Statement of Principles concerning
BENIGN PROSTATIC HYPERPLASIA
(Balance of Probabilities)
(No. 18 of 2016)

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

Dated 4 March 2016

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

Professor Nicholas Saunders AO
Chairperson
1 Name
This is the Statement of Principles concerning benign prostatic hyperplasia (Balance of Probabilities) (No. 18 of 2016).

2 Commencement
This instrument commences on 4 April 2016.

3 Authority
This instrument is made under subsection 196B(3) of the Veterans’ Entitlements Act 1986.

4 Revocation
The Statement of Principles concerning benign prostatic hyperplasia No. 20 of 2008 made under subsection 196B(3) of the VEA is revoked.

5 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.

6 Definitions
The terms defined in the Schedule 1 - Dictionary have the meaning given when used in this instrument.

7 Kind of injury, disease or death to which this Statement of Principles relates
(1) This Statement of Principles is about benign prostatic hyperplasia and death from benign prostatic hyperplasia.

Meaning of benign prostatic hyperplasia
(2) For the purposes of this Statement of Principles, benign prostatic hyperplasia means a non-malignant enlargement of the prostate resulting from proliferation of both glandular and stromal elements.

(3) While benign prostatic hyperplasia attracts ICD-10-AM code N40, in applying this Statement of Principles the meaning of benign prostatic hyperplasia is that given in subsection (2).

Death from **benign prostatic hyperplasia**

(5) For the purposes of this Statement of Principles, benign prostatic hyperplasia, in relation to a person, includes death from a terminal event or condition that was contributed to by the person’s benign prostatic hyperplasia.

Note: *terminal event* is defined in the Schedule 1 – Dictionary.

8 **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 benign prostatic hyperplasia and death from benign prostatic hyperplasia 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.

9 **Factor that must exist**

The factor that must exist before it can be said that, on the balance of probabilities, benign prostatic hyperplasia or death from benign prostatic hyperplasia is connected with the circumstances of a person’s relevant service is inability to obtain appropriate clinical management for benign prostatic hyperplasia.

10 **Relationship to service**

The existence in a person of the factor referred to in section 9, applies only to material contribution to, or aggravation of, benign prostatic hyperplasia where the person’s benign prostatic hyperplasia was suffered or contracted before or during (but did not arise out of) the person’s relevant service.
1 Definitions

In this instrument:

**benign prostatic hyperplasia**—see subsection 7(2).

**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.

**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*. 