

Revocation and Determination
of
Statement of Principles
concerning
ADHESIVE CAPSULITIS OF THE
SHOULDER

ICD-9-CM CODE: 726.0

Veterans' Entitlements Act 1986

1. The Repatriation Medical Authority under subsection **196B(2)** of the *Veterans' Entitlements Act 1986* (the Act):
 - (a) revokes Instrument No.69 of 1996; and
 - (b) determines in its place the following Statement of Principles.

Kind of injury, disease or death

2. (a) This Statement of Principles is about **adhesive capsulitis of the shoulder** and **death from adhesive capsulitis of the shoulder**.
 - (b) For the purposes of this Statement of Principles, “**adhesive capsulitis of the shoulder**” means inflammation of the joint capsule resulting in adhesions between the joint capsule and the peripheral articular cartilage of the shoulder with obliteration of the subdeltoid bursa and contracture of the joint capsule, attracting ICD-9-CM code 726.0.

Basis for determining the factors

3. The Repatriation Medical Authority is of the view that there is sound medical-scientific evidence that indicates that **adhesive capsulitis of the shoulder and death from adhesive capsulitis of the shoulder** can be

related to relevant service rendered by veterans, members of Peacekeeping Forces, or members of the Forces.

Factors that must be related to service

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

Factors

5. The factors that must as a minimum exist before it can be said that a reasonable hypothesis has been raised connecting **adhesive capsulitis of the shoulder** or **death from adhesive capsulitis of the shoulder** with the circumstances of a person's relevant service are:
 - (a) suffering trauma to the affected shoulder within the six months immediately before the clinical onset of adhesive capsulitis of the shoulder; or
 - (b) suffering quadriplegia or hemiplegia involving the affected side, or monoplegia involving the affected shoulder, within the 12 months immediately before the clinical onset of adhesive capsulitis of the shoulder; or
 - (c) suffering from diabetes mellitus at the time of the clinical onset of adhesive capsulitis of the shoulder; or
 - (d) suffering trauma to the affected shoulder within the six months immediately before the clinical worsening of adhesive capsulitis of the shoulder; or
 - (e) suffering quadriplegia or hemiplegia involving the affected side, or monoplegia involving the affected shoulder, within the 12 months immediately before the clinical worsening of adhesive capsulitis of the shoulder; or
 - (f) suffering from diabetes mellitus at the time of the clinical worsening of adhesive capsulitis of the shoulder; or
 - (g) inability to obtain appropriate clinical management for adhesive capsulitis of the shoulder.

Factors that apply only to material contribution or aggravation

6. Paragraphs **5(d) to 5(g)** apply only to material contribution to, or aggravation of, adhesive capsulitis of the shoulder where the person's adhesive capsulitis of the shoulder was suffered or contracted before or

during (but not arising out of) the person's relevant service; paragraph 8(1)(e), 9(1)(e), 70(5)(d) or 70(5A)(d) of the Act refers.

Inclusion of Statements of Principles

7. 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.

Other definitions

8. For the purposes of this Statement of Principles:

“death from adhesive capsulitis of the shoulder” in relation to a person includes death from a terminal event or condition that was contributed to by the person's adhesive capsulitis of the shoulder;

“diabetes mellitus” means an endocrine disease characterised by:

- (a) a fasting venous plasma glucose concentration equal to or greater than 7.8 millimoles per litre on at least two separate occasions; or
- (b) a venous plasma glucose concentration equal to or greater than 11.1 millimoles per litre both within two hours and at two hours after ingestion of 75 grams of glucose;

“hemiplegia” means paralysis of one side of the body;

“ICD-9-CM 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 1996, copyrighted by the National Coding Centre, Faculty of Health Sciences, University of Sydney, NSW, and having ISBN 0 642 24447 2;

“monoplegia” means paralysis of one of the limbs of the body;

“quadriplegia” means paralysis of all four limbs of the body;

“relevant service” means:

- (a) operational service; or
- (b) peacekeeping service; or
- (c) hazardous service;

“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;

“**trauma to the affected shoulder**” means a discrete injury to the shoulder that causes the development, within 24 hours of the injury being sustained, of acute symptoms and signs of pain, and tenderness, and either altered mobility or range of movement of the shoulder joint. These acute symptoms and signs must last for a period of at least three days following their onset; save for where medical intervention for the trauma to the shoulder has occurred, where that medical intervention involves either:

- (a) immobilisation of the shoulder joint or upper limb by splinting, sling or similar external agents; or
- (b) injection of corticosteroids or local anaesthetics into that joint; or
- (c) aspiration of that shoulder joint; or
- (d) surgery to that shoulder joint.

Application

- 9. This Instrument applies to all matters to which section 120A of the Act applies.

Dated this *Fourteenth* day of *January* 1999

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

KEN DONALD
 CHAIRMAN