CHAPTER 14

GASTROINTESTINAL CONDITIONS

14.01 - Peptic Ulcer Disease (non Operated)

<table>
<thead>
<tr>
<th>ASSESSMENT</th>
<th>FREQUENCY OF EXACERBATION</th>
<th>PROVEN ON X-RAY OR GASTROSCOPE</th>
</tr>
</thead>
<tbody>
<tr>
<td>0 - 5%</td>
<td>Less than 1 year</td>
<td>Never</td>
</tr>
<tr>
<td>5 - 10%</td>
<td>1 year</td>
<td>Once</td>
</tr>
<tr>
<td>10 - 15%</td>
<td>2 year</td>
<td>More than once on episodes at least 6 months apart</td>
</tr>
<tr>
<td>15 - 20%</td>
<td>Over 2 year or continual complaints</td>
<td></td>
</tr>
</tbody>
</table>

The following complications are included in the assessment and should have as a minimum:

1) bleed  10%
2) obstruction  15%
3) perforation  15%

14.02 - Peptic Ulcer Disease (Operated)

Partial gastrectomy, vagotomy and/or pyloroplasty for peptic ulcer:

a) following surgical treatment (mandatory review in six months)  40%

b) ultimate minimum  15%

The 15% minimum for post op patients would include the average complaints and expected accompaniments of changed physiological function. True complications warrant an increase in assessment. Complications to be considered in the assessment include:

1) dumping syndrome
2) bile reflux (gastritis)
3) recurrent ulcer (anastomotic)
4) post vagotomy diarrhea
5) anemia = Iron, B12 deficiency

A maximum total assessment of 35% should very rarely if ever be exceeded.
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GASTROINTESTINAL CONDITIONS

14.02 - Peptic Ulcer Disease (Operated)...CONTINUED

The following should not be included in the assessment but be submitted for consequential rulings:

1) intestinal obstruction secondary to adhesions
2) hiatus hernia
3) incisional hernia
4) cancer of stomach after partial gastrectomy

14.03 - Hiatus Hernia Without Reflux

Nil Assessment.

14.04 - Gastroesophageal Reflux

Nil to 10%

Complications:

a) Erosions Distal Esophagus .................. 5 - 10%
b) Ulcerations ................................ 10 - 20%
c) Stricture Formation ..................... 15 - 30%

14.05 - Incisional Hernia

Nil to 10%

14.06 - Loss of Spleen

Generally not a disability. Nil assessment appropriate in most cases.

14.07 - Colostomy, Ileostomy and Ileal conduit

Permanent colostomy or continent ileostomy .................. 30% minimum
Permanent standard ileostomy .................................. 40% minimum
Permanent ileal conduit ........................................... 30% minimum

14.08 - Functional Gastrointestinal Disorders

Nil to 10%
CHAPTER 14

GASTROINTESTINAL CONDITIONS

14.09 - Anorectal Conditions

Symptoms arising from multiple conditions in the anal region are similar whether the disease process is due to haemorrhoids, recurrent infection, bowel prolapse or neurological dysfunction. Assessments are based on the resulting impairment of function irrespective of the specific pensionable condition. Anal conditions shall be assessed in accordance with the Table to Article 14.09.

<table>
<thead>
<tr>
<th>TABLE TO ARTICLE 14.09</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Minor hemorrhoidal tags and/or mild pruritus. Pruritus, occasional bleeding, no overt prolapse.</td>
</tr>
<tr>
<td>2. Clinical evidence of internal haemorrhoids, pruritus, minimal skin changes, minor recurrent bleeding controlled by medication or diet. Minor post-operative complication controlled by medication or diet.</td>
</tr>
<tr>
<td>3. Intermittent prolapse, recurrent bleeding and/or pruritus with evidence of mild excoriation or maceration of skin. Occasional soiling.</td>
</tr>
<tr>
<td>4. Cases in which there is evidence of continued continence, operative scarring, marked skin changes, will be judged on individual merit.</td>
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