Statement of Principles

concerning

CHONDROMALACIA PATELLAE

ICD CODE: 717.7

Veterans’ Entitlements Act 1986
subsection 196B(2)

1. Being of the view that there is sound medical-scientific evidence that indicates that *chondromalacia patellae* and *death from chondromalacia patellae* can be related to operational service rendered by veterans, peacekeeping service rendered by members of Peacekeeping Forces and hazardous service rendered by members of the Forces, the Repatriation Medical Authority determines, under subsection 196B(2) of the Veterans’ Entitlements Act 1986 (the Act), that the factors that must as a minimum exist before it can be said that a reasonable hypothesis has been raised connecting *chondromalacia patellae* or *death from chondromalacia patellae* with the circumstances of that service, are:

   (a) suffering direct trauma to the patella of the affected knee within six months before the clinical onset of chondromalacia patellae; or

   (b) suffering trauma to a meniscus, ligament, or the capsule of the affected knee within six months before the clinical onset of chondromalacia patellae; or

   (c) suffering abnormal tracking of the patella of the affected knee, within six months before the clinical onset of chondromalacia patellae; or
(d) suffering a twisting injury to the affected knee within six months before the clinical onset of chondromalacia patellae; or

(e) suffering direct trauma to the patella of the affected knee within six months before the clinical worsening of chondromalacia patellae; or

(f) suffering trauma to a meniscus, ligament, or the capsule of the affected knee within six months before the clinical worsening of chondromalacia patellae; or

(g) suffering a twisting injury to the affected knee within six months before the clinical worsening of chondromalacia patellae; or

(h) inability to obtain appropriate clinical management for chondromalacia patellae.

2. Subject to clause 3 (below) at least one of the factors set out in paragraphs 1(a) to 1(h) must be related to any service rendered by a person.

3. The factors set out in paragraphs 1(e) to 1(h) apply only where:

(a) the person's chondromalacia patellae was contracted before a period, or part of a period, of service to which the factor is related; and

(b) the relationship suggested between the chondromalacia patellae and the particular service of a person is a relationship set out in paragraph 8(1)(e), 9(1)(e), 70(5)(d) or 70(5A)(d) of the Act.

4. For the purposes of this Statement of Principles:

“abnormal tracking of the patella” means a lateral displacement of the path taken by the patella on extending the knee, sufficient to predispose to recurrent subluxation of the patella, and likely to occur when the divergence from the vertical of the pull of the quadriceps muscle in the affected leg reaches or exceeds 20 degrees;

“chondromalacia patellae” means a condition, attracting ICD code 717.7, characterised by softening, fraying, and ulceration of patellar articular cartilage;

“direct trauma to the patella” means a blow to the knee causing pain and inflammation within the 24 hours after receiving the blow;
“ICD code” means a number assigned to a particular kind of injury or disease in the Australian Version of The International Classification of Diseases, 9th revision, Clinical Modification (ICD-9-CM), effective date of 1 July 1995, copyrighted by the National Coding Centre, Faculty of Health Sciences, University of Sydney, NSW, and having ISBN 0 642 22235 5;

“trauma to a meniscus, ligament, or the capsule of the affected knee” means direct physical injury to the capsuloligamentous structure of the knee that causes pain or inflammation of the knee within 24 hours of the injurious process or which causes abnormal mobility and instability of the knee joint;

“twisting injury to the affected knee” means suffering excessive stretching or straining of the capsule or ligaments around the knee joint which causes abnormal mobility and instability of the knee joint.

Dated this Twenty-ninth day of August 1995

The Common Seal of the Repatriation Medical Authority was affixed to this instrument in the presence of:

KEN DONALD
CHAIRMAN