



**MYRNA S. MALINAO,**  
*Appellant,*

**-versus-**

**ECC CASE No. SM-19536-1024-16**

**SOCIAL SECURITY SYSTEM (SSS),**  
*Appellee.*

x-----x

## **D E C I S I O N**

This appeal seeks to review the decision, dated September 8, 2016, of the Social Security System-Medical Claims Review Committee (SSS-MedCRC) denying appellant's claim for death benefits, under the Employees' Compensation Law (P.D. No. 626, as amended), for the death of her husband due to Acute Heart Attack. The claim was denied on the ground of no causal relationship.

From April 9, 2014 until his death on March 6, 2015, the deceased, Meliton P. Manilao (SSS No. 03-5569145-2), 60 years old at the time of death and a former resident of Dasmarinas City, Cavite, was employed as 2<sup>nd</sup> Officer of Lacierta Shipping Agencies Philippines, Inc., Manila, with the following duties and responsibilities:

1. Acts as watch stander at sea and at the port;
2. As Navigation Officer- maintains all navigation equipment, publications, charts and prepares information for the bridge; ensures bridge electronics, navigational aids, alarm systems and lights; plots voyage tracks for the Master's approval using up to date Sailing Directions, Coast Pilot, Light List and Tide and Current Tables; ensures all required flags are aboard and in good condition;
3. As Weather Officer- responsible for general maintenance of all weather related equipment and for having adequate supplies are on board at all times; sends reports and weather data to appropriate parties as needed during scientific cruises.

On April 3, 2014, the deceased underwent medical examination and he was found fit for sea-duty. On March 6, 2015, the deceased was found dead inside his cabin. The ship was then sailing within the territorial waters of Kuwait. Based on the Death Certificate which was issued by the Ministry of Health, State of Kuwait, the deceased died of Acute Heart Attack. On March 17, 2015, the remains of the deceased were repatriated to the Philippines. There is no showing that the remains of the deceased were subjected to autopsy examination.

On September 8, 2016, the SSS-Medical Claims Review Committee (SSS-MedCRC) denied the claim for EC death benefits through Resolution No. 2016-0399 reasoning that:

**“...there is no causal relationship between member’s job as 2<sup>nd</sup> Mate and his cause of death, Acute Heart Attack.”**

On October 20, 2016, the Secretariat received the records of the case from the SSS for review purposes.

On October 28, 2016, this case was submitted to the Technical Review Committee (Committee) for initial deliberation. The Committee decided to elevate this case to the Commission with a recommendation to grant EC death with funeral benefits on the ground of satisfaction of one of the conditions for compensability of Cardiovascular Disease. Specifically, the Committee recognized the strenuous working conditions of the deceased as 2<sup>nd</sup> Mate which caused or contributed to the manifestation of his fatal heart illness.

***The appeal is meritorious.***

Article 173 (formerly 167) paragraph (I) of Presidential Decree (P.D.) No. 626, as amended, defines sickness as "any illness definitely accepted as an occupational disease listed by the Commission, or any illness caused by employment subject to proof that the risk of contracting the same is increased by working conditions." Section 1 (b), Rule III, of the Rules Implementing P.D. No. 626, as amended, provides that “for the sickness and the resulting disability or death to be compensable, the sickness must be the result of an occupational disease included under Annex “A” of these Rules (Amended Rules on Employees’ Compensation) with the conditions set therein satisfied; otherwise, proof must be shown that the risk of contracting the disease is increased by the working conditions.”

Medical findings provide the etiology of Myocardial Infarction in this manner, to wit:

#### **Myocardial Infarction**

- “Myocardial Infarction (MI) or “Heart Attack” is a medical emergency caused by a block on the coronary arteries (the blood vessels that supply blood to the heart tissue). A block on one of these arteries results in loss of blood supply to the heart tissues and later on leads to death of the cells. The death of the cells could lead to loss of pumping function of the heart which, in turn, could lead to reduced or very low blood supply.



- “Cigarette smoking, hypertension and the presence of too much fat in the body produce heart attack. Patients most likely to develop MI include those who are excessively heavy, physically inactive, diabetics and those with history of angina or chest pain due to inadequate heart tissue oxygenation. Less common medical conditions that could lead to MI include hypercoagulability (tendency of the blood to thicken rapidly), collagen vascular disease (a disorder involving inflammatory changes of the blood vessels and connective tissues) and cocaine abuse.”

*Reference:*

*Harrison's Principles of Internal Medicine, 15<sup>th</sup> Edition, Volume 1, pp.1387-1399.*

Cardiovascular Disease (Myocardial Infarction) is listed as an occupational disease under Annex “A” of the Amended Rules on Employees’ Compensation. Thus, the appellant is bound to comply with all the conditions required to warrant the grant of benefits. Under Annex “A” of the Amended Rules on Employee’s Compensation, Cardiovascular Diseases are considered compensable under any of the following conditions:

- a. “If the heart disease was known to have been present during employment, there must be proof that an acute exacerbation was clearly precipitated by the unusual strain by reasons of the nature of his work;
- b. The strain of work that brings about an acute attack must be of sufficient severity and must be followed within 24 hours by the clinical signs of a cardiac insult to constitute causal relationship;
- c. “If a person who was apparently asymptomatic before being subjected to strain at work showed signs and symptoms of cardiac impairment during the performance his work and such symptoms and signs persisted, it is reasonable to claim a causal relationship subject to the following conditions:
  1. “If a person is a known hypertensive, it must be proven that his hypertension was controlled and that he was compliant with treatment;
  2. “If a person is not known to be hypertensive during his employment, his previous health examination must show normal results in all of the following, but not limited to: blood pressure, chest x-ray, electrocardiogram (ECG)/treadmill exam, CBC and urinalysis.
- d. “A history of substance abuse must be ruled out.”  
(ECC Resolution No. 432, dated July 20, 1977, as amended by ECC Resolution No. 11-05-13, dated May 26, 2011)

After a thorough medical evaluation of the case, this Commission believes that the condition of the deceased falls under the abovementioned second condition which provides:

- a. "The strain of work that brings about an acute attack must be of sufficient severity and must be followed within 24 hours by the clinical signs of a cardiac insult to constitute causal relationship;"

In the recent case of Ma. Katrina P. Viado vs. SSS (SM-19393-0310-15 [2015]), this Commission, citing medical findings, has illustrated the hazards of maritime occupation in this manner, to wit:

"Arguably the most characteristic exposure defining the maritime industries is the pervasive presence of the water itself. The most variable and challenging of water environments is the open ocean. Oceans present constantly undulating surfaces, extremes of weather and hostile travel conditions, which combine to cause constant motion, turbulence and shifting surfaces and can result in vestibular disturbances (motion sickness), object instability (e.g., swinging latches and sliding gear) and the propensity to fall.

"Humans have limited capability to survive unaided in open water; drowning and hypothermia are immediate threats upon immersion. Vessels serve as platforms that permit the human presence at sea. Ships and other water craft generally operate at some distance from other resources. For these reasons, vessels must dedicate a large proportion of total space to life support, fuel, structural integrity and propulsion, often at the expense of habitability, personnel safety and human factor considerations. [Encyclopedia of Occupational Health and Safety, Fourth Edition, Stellman, Volume III, Industries and Occupations, p. 102.41, 2<sup>nd</sup> col., under the Title Environmental Hazards]

"Physical hazards unique or particular concern to specific vessel types. Physical hazards are the most common and pervasive hazard aboard vessels of any type. Space limitations result in narrow passageways, limited clearance, steep ladders and low overheads. Confined vessel spaces means that machinery, piping, vents, conduits, tanks and so forth are squeezed in, with limited physical separation. Vessels commonly have openings that allow direct vertical access to all levels. Inner spaces below the surface deck are characterized by a combination of large holds, compact spaces and hidden compartments. Such physical structure places crew members at risk for slips, trips and falls, cuts and bruises, and being struck by moving or falling objects.

"Constricted conditions result in being in close proximity to machinery, electrical lines, high-pressure tanks and hoses, and dangerously hot or cold surfaces. If unguarded or energized, contact can result in burns, abrasions, lacerations, eye damage, crushing or more serious injury.

"Since vessels are basically a composite of spaces housed within a water-tight envelope, ventilation can be marginal or deficient in some spaces, creating a hazardous confined space situation. If oxygen levels are depleted or air is displaced, or if toxic gases enter these confined spaces, entry can be life-threatening.



“Refrigerants, fuels, solvents, cleaning agents, paints, inert gases and other chemical substances are likely to be found to any vessel. Normal ship activities, such as welding, painting and trash burning can have toxic effects. Transport vessels (e.g. freight ships, container ships and tank ships) can carry a host of biological or chemical products, many of which are toxic if inhaled, ingested or touched with the bare skin. Others can become toxic if allowed to degrade, become contaminated or mix with other agents. Toxicity can be acute, as evidenced by dermal rashes ocular burns, or chronic, as evidenced by neurobehavioral disorders and fertility problems or even carcinogenic. Some exposures can be immediately life-threatening. Examples of toxic chemicals carried by vessels are benzene-containing petrochemicals, acrylonitrile, butadiene, liquefied natural gas, carbon tetrachloride, chloroform, ethylene dibromide, ethylene oxide, formaldehyde solutions, nitropropane, o-toluidine and vinyl chloride. [op.cit., p. 102.42-43, under the Title Physical and chemical hazards]

“One of the realities aboard ship is that the crew is often in close contact. In the work, recreation and living environments, crowding is often a fact of life that heightens the requirement for maintaining an effective sanitation programme. Critical areas include: berthing spaces, including toilet and shower facilities; food service and storage areas; laundry; recreation areas; and, if present, the barbershop. [ibid., at 102.43, an excerpt from Sanitation and communicable disease hazards]

“Listed as one of Health hazards common across vessel types is Sanitation, the Description of which is Disease related to unsafe water, poor food practices or improper waste disposal. Examples are: contaminated potable water, food spoilage, and deteriorated vessel waste system.” [id., at 102.42, under Table 102. 8]

On the basis of the abovementioned findings, this Commission sympathizes with the plight of Filipino seamen.

In the case of Heirs of the Late R/O (Radio Operator) Reynaldo Aniban vs. NLRC (G.R. No. 116354, December 4, 1997 citing Panangui vs. ECC, G.R. No. L-56259, March 18, 1983), the Supreme Court ruled that the Myocardial Infarction of a Radio Operator/Seaman is compensable on the ground that any kind of work or labor produces stress and strain normally resulting in the wear and tear of the human body. In the said case, the Supreme Court also held that “*it is not required that the occupation be the only cause of the disease as it is enough that the employment contributed even in a small degree to its development.*” (citing Abana vs. Quisumbing, No. L-23489, March 27, 1968).

In this case, the strain is even greater considering the multiple tasks of the deceased as 2<sup>nd</sup> Mate. He was among the crew whose responsibility entailed watch-standing, maintenance of navigation equipment, alarm systems, lights and navigational aids, ensuring that all flags of the vessel are in proper places and in good condition, and plotting of voyage tracks. Considering that his job is important in the navigation of the vessel, it is not implausible to imagine that the deceased had been performing the same for almost 24 hours. The rigors of the said duties and responsibilities may no longer be as easy for a 60 year old Filipino seaman.

On March 6, 2015, the deceased was found dead inside his cabin. There is no showing that a foul play occurred in the said incident. This Commission cannot discount the possibility that the long working hours of the deceased may have caused over-exertion and fatigue which, eventually, led to the manifestation of his heart attack. Owing to the absence of any non-work related risk-factors such as lifestyle and atherosclerosis in this case, this Commission believes that the strenuous working conditions of the deceased onboard a vessel caused or contributed to the manifestation of his fatal illness.

**WHEREFORE**, premises considered, the denial of the SSS on the claim of the appellant is hereby **REVERSED** and the SSS is ordered to grant EC death with funeral benefits to the qualified beneficiaries of the deceased in accordance with Article 200 (formerly 194) paragraph (a) of P.D. No. 626, as amended, and its Implementing Rules and Regulations.

**SO ORDERED.**

**CITY OF MAKATI,  
November 7, 2016.**





## BOARD RESOLUTION NO. 16-11-41

### ***Approving the Recommendations of the Technical Review Committee (TRC) on Two (2) EC Appealed Cases from the GSIS and Three (3) EC Appealed Cases from the SSS***

**WHEREAS**, Article 186 (formerly 180) of P.D. No. 626, as amended, partly provides:

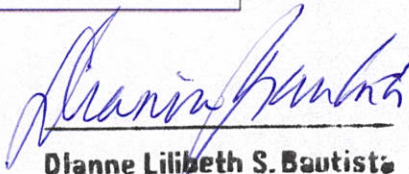
**"ART. 186. Settlement of Claims.-** The System shall have original and exclusive jurisdiction to settle any dispute arising from this Title with respect to coverage, entitlement to benefits, collection and payment of contributions and penalties thereon, or any other matter related thereto, subject to appeal to the Commission..." (emphasis supplied)

**WHEREAS**, on October 28, 2016, the Technical Review Committee (TRC) has deliberated on the following EC appealed cases from the GSIS and the SSS. The recommendations of the TRC are as follows:

#### **I. GSIS**

<b><i>Title of the Case/Nature of Appeal</i></b>	<b><i>TRC Recommendation</i></b>
<b>I.1. DIMAYACYAC, Rotchel B. vs. GSIS (GM-19533-1017-16)</b>  Nature of Claim: <i>EC disability benefits due to Chronic Suppurative Otitis Media, AS; with Cholesteatoma Formation, AS S/P Mastoidectomy</i>  Occupation of the Covered Member: <i>Public School Teacher</i>	<b><i>For Denial</i></b>  <b>Reason for Denial:</b>  <i>No causal relationship</i>
<b>I.2. PALOMO, Amelita F. vs. GSIS (GM-19534-1024-16)</b>  Nature of Claim: <i>EC disability benefits due to Abnormal Uterine Bleeding Secondary to Complex Hyperplasia with Atypia S/P Total Hysterectomy and Bilateral Salpingoophorectomy S/P Diagnostic Dilatation and Curettage</i>  Occupation of the Covered Member: <i>Teacher I</i>	<b><i>For Denial</i></b>  <b>Reason for Denial:</b>  <i>No causal relationship</i>

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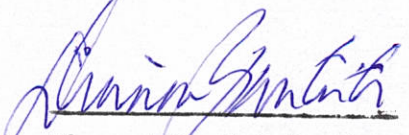
  
**Dianne Lilibeth S. Bautista**  
**Board Secretary III**



**II. SSS**

<b>Title of the Case/Nature of Appeal</b>	<b>TRC Recommendation</b>
<p><b>II.1. SERQUINA, Joel S. v. SSS</b> <b>(SM-19525-0810-16)</b></p> <p>Nature of Claim: <i>EC disability benefits due to Chronic Venous Insufficiency</i></p> <p>Occupation of the Covered Member: Security Guard</p>	<p><b>For Award</b></p> <p>Basis for Award:</p> <p>The appellant's working condition as security guard, which entails prolonged sitting and standing, increased his risk of contracting the claimed illness.</p>
<p><b>II. 2. PEDOC, Mary Ann L. v. SSS</b> <b>(SM-19537-1024-16)</b></p> <p>(Arnaldo B. Pedoc - deceased)</p> <p>Nature of Claim: <i>EC death benefits due to Cardiogenic SHock secondary to Massive Myocardial Infarction</i></p> <p>Occupation of the Covered Member: Seaman-Fitter</p>	<p><b>For Award</b></p> <p>Basis for Award:</p> <p>Satisfaction of condition for compensability; unusual strain at work caused the manifestation of the fatal heart ailment of the deceased</p>
<p><b>II.3. MALINAO, Myrna S. v. SSS</b> <b>(SM-19536-1024-16)</b></p> <p>(Meliton P. Malinao-deceased)</p> <p>Nature of Claim: <i>death benefits due to Acute Heart Attack</i></p> <p>Occupation of the Covered Member: 2nd Mate</p>	<p><b>For Award</b></p> <p>Basis for Award:</p> <p>Satisfaction of condition for compensability; unusual strain at work caused the manifestation of the fatal heart ailment of the deceased</p>

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**Glanette Lilibeth S. Bautista**  
Board Secretary III



**WHEREAS**, considering that this Commission is mandated to resolved EC appealed cases within the period of 20 working days, the abovementioned EC appealed cases are deemed resolved on the date of start of routing, or on November 4, 2016, by the Secretariat of this Resolution to the other members of the Commission for purposes of compliance with the prescribed 20 working day PCT;

**ON THE BASIS OF THE CONCURRENCE OF THE MEMBERS OF THE COMMISSION**

This Commission **RESOLVES AS IT HEREBY RESOLVED** that the recommendations of the TRC in the abovementioned cases be approved:

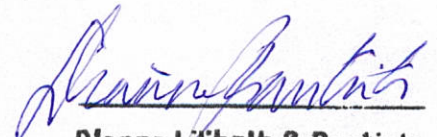
**RESOLVED FURTHER**, that the entire original records of the cases of **Joel S. Serquina vs. SSS (SM-19525-0810-16)**, **Mary Ann L. Pedoc vs. SSS (SM-19537-1024-16)** and **Myrna S. Malinao (SM-19536-1024-16)** be transmitted to the SSS for enforcement of Decisions of this Commission granting EC benefits to the concerned claimants within 15 days upon receipt of Notices of Decisions;

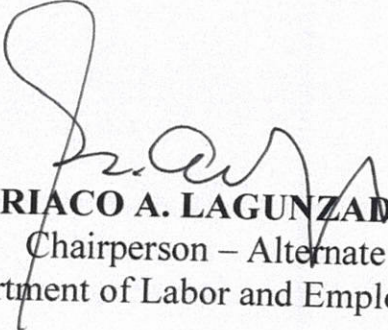
**RESOLVED FINALLY**, that copy of this Resolution and Decisions on the abovementioned cases be duly furnished to the GSIS and to the SSS for guidance and/or compliance.

**APPROVED**, in Makati City, 04 November 2016.

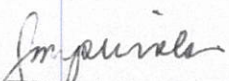
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**Dianne Lilibeth S. Bautista**  
Board Secretary III



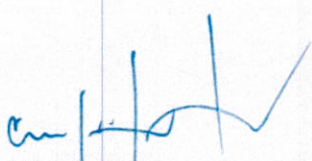
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Chairperson – Alternate  
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**BRENDA P. VIOLA**  
Member – Designate  
Social Security System




**DIONISIO C. EBDANE, JR.**  
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**RAMON F. ARISTOZA, JR.**  
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Board Secretary III