neoplasm of the pituitary gland**.

(b) For the purposes of this Statement of Principles, “**neoplasm of the pituitary gland**” means a neoplasm, either benign or malignant, arising from the cells of the pituitary gland, attracting ICD code 194.3, 227.3 or 237.0.

Note: For the purposes of this Statement of Principles, this definition specifically excludes soft tissue sarcoma, non-Hodgkin's lymphoma and Hodgkin's disease.

Note to user (this note does not form part of the legal wording of the instrument):

In the event that a disease referred to in the note above (which is excluded from coverage by this Statement of Principles) is claimed, reference should be made to the relevant Statement of Principles (or Statements of Principles) which cover or refer to that disease (if any).

**Basis for determining the factors**

3. The Repatriation Medical Authority is of the view that there is sound medical-scientific evidence that indicates that **neoplasm of the pituitary**

**gland and death from neoplasm of the pituitary gland** 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 **neoplasm of the pituitary gland** or **death from neoplasm of the pituitary gland** with the circumstances of a person's relevant service are:
  - (a) for ACTH secreting pituitary adenomas only, undergoing bilateral adrenalectomy within the ten years immediately before the clinical worsening of neoplasm of the pituitary gland; or
  - (b) inability to obtain appropriate clinical management for neoplasm of the pituitary gland.

#### **Factors that apply only to material contribution or aggravation**

6. Paragraphs **5(a)** to **5(b)** apply only to material contribution to, or aggravation of, neoplasm of the pituitary gland where the person's neoplasm of the pituitary gland 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:

**“ACTH”** means adrenocorticotrophic hormone (or corticotropin), a hormone secreted by the anterior pituitary gland that stimulates the secretion of corticosteroids from the adrenal cortex;

**“ACTH secreting pituitary adenoma”** means a benign neoplasm of the pituitary gland (microadenoma or macroadenoma) which secretes ACTH, attracting ICD code 227.3;

**“bilateral adrenalectomy”** means excision of both adrenal glands;

**“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 1996, copyrighted by the National Coding Centre, Faculty of

