

Statement of Principles
concerning

ACHILLES TENDINOPATHY AND BURSITIS

No. 37 of 2007

for the purposes of the

Veterans' Entitlements Act 1986
and

Military Rehabilitation and Compensation Act 2004

Title

1. This Instrument may be cited as Statement of Principles concerning Achilles tendinopathy and bursitis No. 37 of 2007.

Determination

2. The Repatriation Medical Authority under subsection **196B(2)** and **(8)** of the *Veterans' Entitlements Act 1986* (the VEA):
 - (a) revokes Instrument No. 53 of 1996 concerning Achilles tendonitis or bursitis; and
 - (b) determines in its place this Statement of Principles.

Kind of injury, disease or death

3. (a) This Statement of Principles is about **Achilles tendinopathy and bursitis** and **death from Achilles tendinopathy and bursitis**.
 - (b) For the purposes of this Statement of Principles:

"**Achilles tendinopathy**" means a condition characterised by painful inflammatory or degenerative changes in the Achilles tendon, or inflammation of the paratendinous tissues; and

"**bursitis**" means inflammation and thickening of the deep retrocalcaneal bursa about the Achilles tendon.

These definitions exclude posterior adventitial heel bursitis.

- (c) Achilles tendinopathy and bursitis attracts ICD-10-AM code M76.6.
- (d) In the application of this Statement of Principles, the definitions of "**Achilles tendinopathy**" and "**bursitis**" are those given at paragraph 3(b) above.

Basis for determining the factors

- 4. The Repatriation Medical Authority is of the view that there is sound medical-scientific evidence that indicates that **Achilles tendinopathy or bursitis** and **death from Achilles tendinopathy or bursitis** 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 *Military Rehabilitation and Compensation Act 2004* (the MRCA).

Factors that must be related to service

- 5. Subject to clause 7, at least one of the factors set out in clause 6 must be related to the relevant service rendered by the person.

Factors

- 6. The factor that must as a minimum exist before it can be said that a reasonable hypothesis has been raised connecting **Achilles tendinopathy or bursitis** or **death from Achilles tendinopathy or bursitis** with the circumstances of a person's relevant service is:
 - (a) undertaking weight bearing exercise at a rate of at least five METs, that involves repeated movement of the ankle joint of the affected leg, for a total of at least ten hours within the 14 days before the clinical onset of Achilles tendinopathy or bursitis; or
 - (b) having a systemic arthritic disease at the time of the clinical onset of Achilles tendinopathy or bursitis; or
 - (c) having an injury or disease that has resulted in a specified biomechanical abnormality involving the affected foot at the time of the clinical onset of Achilles tendinopathy or bursitis; or
 - (d) undergoing a renal transplant within the ten years before the clinical onset of Achilles tendinopathy or bursitis; or
 - (e) for Achilles tendinopathy only, undergoing treatment with fluoroquinolone antibiotics within the 14 days before the clinical onset of Achilles tendinopathy; or

- (f) undertaking weight bearing exercise at a rate of at least five METs, that involves repeated movement of the ankle joint of the affected leg, for a total of at least ten hours within the 14 days before the clinical worsening of Achilles tendinopathy or bursitis; or
- (g) having a systemic arthritic disease at the time of the clinical worsening of Achilles tendinopathy or bursitis; or
- (h) having an injury or disease that has resulted in a specified biomechanical abnormality involving the affected foot at the time of the clinical worsening of Achilles tendinopathy or bursitis; or
- (i) undergoing a renal transplant within the ten years before the clinical worsening of Achilles tendinopathy or bursitis; or
- (j) for Achilles tendinopathy only, undergoing treatment with fluoroquinolone antibiotics within the 14 days before the clinical worsening of Achilles tendinopathy; or
- (k) inability to obtain appropriate clinical management for Achilles tendinopathy or bursitis.

Factors that apply only to material contribution or aggravation

- 7. Paragraphs **6(f) to 6(k)** apply only to material contribution to, or aggravation of, Achilles tendinopathy or bursitis where the person's Achilles tendinopathy or bursitis was suffered or contracted before or during (but not arising out of) the person's relevant service.

Inclusion of Statements of Principles

- 8. In this Statement of Principles if a relevant factor applies and that factor includes an injury or disease in respect of which there is a Statement of Principles then the factors in that last mentioned Statement of Principles apply in accordance with the terms of that Statement of Principles as in force from time to time.

Other definitions

- 9. For the purposes of this Statement of Principles:

"a specified biomechanical abnormality" means overpronation or underpronation, or decreased ankle or forefoot flexibility;

"a systemic arthritic disease" means:

- (a) ankylosing spondylitis; or
- (b) Behcet syndrome; or
- (c) crystal-induced arthropathy; or
- (d) enteropathic spondyloarthropathy; or
- (e) psoriatic arthropathy; or
- (f) reactive arthropathy; or
- (g) rheumatoid arthritis; or
- (h) undifferentiated spondyloarthropathy;

"crystal-induced arthropathy" means arthropathy resulting from the deposition of monosodium urate, calcium pyrophosphate dihydrate, calcium hydroxyapatite, or calcium oxalate;

"death from Achilles tendinopathy or bursitis" in relation to a person includes death from a terminal event or condition that was contributed to by the person's Achilles tendinopathy or bursitis;

"ICD-10-AM code" means a number assigned to a particular kind of injury or disease in The International Statistical Classification of Diseases and Related Health Problems, 10th revision, Australian Modification (ICD-10-AM), Fifth Edition, effective date of 1 July 2006, copyrighted by the National Centre for Classification in Health, Sydney, NSW, and having ISBN 1 86487 772 3;

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

"reactive arthropathy" means a sterile inflammatory peripheral arthropathy developing after infection at a site distant from the affected joint or joints;

"relevant service" means:

- (a) operational service under the VEA;
- (b) peacekeeping service under the VEA;
- (c) hazardous service under the VEA;
- (d) warlike service under the MRCA; or
- (e) non-warlike service under the MRCA;

"terminal event" means the proximate or ultimate cause of death and includes:

- (a) pneumonia;
- (b) respiratory failure;

- (c) cardiac arrest;
- (d) circulatory failure; or
- (e) cessation of brain function.

Application

10. This Instrument applies to all matters to which section 120A of the VEA or section 338 of the MRCA applies.

Date of effect

11. This Instrument takes effect from 9 May 2007.

Dated this `twenty-fourth` day of
`April` 2007

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

KEN DONALD
CHAIRPERSON