

Statement of Principles

concerning

MALIGNANT NEOPLASM OF THE TESTIS AND EPIDIDYMIS
(Reasonable Hypothesis)

(No. 7 of 2024)

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

Dated 22 December 2023.

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| The Common Seal of theRepatriation Medical Authoritywas affixed to this instrumentat the direction of: |
| Professor Terence Campbell AMChairperson |

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1 Definitions 7

1. Name

This is the Statement of Principles concerning *malignant neoplasm of the testis and epididymis* *(Reasonable Hypothesis)* (No. 7 of 2024).

1. Commencement

 This instrument commences on 22 January 2024.

1. Authority

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

1. Repeal

The Statement of Principles concerning malignant neoplasm of the testis and paratesticular tissues No. 3 of 2015 (Federal Register of Legislation No. F2014L01813) made under subsection 196B(2) of the VEA is repealed.

1. 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.

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 malignant neoplasm of the testis and epididymis and death from malignant neoplasm of the testis and epididymis.

Meaning of **malignant neoplasm of the testis and epididymis**

* 1. For the purposes of this Statement of Principles, malignant neoplasm of the testis and epididymis:
		1. means a primary malignant neoplasm arising from cells of the testis and/or epididymis; and
		2. includes the following:
			1. germ cell tumour in situ;
			2. germ cell tumour;
			3. seminoma and non-seminoma;
			4. sex cord stromal carcinomas;
			5. epididymis carcinomas; and
			6. rete testis carcinomas; and
		3. excludes the following:
			1. vas deferens tumours;
			2. soft tissue sarcoma;
			3. non-Hodgkin lymphoma;
			4. Hodgkin lymphoma;
			5. leukaemic infiltrates.
	2. While malignant neoplasm of the testis and epididymis attracts ICD‑10‑AM codes C62 and C63.0, in applying this Statement of Principles the meaning of malignant neoplasm of the testis and epididymis 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 **malignant neoplasm of the testis and epididymis**

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

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

1. Basis for determining the factors

The Repatriation Medical Authority is of the view that there is sound medical-scientific evidence that indicates that malignant neoplasm of the testis and epididymis and death from malignant neoplasm of the testis and epididymis 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.

1. 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 malignant neoplasm of the testis and epididymis or death from malignant neoplasm of the testis and epididymis with the circumstances of a person's relevant service:

* 1. being infected with human immunodeficiency virus before the clinical onset of malignant neoplasm of the testis and epididymis;
	2. smoking at least ten joint-years of cannabis, or the equivalent in other cannabis products, before the clinical onset of malignant neoplasm of the testis and epididymis, where smoking commenced at least five years before the clinical onset of malignant neoplasm of the testis and epididymis;

Note: ***joint-years of cannabis*** is defined is the schedule 1 dictionary.

* 1. having at least 3 years continuous exposure to dimethylformamide at a concentration of at least 10 ppm for 8 hours per day, at least 2 years before the clinical onset of malignant neoplasm of the testis and epididymis;
	2. being employed as a firefighter for a cumulative period of at least 1,000 hours before the clinical onset of malignant neoplasm of the testis and epididymis, where the employment commenced at least 10 years before the clinical onset of malignant neoplasm of the testis and epididymis;
	3. being employed for at least 3 years in aircraft maintenance work at least 2 years before the clinical onset of malignant neoplasm of the testis and epididymis;
	4. inability to obtain appropriate clinical management for malignant neoplasm of the testis and epididymis before the clinical worsening of malignant neoplasm of the testis and epididymis.
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 factor set out in subsection 9(6) applies only to material contribution to, or aggravation of, malignant neoplasm of the testis and epididymis where the person's malignant neoplasm of the testis and epididymis 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(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
	1. In this instrument:
		1. ***joint-years of cannabis*** means a calculation of consumption where one joint-year of cannabis equals one joint per day for a period of one year.
		2. ***malignant neoplasm of the testis and epididymis***—see subsection 7(2).
		3. ***MRCA*** means the *Military Rehabilitation and Compensation Act 2004*.
		4. ***relevant service*** means:
			1. operational service under the VEA;
			2. peacekeeping service under the VEA;
			3. hazardous service under the VEA;
			4. British nuclear test defence service under the VEA;
			5. warlike service under the MRCA; or
			6. non-warlike service under the MRCA.

Note: ***MRCA*** and ***VEA*** are 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*.