

Statement of Principles

concerning

INGUINAL HERNIA
 (Balance of Probabilities)

(No. 48 of 2021)

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

Dated 23 April 2021

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| The Common Seal of theRepatriation Medical Authoritywas affixed to this instrumentat the direction of: |
| Professor Nicholas Saunders AOChairperson |

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1 Definitions 7

1. Name

This is the Statement of Principles concerning *inguinal hernia* *(Balance of Probabilities)* (No. 48 of 2021).

1. Commencement

 This instrument commences on 24 May 2021.

1. Authority

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

1. Repeal

The Statement of Principles concerning inguinal hernia No. 6 of 2013 (Federal Register of Legislation No. F2013L00021) made under subsection 196B(3) of the VEA is repealed.

1. 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.

1. Definitions

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

1. Kind of injury, disease or death to which this Statement of Principles relates
	1. This Statement of Principles is about inguinal hernia and death from inguinal hernia.

Meaning of **inguinal hernia**

* 1. For the purposes of this Statement of Principles, inguinal hernia means:
		1. a protrusion of intra-abdominal tissue through the abdominal wall either:
			1. through the inguinal canal; or
			2. through a weakness in the posterior wall of the inguinal canal; and
		2. includes direct and indirect inguinal hernia; and
		3. excludes femoral hernia.
	2. While inguinal hernia attracts ICD‑10‑AM code K40, in applying this Statement of Principles the meaning of inguinal hernia is that given in subsection (2).
	3. 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), Tenth Edition, effective date of 1 July 2017, copyrighted by the Independent Hospital Pricing Authority, ISBN 978-1-76007-296-4.

Death from **inguinal hernia**

* 1. For the purposes of this Statement of Principles, inguinal hernia,in relation to a person, includes death from a terminal event or condition that was contributed to by the person's inguinal hernia.

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

1. 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 inguinal hernia and death from inguinal hernia can be related to relevant service rendered by veterans or members of the Forces under the VEA, or members under the MRCA.

Note: ***MRCA***, ***relevant service*** and ***VEA*** are defined in the Schedule 1 - Dictionary.

1. Factors that must exist

At least one of the following factors must exist before it can be said that, on the balance of probabilities, inguinal hernia or death from inguinal hernia is connected with the circumstances of a person's relevant service:

* 1. having acute elevation of pressure within the abdominal cavity due to any one of the following:
		1. anti-G straining manoeuvre;
		2. lifting heavy weights;
		3. physical trauma to the abdomen involving a direct blow to the abdomen;
		4. pneumoperitoneum induced for laparoscopic surgery;
		5. significant coughing;
		6. significant sneezing;
		7. straining at micturition due to bladder outlet or urethral obstruction; or
		8. straining at stool due to constipation or diarrhoea;

within the 30 days before the clinical onset of inguinal hernia;

* 1. having chronic elevation of pressure within the abdominal cavity due to any one of the following:
		1. ascites;
		2. chronic ambulatory or automatic peritoneal dialysis;
		3. extensive intra-abdominal neoplastic disease or mass; or
		4. pregnancy;

at the time of the clinical onset of inguinal hernia;

Note: Chronic elevation of pressure may be intermittent or continuous.

* 1. undergoing radical retropubic prostatectomy, laparoscopic radical prostatectomy or robot-assisted laparoscopic radical prostatectomy within the five years before the clinical onset of inguinal hernia;
	2. having chronic onchocerciasis in the presence of a hanging groin at the time of the clinical onset of inguinal hernia;

Note 1: Onchocerciasis is a parasitic disease caused by the filarial worm *Onchocerca volvulus* that occurs in sub-Saharan African countries, and in some areas of South America and Yemen. Symptoms include severe itching, disfiguring skin conditions and visual impairment.

Note 2: ***hanging groin*** is defined in the Schedule 1 - Dictionary.

* 1. for uretero-inguinal hernia only, having a kidney transplant before the clinical onset of uretero-inguinal hernia;
	2. having acute elevation of pressure within the abdominal cavity due to any one of the following:
		1. anti-G straining manoeuvre;
		2. lifting heavy weights;
		3. physical trauma to the abdomen involving a direct blow to the abdomen;
		4. pneumoperitoneum induced for laparoscopic surgery;
		5. significant coughing;
		6. significant sneezing;
		7. straining at micturition due to bladder outlet or urethral obstruction; or
		8. straining at stool due to constipation or diarrhoea;

within the 30 days before the clinical worsening of inguinal hernia;

* 1. having chronic elevation of pressure within the abdominal cavity due to any one of the following:
		1. ascites;
		2. chronic ambulatory or automatic peritoneal dialysis;
		3. extensive intra-abdominal neoplastic disease or mass; or
		4. pregnancy;

at the time of the clinical worsening of inguinal hernia;

Note: Chronic elevation of pressure may be intermittent or continuous.

* 1. undergoing radical retropubic prostatectomy, laparoscopic radical prostatectomy or robot-assisted laparoscopic radical prostatectomy within the five years before the clinical worsening of inguinal hernia;
	2. having chronic onchocerciasis in the presence of a hanging groin at the time of the clinical worsening of inguinal hernia;

Note 1: Onchocerciasis is a parasitic disease caused by the filarial worm *Onchocerca volvulus* that occurs in sub-Saharan African countries, and in some areas of South America and Yemen. Symptoms include severe itching, disfiguring skin conditions and visual impairment.

Note 2: ***hanging groin*** is defined in the Schedule 1 - Dictionary.

* 1. for perforated inguinal hernia only, having a colonoscopy where the colonoscope enters the inguinal hernia within the 24 hours before the perforation of the inguinal hernia;
	2. inability to obtain appropriate clinical management for inguinal hernia.
1. Relationship to service
	1. The existence in a person of any factor referred to in section 9, must be related to the relevant service rendered by the person.
	2. The factors set out in subsections 9(6) to 9(11) apply only to material contribution to, or aggravation of, inguinal hernia where the person's inguinal hernia was suffered or contracted before or during (but did not arise out of) the person's relevant service.
2. 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 9 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 6

1. Definitions
	1. In this instrument:
		1. ***hanging groin*** means a sac of atrophic skin containing enlarged, sclerosed inguinal or femoral lymph glands.
		2. ***inguinal hernia***—see subsection 7(2).
		3. ***MRCA*** means the *Military Rehabilitation and Compensation Act 2004*.
		4. ***relevant service*** means:
			1. eligible war service (other than operational service) under the VEA;
			2. defence service (other than hazardous service and British nuclear test defence service) under the VEA; or
			3. peacetime service under the MRCA.

Note: ***MRCA*** and ***VEA*** are also defined in the Schedule 1 - Dictionary.

* + 1. ***terminal event*** means the proximate or ultimate cause of death and includes the following:
			1. pneumonia;
			2. respiratory failure;
			3. cardiac arrest;
			4. circulatory failure; or
			5. cessation of brain function.
		2. ***VEA*** means the *Veterans' Entitlements Act 1986*.