Folio: _____

Australian Government

Department of Veterans' Affairs

Medical Report - Drug Treatment
Erectile Dysfunction

The information you provide on this form will assist in deciding eligibility for benefits under the Veterans' Entitlements Act 1986 and/or Military Rehabilitation and Compensation Act 2004. In the event of an appeal against a decision, this information may be provided to the Veterans' Review Board, Administrative Appeals Tribunal or Federal Court.

Veteran's Details

Surname	Given Names	DVA File Number

Report Detail

A claim for service related compensation in respect of the above named leads the Department to consider whether treatment with certain drugs could be a factor in the development of erectile dysfunction in this case.

The Repatriation Medical Authority has specified a number of drugs which are listed in the table below.

1. When was the clinical onset of erectile dysfunction?……./……./…….

2. Was the veteran taking any of the listed drugs at the time of the clinical onset of erectile dysfunction?

   ❑ **No -** *Please sign the form and return it to the Department*

   ❑ **Yes**

   If the veteran was taking any of these drugs at the time of the clinical onset of erectile dysfunction, can you please provide further details of treatment with the drug/s in the table provided below. Identify the period of treatment, the medication prescribed and the condition treated:

	Drug	Medication prescribed	From	To	Condition treated
❑	Histamine 2 receptor antagonists, including cimetidine, ranitidine		/ /	/ /	
❑	Antihypertensive agents, including beta-blockers, central acting sympatholytics, angiotensin converting enzyme inhibitors and calcium channel blockers but **excluding** alpha-blockers		/ /	/ /	
❑	Antiandrogens, including finasteride and cyproterone acetate		/ /	/ /	

	Drug	**Medication prescribed**	**From**	**To**	**Condition treated**
❑	Steroid or sex hormones, including oestrogen, progesterone, corticosteroids, anabolic steroids and testosterone		/ /	/ /	
❑	Diuretics, including loop diuretics, thiazides and spironolactone		/ /	/ /	
❑	Lipid lowering drugs, including statins and fibrates		/ /	/ /	
❑	Antiepileptics, including barbiturates, carbemapezine, phenytoin, sodium valproate		/ /	/ /	
❑	Anticholinergics, including atropine scopolamine and cogentin		/ /	/ /	
❑	Antidepressants, including tricyclic antidepressants, monoamine oxidase inhibitors and selective serotonin reuptake inhibitors		/ /	/ /	
❑	Cytotoxic agents, including alkylating agents, antimetabolites, vinca alkaloids, cisplatin, etoposide and bleomycin		/ /	/ /	
❑	Antipsychotics, including phenothiazines, butyrophenones, risperidone and clozapine		/ /	/ /	
❑	Tranquillizers, including benzodiazepines		/ /	/ /	

	Drug	Medication prescribed	From	To	Condition treated
❑	Antiemetics, including prochlorperazine, metoclopramide and domperidone		/ /	/ /	
❑	Narcotics		/ /	/ /	
❑	Oral ketoconazole		/ /	/ /	
❑	Digoxin		/ /	/ /	
❑	Lithium		/ /	/ /	
❑	Any other drug reported in the peer reviewed medical or scientific publication to cause or worsen erectile dysfunction		/ /	/ /	

3. Would it have been possible for any of these drugs to have been ceased or substituted?

❑ **No**

❑ **Yes** - Please provide details

4. Did the erectile dysfunction permanently worsen? **Note:** For the purposes of the *Veterans' Entitlement Act* (1986), permanent worsening requires an increase in the gravity of the disease beyond its natural progression. It excludes temporary exacerbations or any deterioration which is part of the normal course of the disease.

   ❑ **No** - *Please sign the form and return it to the Department*

   ❑ **Yes** – Please provide details of the drug or drugs (as per the list in Q2) that were being taken at the time of clinical worsening, include date of worsening and whether it would have been possible for any of these drugs to have been ceased or substituted.

Details of Medical Practitioner providing advice:

Stamp

Signature

/ /