

REVOKED

Revocation

of

Statement of Principles
concerning

REFRACTIVE ERROR

and

Determination

of

Statement of Principles
concerning

MYOPIA, HYPERMETROPIA AND ASTIGMATISM

ICD-9-CM CODES: 367.0, 367.1, 367.2

Veterans' Entitlements Act 1986

1. The Repatriation Medical Authority under subsection **196B(2)** of the *Veterans' Entitlements Act 1986* (the Act):
 - (a) revokes Instrument No.294 of 1995 (Statement of Principles concerning refractive error); and
 - (b) determines in its place the following Statement of Principles.

Kind of injury, disease or death

2. (a) This Statement of Principles is about **myopia, hypermetropia and astigmatism** and **death from myopia, hypermetropia and astigmatism**.

- (b) For the purposes of this Statement of Principles:

“astigmatism” means a refractive error in which eye refraction varies in different meridians, so that no two dimensional object can be brought to focus on the retina giving rise to blurred vision, attracting ICD-9-CM code 367.2 and excludes temporary changes to refraction;

“hypermetropia” means a refractive error in which rays of light entering the eye parallel to the visual axis come to focus behind the retina in the unaccommodated eye, attracting ICD-9-CM code 367.0 and excludes temporary changes to refraction;

“myopia” means a refractive error in which rays of light entering the eye parallel to the visual axis come to focus in front of the retina in the unaccommodated eye, attracting ICD-9-CM code 367.1 and excludes temporary changes to refraction.

Basis for determining the factors

3. The Repatriation Medical Authority is of the view that there is sound medical-scientific evidence that indicates that **myopia, hypermetropia or astigmatism and death from myopia, hypermetropia or astigmatism** 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, at least one of the factors set out 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 **myopia, hypermetropia or astigmatism** or **death from myopia, hypermetropia or astigmatism** with the circumstances of a person's relevant service are:

- (a) for myopia only:
 - (i) suffering from nuclear cataract of the affected eye at the time of the clinical onset of myopia; or
 - (ii) suffering from decentration or tilting of the lens of the affected eye at the time of the clinical onset of myopia; or
 - (iii) suffering from keratoconus or lenticonus of the affected eye at the time of the clinical onset of myopia; or
 - (iv) undergoing photorefractive keratectomy or radial keratotomy within the three months before the clinical onset of myopia; or
 - (v) undergoing encircling buckling surgery for retinal detachment within the three months before the clinical onset of myopia; or
 - (vi) suffering from nuclear cataract of the affected eye at the time of the clinical worsening of myopia; or
 - (vii) suffering from decentration or tilting of the lens of the affected eye at the time of the clinical worsening of myopia; or
 - (viii) suffering from keratoconus or lenticonus of the lens of the affected eye at the time of the clinical worsening of myopia; or
 - (ix) undergoing photorefractive keratectomy or radial keratotomy within the three months before the clinical worsening of myopia; or
 - (x) undergoing encircling buckling surgery for retinal detachment within the three months before the clinical worsening of myopia; or
- (b) for hypermetropia only:
 - (i) suffering from aphakia or posterior displacement of the lens into the vitreous of the affected eye at the time of the clinical onset of hypermetropia; or

- (ii) suffering from anterior displacement of the retina of the affected eye at the time of the clinical onset of hypermetropia; or
 - (iii) having undergone photorefractive keratectomy or radial keratotomy of the affected eye within the three months of the clinical onset of hypermetropia; or
 - (iv) suffering from aphakia or posterior displacement of the lens into the vitreous of the affected eye at the time of the clinical worsening of hypermetropia; or
 - (v) suffering from anterior displacement of the retina of the affected eye at the time of the clinical worsening of hypermetropia; or
 - (vi) having undergone photorefractive keratectomy or radial keratotomy of the affected eye within the three months of the clinical worsening hypermetropia; or
- (c) for astigmatism only:
- (i) having undergone surgery involving the cornea, sclera or buckling procedures (for retinal detachment) in the affected eye within the three months before the clinical onset of astigmatism; or
 - (ii) suffering from corneal scarring in the affected eye at the time of the clinical onset of astigmatism; or
 - (iii) suffering from a pterygium in the affected eye at the time of the clinical onset of astigmatism; or
 - (iv) suffering from decentration or tilting of the lens of the affected eye at the time of the clinical onset of astigmatism; or
 - (v) suffering a lid or limbal mass of the affected eye at the time of the clinical onset of astigmatism; or
 - (vi) suffering from keratoconus of the affected eye at the time of the clinical onset of astigmatism; or
 - (vii) having undergone surgery involving the cornea, sclera or buckling procedures (for retinal detachment) in the affected

eye within the three months before the clinical worsening of astigmatism; or

- (viii) suffering from corneal scarring in the affected eye at the time of the clinical worsening of astigmatism; or
 - (ix) suffering from a pterygium in the affected eye at the time of the clinical worsening of astigmatism; or
 - (x) suffering from decentration or tilting of the lens of the affected eye at the time of the clinical worsening of astigmatism; or
 - (xi) suffering a lid or limbal mass of the affected eye at the time of the clinical worsening of astigmatism; or
 - (xii) suffering from keratoconus of the lens of the affected eye at the time of the clinical worsening of astigmatism; or
- (d) inability to obtain appropriate clinical management for myopia, hypermetropia or astigmatism.

Factors that apply only to material contribution or aggravation

6. Paragraphs **5(a)(vi) to 5(a)(x), 5(b)(iv) to 5(b)(vi), 5(c)(vii) to 5(c)(xii) and 5(d)** apply only to material contribution to, or aggravation of, myopia, hypermetropia or astigmatism where the person's myopia, hypermetropia or astigmatism 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.

Inclusion of Statements of Principles

7. 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.

Other definitions

8. For the purposes of this Statement of Principles:

“anterior displacement of the retina” means displacement of the retina in the direction of the cornea bringing it closer to the lens from causes such as tumour, subretinal fluid collection or retinal detachment;

“corneal scarring” means irreversible damage to the corneal epithelium due to chronic inflammatory diseases of the cornea, interstitial keratitis, corneal infection, trauma or surgery;

“death from myopia, hypermetropia or astigmatism” in relation to a person includes death from a terminal event or condition that was contributed to by the person’s myopia, hypermetropia or astigmatism;

“decentration” means a lateral shift;

“ICD-9-CM 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 Health Sciences, University of Sydney, NSW, and having ISBN 0 642 24447 2;

“keratoconus” means a condition characterised by noninflammatory, usually bilateral protrusion of the cornea;

“lenticonus” means a conical protrusion of the substance of the crystalline lens, covered by capsule or connective tissue, usually occurring more frequently on the posterior surface and usually affecting only one eye;

“pterygium” means a wing-like, abnormal triangular fold of membrane, in the interpalpebral fissure, extending from the conjunctiva to the cornea, being immovably united to the cornea at its apex, firmly attached to the sclera throughout its middle portion, and merged with the conjunctiva at its base;

“relevant service” means:

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

“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

9. This Instrument applies to all matters to which section 120A of the Act applies.

Dated this *Third* day of *September* 1998

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

KEN DONALD
CHAIRMAN