



Australian Government
Repatriation Medical Authority

Statement of Principles
concerning
VARICOCOELE
(Reasonable Hypothesis)
(No. 79 of 2019)

The Repatriation Medical Authority determines the following Statement of Principles under subsection 196B(2) of the *Veterans' Entitlements Act 1986*.

Dated 23 August 2019

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	Repeal	3
5	Application.....	3
6	Definitions.....	3
7	Kind of injury, disease or death to which this Statement of Principles relates	3
8	Basis for determining the factors	4
9	Factors that must exist.....	4
10	Relationship to service	6
11	Factors referring to an injury or disease covered by another Statement of Principles.....	6
Schedule 1 - Dictionary		7
1	Definitions.....	7

1 Name

This is the Statement of Principles concerning *varicocoele (Reasonable Hypothesis)* (No. 79 of 2019).

2 Commencement

This instrument commences on 23 September 2019.

3 Authority

This instrument is made under subsection 196B(2) of the *Veterans' Entitlements Act 1986*.

4 Repeal

The Statement of Principles concerning varicocoele No. 3 of 2011 (Federal Register of Legislation No. F2010L03250) made under subsection 196B(2) of the VEA is repealed.

5 Application

This instrument applies to a claim to which section 120A of the VEA or section 338 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 varicocoele and death from varicocoele.

Meaning of varicocoele

- (2) For the purposes of this Statement of Principles, varicocoele means an abnormal tortuosity and dilatation of the veins of the pampiniform plexus within the spermatic cord in the scrotum.

Note: Varicocoele usually presents as a scrotal swelling. Varicocoele may also be associated with male infertility.

- (3) While varicocoele attracts ICD-10-AM code I86.1, in applying this Statement of Principles the meaning of varicocoele 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), Tenth Edition, effective date of 1 July 2017, copyrighted by the Independent Hospital Pricing Authority, ISBN 978-1-76007-296-4.

Death from varicocele

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

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

8 Basis for determining the factors

The Repatriation Medical Authority is of the view that there is sound medical-scientific evidence that indicates that varicocele and death from varicocele can be related to relevant service rendered by veterans, members of Peacekeeping Forces, 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.

9 Factors that must exist

At least one of the following factors must as a minimum exist before it can be said that a reasonable hypothesis has been raised connecting varicocele or death from varicocele with the circumstances of a person's relevant service:

- (1) having an occlusion or stenosis of the testicular venous drainage system before the clinical onset of varicocele;

Note 1: Blood vessels of the testicular venous drainage system may include, but are not limited to:

- (a) inferior vena cava;
- (b) internal iliac vein;
- (c) left or right renal vein;
- (d) lumbar vein;
- (e) pampiniform plexus; and
- (f) testicular vein.

Rare anatomical variants may exist where the testicular vein and its tributaries empty into blood vessels which are not commonly part of the testicular venous drainage system.

Note 2: *occlusion or stenosis* is defined in the Schedule 1 - Dictionary.

- (2) having a nephrectomy within the one year before the clinical onset of the ipsilateral varicocele;
- (3) having an arterio-venous fistula between any of the arteries supplying the testis and a vein of the pampiniform plexus at the time of the clinical onset of varicocele;

Note: *arteries supplying the testis* is defined in the Schedule 1 - Dictionary.

- (4) having ankylosing spondylitis at the time of the clinical onset of varicocele;
- (5) having Behcet disease at the time of the clinical onset of varicocele;
- (6) having an occlusion or stenosis of the testicular venous drainage system before the clinical worsening of varicocele;

Note 1: Blood vessels of the testicular venous drainage system may include, but are not limited to:

- (a) inferior vena cava;
- (b) internal iliac vein;
- (c) left or right renal vein;
- (d) lumbar vein;
- (e) pampiniform plexus; and
- (f) testicular vein.

Rare anatomical variants may exist where the testicular vein and its tributaries empty into blood vessels which are not commonly part of the testicular venous drainage system.

Note 2: *occlusion or stenosis* is defined in the Schedule 1 - Dictionary.

- (7) having a nephrectomy within the one year before the clinical worsening of the ipsilateral varicocele;
- (8) having an arterio-venous fistula between any of the arteries supplying the testis and a vein of the pampiniform plexus at the time of the clinical worsening of varicocele;

Note: *arteries supplying the testis* is defined in the Schedule 1 - Dictionary.

- (9) having ankylosing spondylitis at the time of the clinical worsening of varicocele;
- (10) having Behcet disease at the time of the clinical worsening of varicocele;
- (11) undertaking physical activity at a minimum intensity of six METs, for at least six hours per week for at least the four weeks before the clinical worsening of varicocele;

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

- (12) for rupture of varicocele only:
 - (a) having sexual intercourse at the time of the clinical worsening of varicocele; or
 - (b) having increased intra-abdominal pressure as specified, which has resulted in a scrotal or spermatic cord haematoma, within the seven days before the clinical worsening of varicocele;

Note: *increased intra-abdominal pressure as specified* is defined in the Schedule 1 - Dictionary.

- (13) inability to obtain appropriate clinical management for varicocele.

10 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(13) apply only to material contribution to, or aggravation of, varicocoele where the person's varicocoele was suffered or contracted before or during (but did not arise out of) the person's relevant service.

11 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(2) 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

In this instrument:

arteries supplying the testis means the arteries or their branches that supply the testis.

Note: Arteries supplying the testis include, but are not limited to:

- (a) cremasteric artery;
- (b) deferential artery;
- (c) external pudendal artery; and
- (d) testicular artery.

increased intra-abdominal pressure as specified means acute elevation of pressure within the lower abdominal region due to various activities, including, but not limited to:

- (a) lifting heavy weights;
- (b) physical trauma to the lower abdomen involving a direct blow to the lower abdominal region;
- (c) straining at stool due to constipation; and
- (d) using manual tools requiring excessive force such as pulling forcefully on a large spanner or socket wrench.

MET means a unit of measurement of the level of physical exertion. 1 MET = 3.5 ml of oxygen/kg of body weight per minute, or 1.0 kcal/kg of body weight per hour, or resting metabolic rate.

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

occlusion or stenosis means complete or partial obstruction to the blood flow of a blood vessel, which may be due to a number of causes including, but not limited to, thrombosis, tumour invasion or external compression of a vein.

Note: External compression of a vein may be due to a disease process or impingement by an anatomical structure, including, but not limited to:

- (a) cyst;
- (b) left renal vein entrapment syndrome ("nutcracker" syndrome);
- (c) neoplasm;
- (d) pseudocyst;
- (e) renal arteriovenous malformation;
- (f) retroperitoneal fibrosis; and
- (g) retroperitoneal mass.

relevant service means:

- (a) operational service under the VEA;
- (b) peacekeeping service under the VEA;
- (c) hazardous service under the VEA;
- (d) British nuclear test defence service under the VEA;
- (e) warlike service under the MRCA; or
- (f) non-warlike 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.

varicocele — see subsection 7(2).

VEA means the *Veterans' Entitlements Act 1986*.