



**Australian Government**  
**Repatriation Medical Authority**

**Statement of Principles**  
**concerning**  
**MORTON METATARSALGIA**  
**(Reasonable Hypothesis)**  
**(No. 77 of 2019)**

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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 .....   | 5        |
| 11                                   | Factors referring to an injury or disease covered by another Statement of Principles..... | 6        |
| <b>Schedule 1 - Dictionary .....</b> |   | <b>7</b> |
| 1                                    | Definitions.....  | 7        |

**1 Name**

This is the Statement of Principles concerning *Morton metatarsalgia (Reasonable Hypothesis)* (No. 77 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 Morton's metatarsalgia No. 92 of 2010 (Federal Register of Legislation No. F2010L02848) made under subsection 196B(2) of the VEA is repealed.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 Morton metatarsalgia and death from Morton metatarsalgia.

*Meaning of Morton metatarsalgia*

- (2) For the purposes of this Statement of Principles, Morton metatarsalgia:
- (a) means an entrapment or irritation of the interdigital plantar nerve between the metatarsal heads, causing an acquired neuropathy; and
  - (b) excludes peripheral neuropathy.

Note 1: Morton metatarsalgia is also known as Morton neuroma.

Note 2: Signs and symptoms of Morton metatarsalgia may include, but are not limited to, pain and numbness of the forefoot, most commonly in the second or third intermetatarsal space, which may radiate to the toes.

- (3) While Morton metatarsalgia attracts ICD-10-AM code G57.6, in applying this Statement of Principles the meaning of Morton metatarsalgia 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 Morton metatarsalgia*

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

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 Morton metatarsalgia and death from Morton metatarsalgia 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 Morton metatarsalgia or death from Morton metatarsalgia with the circumstances of a person's relevant service:

- (1) wearing footwear which compresses the affected forefoot or increases the pressure on the ball of the affected foot, or has a high heel, for at least four hours per day on more days than not, for at least the one year before the clinical onset of Morton metatarsalgia;
- (2) having an injury to the foot which damages or compresses the interdigital plantar nerve within the affected intermetatarsal space, within the one year before the clinical onset of Morton metatarsalgia;
- (3) undergoing surgery to the foot which damages or compresses the interdigital plantar nerve within the affected intermetatarsal space, within the one year before the clinical onset of Morton metatarsalgia;

- (4) having a deformity of the affected foot from the specified list of deformities of the foot, which damages or compresses the interdigital plantar nerve within the affected intermetatarsal space, at the time of the clinical onset of Morton metatarsalgia;

Note: *specified list of deformities of the foot* is defined in the Schedule 1 - Dictionary.

- (5) having an inflammatory arthritis which damages or compresses the interdigital plantar nerve within the affected intermetatarsal space, at the time of the clinical onset of Morton metatarsalgia;
- (6) wearing footwear which compresses the affected forefoot or increases the pressure on the ball of the affected foot, or has a high heel, for at least four hours per day on more days than not, for at least the one year before the clinical worsening of Morton metatarsalgia;
- (7) having an injury to the foot which damages or compresses the interdigital plantar nerve within the affected intermetatarsal space, within the one year before the clinical worsening of Morton metatarsalgia;
- (8) undergoing surgery to the foot which damages or compresses the interdigital plantar nerve within the affected intermetatarsal space, within the one year before the clinical worsening of Morton metatarsalgia;
- (9) having a deformity of the affected foot from the specified list of deformities of the foot, which damages or compresses the interdigital plantar nerve within the affected intermetatarsal space, at the time of the clinical worsening of Morton metatarsalgia;

Note: *specified list of deformities of the foot* is defined in the Schedule 1 - Dictionary.

- (10) having an inflammatory arthritis which damages or compresses the interdigital plantar nerve within the affected intermetatarsal space, at the time of the clinical worsening of Morton metatarsalgia;
- (11) inability to obtain appropriate clinical management for Morton metatarsalgia.

## **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 (11) apply only to material contribution to, or aggravation of, Morton metatarsalgia where the person's Morton metatarsalgia 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:

***Morton metatarsalgia***—see subsection 7(2).

***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.

***specified list of deformities of the foot*** means:

- (a) claw toes;
- (b) deformity caused by fracture of the metatarsal;
- (c) equinus deformity;
- (d) hallux rigidus;
- (e) hallux valgus;
- (f) hammer toes;
- (g) pes cavus; or
- (h) pes planus.

***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*.