

Statement of Principles concerning PLANTAR FASCIITIS (Reasonable Hypothesis) (No. 82 of 2023)

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

Dated 25 August 2023.

The Common Seal of the Repatriation Medical Authority was affixed to this instrument at the direction of:

Professor Terence Campbell AM Chairperson

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1 Name

This is the Statement of Principles concerning *plantar fasciitis (Reasonable Hypothesis)* (No. 82 of 2023).

2 Commencement

This instrument commences on 26 September 2023.

3 Authority

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

4 Repeal

The Statement of Principles concerning plantar fasciitis No. 51 of 2015 (Federal Register of Legislation No. F2015L00257) made under subsection 196B(2) of the VEA is repealed.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 plantar fasciitis and death from plantar fasciitis.

Meaning of plantar fasciitis

- (2) For the purposes of this Statement of Principles, plantar fasciitis:
 - (a) means a painful inflammatory or degenerative condition of the plantar fascia of the foot; and
 - (b) excludes plantar fibromatosis.

Note: Clinical manifestations typically include pain in the inferior heel that is worse with the first steps in the morning or after a period of inactivity. There may be tenderness of the inferior heel.

Death from plantar fasciitis

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

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 plantar fasciitis and death from plantar fasciitis 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 plantar fasciitis or death from plantar fasciitis with the circumstances of a person's relevant service:

- (1) having trauma to the plantar aspect of the affected foot within the seven days before the clinical onset or clinical worsening of plantar fasciitis;
- (2) having an infection involving the plantar fascia at the time of the clinical onset or clinical worsening of plantar fasciitis;
- (3) running or jogging an average of at least 30 kilometres per week for at least the 2 months before the clinical onset or clinical worsening of plantar fasciitis;
- (4) undertaking exercise that involves repetitive weight bearing on the affected foot for:
 - (a) a minimum intensity of 5 METS; and
 - (b) for at least 4 hours per week; and

for at least the 2 months before the clinical onset or clinical worsening of plantar fasciitis;

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

Note: Exercise that involves repetitive weight bearing on the affected foot includes marching, jumping, soccer, tennis, or dancing.

- (5) increasing the frequency, duration or intensity of weight bearing activity involving the affected foot:
 - (a) by at least 100 percent; and
 - (b) to a minimum intensity of 5 METs; and
 - (c) for at least 2 hours per day;

and within the seven days before the clinical onset or clinical worsening of plantar fasciitis;

Note: *MET* is defined in the Schedule 1 – Dictionary

- (6) undergoing prolonged weight bearing on the affected foot while on a hard surface for at least five hours per day, on more days than not, for the 6 months before the clinical onset or clinical worsening of plantar fasciitis;
- (7) being overweight or obese at the time of the clinical onset or clinical worsening of plantar fasciitis;
 - Note: *being overweight or obese* is defined in the Schedule 1 Dictionary.
- (8) having a systemic arthritic disease at the time of the clinical onset or clinical worsening of plantar fasciitis;
 - Note: *systemic arthritic disease* is defined in the Schedule 1 Dictionary.
- (9) having an acquired biomechanical abnormality involving the affected foot before the clinical onset or clinical worsening of plantar fasciitis;

 Note: *biomechanical abnormality* is defined in the Schedule 1 Dictionary.
- (10) wearing footwear with inadequate cushioning during weight bearing exercise which involves the affected foot within the seven days before the clinical onset or clinical worsening of plantar fasciitis;
- (11) inability to obtain appropriate clinical management for plantar fasciitis before the clinical worsening of plantar fasciitis.

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 clinical worsening aspect of factors apply only to material contribution to, or aggravation of, plantar fasciitis where the person's plantar fasciitis 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:

being overweight or obese means having a Body Mass Index (BMI) of 25 or greater.

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

biomechanical abnormality means injury or disease that has resulted in overpronation or underpronation, or decreased ankle or forefoot flexibility.

BMI means W/H² where:

W is the person's weight in kilograms; and

H is the person's height in metres.

clinical onset means the point backwards in time from the first date of medical diagnosis, to the date at which the symptoms of plantar fasciitis were persistently present, as assessed by a registered medical practitioner.

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.

MRCA means the Military Rehabilitation and Compensation Act 2004.

other crystal-induced arthropathy means arthropathy resulting from the deposition of calcium hydroxyapatite or calcium oxalate.

plantar fasciitis—see subsection 7(2).

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 defined in the Schedule 1 - Dictionary.

systemic arthritic disease means:

- (a) ankylosing spondylitis;
- (b) enteropathic spondyloarthropathy (arthritis associated with inflammatory bowel disease);
- (c) psoriatic arthropathy;
- (d) reactive arthritis;
- (e) undifferentiated spondyloarthropathy;
- (f) gout:
- (g) pseudogout (calcium pyrophosphate dehydrate);

(h) other crystal-induced arthropathy.

Note: *other crystal-induced arthropathy* is 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.