



Australian Government
Repatriation Medical Authority

Statement of Principles
concerning
BENIGN PROSTATIC HYPERPLASIA
(Balance of Probabilities)
(No. 14 of 2025)

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

Dated 17 December 2024.

Professor Terence Campbell AM
Chairperson
by and on behalf of
The Repatriation Medical Authority

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.....	4
11	Factors referring to an injury or disease covered by another Statement of Principles	5
Schedule 1 - Dictionary		6
1	Definitions	6

1 Name

This is the Statement of Principles concerning *benign prostatic hyperplasia* (Balance of Probabilities) (No. 14 of 2025).

2 Commencement

This instrument commences on 28 January 2025.

3 Authority

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

4 Repeal

The Statement of Principles concerning benign prostatic hyperplasia (Balance of Probabilities) (No. 18 of 2016) (Federal Register of Legislation No. F2016L00242) made under subsection 196B(3) of the VEA is repealed.

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:
 - (a) means a benign hyperplasia of the prostate glandular and stromal tissue which can cause obstruction of urine outflow; and
 - (b) excludes:
 - (i) malignant neoplasm of the prostate;
 - (ii) overactive bladder; and
 - (iii) prostatitis.

Note: Obstruction of urine outflow may present as increased urgency, increased urinary frequency, poor flow or dribbling.

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

9 Factors that must exist

The following factor 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:

- (1) inability to obtain appropriate clinical management for benign prostatic hyperplasia before clinical worsening.

10 Relationship to service

- (1) The existence in a person of the factor referred to in section 9, must be related to the relevant service rendered by the person.
- (2) The factor set out in subsection 9(1) 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.

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(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

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.

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*.