



Australian Government
Repatriation Medical Authority

Statement of Principles
concerning
CHONDROMALACIA PATELLA
(Reasonable Hypothesis)
(No. 1 of 2019)

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

Dated 21 December 2018

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

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1 Name

This is the Statement of Principles concerning *chondromalacia patella* (*Reasonable Hypothesis*) (No. 1 of 2019).

2 Commencement

This instrument commences on 28 January 2019.

3 Authority

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

4 Repeal

The Statement of Principles concerning chondromalacia patella No. 79 of 2010 (Federal Register of Legislation No. F2010L02318) made under subsection 196B(2) of the VEA is repealed.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 chondromalacia patella and death from chondromalacia patella.

Meaning of chondromalacia patella

- (2) For the purposes of this Statement of Principles, chondromalacia patella:
- (a) means softening, fibrillation or erosion of the articular cartilage of the patella associated with recurrent or chronic patellofemoral pain; and
 - (b) excludes osteoarthritis of the patellofemoral joint.
- (3) While chondromalacia patella attracts ICD-10-AM code M22.4, in applying this Statement of Principles the meaning of chondromalacia patella 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 chondromalacia patella

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

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 chondromalacia patella and death from chondromalacia patella 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 chondromalacia patella or death from chondromalacia patella with the circumstances of a person's relevant service:

- (1) having direct trauma to the patella of the affected knee within the three months before the clinical onset of chondromalacia patella;

Note: *direct trauma to the patella* is defined in the Schedule 1 - Dictionary.

- (2) having patellar dislocation of the affected knee within the three months before the clinical onset of chondromalacia patella;

- (3) having an injury to the affected knee resulting in acute meniscal or ligamentous tear of the knee or permanent ligamentous instability, within the six months before the clinical onset of chondromalacia patella;

- (4) having acquired abnormal tracking of the patella of the affected knee for at least the three months before the clinical onset of chondromalacia patella;

Note: *abnormal tracking of the patella* is defined in the Schedule 1 - Dictionary.

- (5) running or jogging an average of at least 30 kilometres per week for at least the four weeks before the clinical onset of chondromalacia patella;

- (6) undertaking weight bearing exercise involving forceful loading of the affected patellofemoral joint, at a minimum intensity of five METs for at least four hours per week, for at least the four weeks before the clinical onset of chondromalacia patella;

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

- (7) increasing the frequency, duration or intensity of weight bearing activity involving the affected knee by at least 100 percent, to a minimum intensity of five METs for at least two hours per day, for at least the seven days before the clinical onset of chondromalacia patella;

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

- (8) being obese at the time of the clinical onset of chondromalacia patella;

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

- (9) having direct trauma to the patella of the affected knee within the three months before the clinical worsening of chondromalacia patella;

Note: *direct trauma to the patella* is defined in the Schedule 1 - Dictionary.

- (10) having patellar dislocation of the affected knee within the three months before the clinical worsening of chondromalacia patella;

- (11) having an injury to the affected knee resulting in acute meniscal or ligamentous tear of the knee or permanent ligamentous instability, within the six months before the clinical worsening of chondromalacia patella;

- (12) having acquired abnormal tracking of the patella of the affected knee for at least the three months before the clinical worsening of chondromalacia patella;

Note: *abnormal tracking of the patella* is defined in the Schedule 1 - Dictionary.

- (13) running or jogging an average of at least 30 kilometres per week for at least the four weeks before the clinical worsening of chondromalacia patella;

- (14) undertaking weight bearing exercise involving forceful loading of the affected patellofemoral joint, at a minimum intensity of five METs for at least four hours per week, for at least the four weeks before the clinical worsening of chondromalacia patella;

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

- (15) increasing the frequency, duration or intensity of weight bearing activity involving the affected knee by at least 100 percent, to a minimum intensity of five METs for at least two hours per day, for at least the seven days before the clinical worsening of chondromalacia patella;

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

(16) being obese at the time of the clinical worsening of chondromalacia patella;

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

(17) inability to obtain appropriate clinical management for chondromalacia patella.

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(9) to 9(17) apply only to material contribution to, or aggravation of, chondromalacia patella where the person's chondromalacia patella 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:

abnormal tracking of the patella means aberrant movement or positioning of the patella relative to the femoral condyles in the course of knee flexion or extension.

being obese means having a Body Mass Index (BMI) of 30 or greater.

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

BMI means W/H^2 where:

W is the person's weight in kilograms; and

H is the person's height in metres.

chondromalacia patella—see subsection 7(2).

direct trauma to the patella means a blow to the kneecap causing immediate patellar pain that persists for at least 24 hours.

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, 1.0 kcal/kg of body weight per hour or resting metabolic rate.

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

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.

VEA means the *Veterans' Entitlements Act 1986*.