



**Australian Government**  
**Repatriation Medical Authority**

**Statement of Principles**  
**concerning**  
**BARRETT'S OESOPHAGUS**  
**(Balance of Probabilities)**  
**(No. 68 of 2016)**

---

The Repatriation Medical Authority determines the following Statement of Principles under subsection 196B(3) of the *Veterans' Entitlements Act 1986*.

Dated 24 June 2016

The Common Seal of the  
Repatriation Medical Authority  
was affixed to this instrument  
at the direction of:

A handwritten signature in black ink, appearing to read 'N. Saunders'.

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 .....	4
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
<b>Schedule 1 - Dictionary .....</b>		<b>6</b>
1	Definitions.....	6

## **1 Name**

This is the Statement of Principles concerning *Barrett's oesophagus (Balance of Probabilities)* (No. 68 of 2016).

## **2 Commencement**

This instrument commences on 25 July 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 Barrett's oesophagus and death from Barrett's oesophagus.

### *Meaning of **Barrett's oesophagus***

- (2) For the purposes of this Statement of Principles, Barrett's oesophagus means:
  - (a) a condition in which there is metaplasia of the epithelium of the lower oesophagus from the normal stratified squamous epithelium to abnormal columnar epithelium; and
  - (b) includes metaplasia at the gastro-oesophageal junction.
- (3) While Barrett's oesophagus attracts ICD-10-AM code K22.7, in applying this Statement of Principles the meaning of Barrett's oesophagus is that given in subsection (2).
- (4) For subsection (3), a reference to an ICD-10-AM code is a reference to the code assigned to a particular kind of injury or disease in *The International Statistical Classification of Diseases and Related Health Problems, Tenth Revision, Australian Modification (ICD-10-AM)*, Ninth Edition, effective date of 1 July 2015, copyrighted by the Independent Hospital Pricing Authority, ISBN 978-1-76007-020-5.

### *Death from Barrett's oesophagus*

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

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 Barrett's oesophagus and death from Barrett's oesophagus 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, Barrett's oesophagus or death from Barrett's oesophagus is connected with the circumstances of a person's relevant service:

- (1) having gastro-oesophageal reflux disease for at least the two years before the clinical onset of Barrett's oesophagus;
- (2) having a hiatus hernia before the clinical onset of Barrett's oesophagus;
- (3) being obese for at least the five years before the clinical onset of Barrett's oesophagus;

Note: *being obese* is defined in the Schedule 1 - Dictionary.

- (4) an inability to consume an average of at least 200 grams per day of any combination of fruit and vegetables, for at least the five years before the clinical onset of Barrett's oesophagus;
- (5) having gastro-oesophageal reflux disease for at least the two years before the clinical worsening of Barrett's oesophagus;
- (6) having a hiatus hernia before the clinical worsening of Barrett's oesophagus;
- (7) being obese for at least the five years before the clinical worsening of Barrett's oesophagus;

Note: *being obese* is defined in the Schedule 1 - Dictionary.

- (8) an inability to consume an average of at least 200 grams per day of any combination of fruit and vegetables, for at least the five years before the clinical worsening of Barrett's oesophagus;

- (9) inability to obtain appropriate clinical management for Barrett's oesophagus.

**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(5) to 8(9) apply only to material contribution to, or aggravation of, Barrett's oesophagus where the person's Barrett's oesophagus 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:

***Barrett's oesophagus***—see subsection 6(2).

***being obese*** means:

- (a) having a Body Mass Index (BMI) of 30 or greater; or
- (b) for males, having a waist circumference exceeding 102 centimetres; or
- (c) for females, having a waist circumference exceeding 88 centimetres.

***BMI*** means  $W/H^2$  and where:

W is the person's weight in kilograms; and

H is the person's height in metres.

***MRCA*** means the *Military Rehabilitation and Compensation Act 2004*.

***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.

***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*.