

**GOVERNMENT SERVICE INSURANCE SYSTEM (GSIS), PETITIONER,
VS. HON. COURT OF APPEALS AND NICOLAS FLORES, RESPONDENTS.***G.R. No. 115243. December 01, 1995*

Ponente: FELICIANO, J.

Read online (full-text search, related cases, audio case brief): <https://batas.org/library/g-r-no-115243/>**FELICIANO, J.:**

Private respondent Nicolas Flores started his government service on 30 April 1967 when he joined the Philippine Constabulary at Camp Sergio Osmeña, Sr., Cebu City. In August of that same year, Flores was transferred to the 361st PC Co., Camp Lukban, Samar where he served as Clerk Typist. Later, in June 1968, he was transferred to the 1363rd PC Dental Detachment, Camp Sotero Cabahug, Cebu City and there he served as Dental Aide Technician.

In 1971, private respondent was promoted to the position of Supply Sergeant, Regional Dental Service, Unit VII, and was placed in charge of the acquisition and disposition of all kinds of medicines. He also worked as a Dental X-Ray Technician and as a Dental Xerox Machine Operator and Clerk Typist.

Sometime in February 1989, private respondent commenced experiencing headaches associated with blurring of vision, reddening of the eyes and nausea. On 27 March 1989, he was admitted to the Tacloban City Medical Center. The Certifications issued by his attending physician[1] and that issued by the Tacloban City Medical Center[2] reveal that his ailments were diagnosed as "Chronic Angle Closure Glaucoma OS; Acute Angle Closure Glaucoma OD; and Anterior Polar Cataract OU." Flores underwent surgical procedures which were described as "S/P Filtering with Trabeculectomy" on the left eye and "Peripheral Iridectomy" on the right eye. He was discharged from the hospital on 15 April 1989 in an improved condition. On 2 February 1990, Flores was again admitted to the PC-INP General Hospital in Camp Crame, Quezon City and diagnosed as suffering from "Cataract OU" and as requiring "S/P removal of after or secondary cataract." He was discharged from this hospital on 15 May 1990.

On 27 August 1990, Flores filed with petitioner Government Service Insurance System ("GSIS") a claim for income benefits under the Employees' Compensation Law (Title II, Book IV of the Labor Code, as amended). The GSIS disapproved his claim upon the ground that his "chronic angle closure glaucoma" was not an occupational disease within the contemplation of the Labor Code and that there was no showing that his occupation had increased the risk of contracting that ailment. Private respondent Flores appealed to the Employees' Compensation Commission ("ECC"); the latter affirmed the decision of the GSIS.

Flores then went to the Court of Appeals on a petition for review. The Court of Appeals reversed and set aside the decision of the ECC and declared private respondent's "chronic angle closure glaucoma" a compensable illness under the Employees' Compensation Law, as amended. The Court of Appeals said:

"After considering the compassionate attitude that We have to adopt in determining the appeal in this case, and adhering to the liberal interpretation of PD 626 as amended, We rule that the law itself, being basically a social legislation, should be treated as such in order to afford relief to the working men and women in Our society

(Lazo v. ECC, et al., 186 SCRA 569). In the instant appeal, the petitioner could no longer work because of loss of vision. This occurred during his occupation or performance of his job in the government for a very long time. Since the cause of Glaucoma is still uncertain or undetermined by medical science, the requirement of causal link should indeed be understood liberally so that substantial justice will be served to Our working men and women who looked at their job with devotion and dedication.

ACCORDINGLY, in the light of the foregoing, the decision of the Employees Compensation Commission is REVERSED and SET ASIDE, and a new one is hereby rendered declaring petitioner's Chronic Angle Closure Glaucoma as a compensable illness under PD No. 626 as amended, and directing the respondent GSIS to pay herein petitioner the benefits due him under the existing law."^[3]

Disputing the result reached and the basis relied upon by the Court of Appeals, GSIS filed the instant Petition for Review.

Petitioner GSIS avers that Flores's "chronic angle closure glaucoma" is not work-connected and that Flores had not shown that the risk of contracting that ailment had been enhanced by his working conditions. GSIS relies on medical findings indicating that "chronic angle closure glaucoma" is caused by an inherited anatomic defect which has no causal relationship with his occupation either as a Clerk Typist, or a Supply and Procurement Officer, or as a Dental X-Ray Technician, or as a Dental Copying Machine Operator:

"Medical findings disclosed that Closure Glaucoma is an abnormality in which intraocular pressure increases because the outflow of aqueous humor from the [a]nterior chamber is mechanically impaired by contact of the iris with the trabecular drainage meshwork and the peripheral cornea. This is a type of glaucoma in which the patient never has a severe, acute, congestive attack but has an intermittent periods of increased pressure. The disease occurs because of an inherited anatomic defect that causes a shallow [a]nterior chamber. (Reference: Ophthalmology, Principles and Concepts, 5th Edition by Frank Newell, pp. 349-352)."^[4]

We note at the outset that private respondent Flores is not only suffering from glaucoma but from cataract as well.^[5] The Hospitalization Claim for Payment Form and the Medical Certificate issued by the Tacloban City Medical Center show that Flores was, from the start, diagnosed to be suffering, as already noted, from glaucoma on the left eye, glaucoma on the right eye and anterior polar cataract on both eyes.^[6] Further, as also noted earlier, within a year after his first surgery, Flores was again hospitalized for removal of an after and secondary cataract. Thus, although apparently the precise issue raised and resolved below by the Court of Appeals and earlier by the ECC and the GSIS, related to the compensability of private respondent's glaucoma, the fact that he had, at the same time, cataract which required surgery must be considered by the Court.

The Employees' Compensation Law as set out in the Labor Code as amended, grants disability benefits to those who suffer loss or impairment of a physical or mental function resulting from injury arising out of, or in the course of employment, or from any illness accepted as an occupational disease listed by the ECC or any illness subject to proof that the risk of contracting the same was increased by the claimant's working conditions.^[7] Thus, where the claimant's illness is not listed in the table of occupational diseases embodied in Annex "A" of the Rules on Employees' Compensation, he bears the burden of proving by substantial evidence reasonable work-connection, if not direct causal relationship between his ailment and his working conditions.^[8]

In the case at bar, there is no question that angle closure glaucoma is not among the occupational diseases or illnesses set out in the list attached to the Employees' Compensation Law. Clearly, however, that list includes "cataract produced by exposure to the glare of or rays from molten glass or molten or red hot metal" and what is known as "Glass Blower's cataract" common among furnace men, glass blowers, bakers, blacksmiths, foundry workers and other workers exposed to infra-red rays.^[9]

Medical literature describes the nature and underlying causes of cataract of the eye as follows:

"Cataract is a disease of the crystalline lens with the clinical appearance of clouding. Cataracts are caused by the action of chemical or physical factors disturbing the internal respiration and the metabolic processes in the lens, thus inhibiting its nutrition and giving rise to the atrophy of epithelial elements of the capsule.

x x x x x x x x

Acquired cataracts also include lens opacities caused by occupational factors such as electricity, ionizing and non-ionizing radiation, toxic substances.

x x x x x x x x

Radiation cataract. Ionizing radiation (X-rays, gamma radiation, neutrons) is a serious cataractogenic factor. Cataract develops after exposure to both high doses and repeated small doses. The latency varies between 6 months and 2 years; it may extend to 8-12 years in certain cases. The higher the dose, the shorter is the latent period of cataract. x x x. Radiation cataract is encountered in persons employed in x-ray services, radiographic testing, nuclear power plants, and also in workers handling radioactive isotopes. x x x. Ionizing radiation also causes retinal damage. Radiation cataracts generally progress slowly. The initial opacities remain unchanged for years without noteworthy loss of sight. Signs of radiation disease are not necessarily evident.

Preventive measures to protect workers from ionizing radiation include lead shields or containers, spectacles with leaded glasses and observance of safe distances. During x-ray or gamma-ray treatment in the face region, the eyes are protected by lead masks."[10] (Underscoring supplied)

The literature is also consistent in naming exposure to x-ray radiation as among the recognized causes of cataract formation.[11] Although x-ray radiation is distinct from glare or rays from "molten glass" or "red hot metal," we consider that the former is closely analogous to the latter and that cataracts due to the former are reasonably assimilated to cataracts ascribable to the latter.

It is not disputed that private respondent Flores had been working at various PC-INP dental clinics or dispensaries, where part of his work consisted of operation of dental x-ray machines. This work, of course, involved exposure to x-ray radiation.[12] In support of his claim, private respondent Flores submitted to the ECC a letter setting forth the professional opinion of an ophthalmologist, Dr. Norma Berbano, to the effect that one of the causes of cataract formation is "over exposure to x-ray and radioactive material." [13]

The state of medical opinion finds reflection in the case law of the Court. In *Jarillo v. Employees' Compensation Commission*, [14] the Court held that the nature of claimant's duties as a construction worker, which involved exposure to the sun's glare and heat as well as to excessive dirt and dust, had undoubtedly increased the risk of his contracting cataract of the eye. Again, in *Loyola v. Government Service Insurance System*, [15] the Court held as compensable the illness of a district supervisor of the Department of Education, Culture and Sports (DECS) which was diagnosed as cataract with glaucoma. The duties of the claimant and as district supervisor included attending athletic meet as well as supervising and managing the training of division athletes. The Court said:

"From the foregoing, it is clear that while the ailment of petitioner of cataract with glaucoma may be attributed to his aging, his exposure to the environment because of his work under the direct heat of the sun, strong winds, dirty dust, rains and unfavorable conditions must have contributed to if not aggravated his illness. Hence petitioner is entitled to compensation." [16]

In the case at bar, the Court finds sufficient proof of work-connection, if not direct causal relationship, between the ailment of private respondent Flores consisting of cataract formation and his working conditions. His work as an x-ray machine operator for almost twenty (20) years must have substantially contributed to his illness. The circumstance that Flores's cataract was associated with glaucoma the latter not being listed as an occupational disease in our statute books is of no moment. We believe and so hold that the incidence of a listed occupational

disease, whether or not associated with a non-listed ailment, is enough basis for requiring compensation. It remains only to note that the causes of angle closure glaucoma appear to be still unknown although some predisposing factors, such as vasomotor and emotional instability, hyperopia and heredity, appear to have been identified.[17] Should medical science be able in the future to ascertain those causes, courts may then be in a position to determine the presence or absence of the element of causal relationship or work-connection in particular cases.

WHEREFORE, the instant Petition for Review is hereby DENIED for lack of merit. The Decision of the Court of Appeals in C.A.-G.R. SP No. 30521 is AFFIRMED so far as the result reached is concerned, but MODIFIED so as to declare Nicolas F. Flores's ailment of anterior polar cataract (not glaucoma) compensable under the Labor Code, as amended. Costs against petitioner.

SO ORDERED.

Romero, Melo, Vitug, and Panganiban, JJ., concur.

[1] Records, pp. 36-37.

[2] Id., p. 43.

[3] Rollo, p. 24.

[4] Memorandum of Petitioner GSIS, pp. 4-5; Rollo pp. 71-72.

[5] See the Final Diagnosis of Dr. Lemuel I. Gatchalian, M.D., in the Employees' Compensation Hospitalization Claim for Payment Form and the Medical Certificate issued by the Tacloban City Medical Center re: first treatment of Nicolas Flores (27 March 1989 to 15 April 1989), Records pp. 36-37 and 43.

[6] Id.

[7] Article 167 (1) and (n), Title II, Book IV, Labor Code as amended; Section 1(b), Rule III, Amended Rules on Employees' Compensation.

[8] See *Reyes v. Employees' Compensation Commission*, 206 SCRA 726 (1992); *Narazo v. Employees' Compensation Commission*, 181 SCRA 874 (1990); *Magistrado v. Employees' Compensation Commission*, 174 SCRA 605 (1989); *Sante v. Employees' Compensation Commission*, 174 SCRA 557 (1989); and *Garol v. Employees' Compensation Commission*, 168 SCRA 108 (1988).

[9] Annex "A," "Occupational Diseases," Items (3) and (8)(c), Amended Rules on Employees' Compensation, effective 1 June 1987.

[10] *Encyclopaedia of Occupational Health and Safety*, Vol. 1, Third Revised Edition (1989), pp. 426-427.

[11] See *The Merck Manual of Diagnosis and Therapy* (1982), pp. 1996-1997; *Harrison's Principles of Internal Medicine*, Vol. 1, Eleventh Edition (1987), p. 72; and *The New Encyclopaedia Britannica*, Vol. 2, 15th Edition (1992), p. 947-948.

[12] In his motion for reconsideration filed with the GSIS and in his appeal to the ECC, private respondent Flores stated:

"From 1 June 1969 to 31 March 1989, I was assigned at various PC/INP Dental Dispensaries at Recom 7, Cebu City and Recom 8, Tacloban City as Dental X-ray Machine Operator, thereby exposing myself, particularly my

eyes, to X-rays and radiation. Dilation of my pupils when operating the Dental X-ray machine on a patients' teeth, that is, when positioning the machine exactly on the area of the tooth to be X-rayed is something normal and regular to get accurate result in my work." (Folder of Records, p. 21.)

[13] Folder of Records, p. 48.

[14] 112 SCRA 264 (1982).

[15] 189 SCRA 82 (1990).

[16] 189 SCRA at 86-87.

[17] The Merck Manual of Diagnosis and Therapy (1982), p. 2006.

ABOUT BATAS.ORG

Study smarter at BATAS.org

The Philippine bar review and law-school companion built around how your brain actually remembers.

The complete Philippine law library - free for everyone.

More than 100,000 Supreme Court decisions, Republic Acts, and executive issuances - full-text searchable, browsable by category and year, and always free. No paywall, no login. This PDF came from it.

Audio case-brief lectures.

Any decision becomes a podcast-style lecture - facts, issues, ruling, and doctrine - with read-along highlighting and a hands-free presentation mode. Study while commuting, working out, or resting your eyes.

Bar review built on the science of memory.

Complete, sequenced courses for all eight bar subjects, narrated like podcasts and reinforced with retrieval practice and spaced review - the study techniques with the strongest evidence behind them.

The full law-school curriculum.

One subscription unlocks the entire J.D. curriculum - every subject, every lesson, with your progress tracked down to the paragraph so you can pick up exactly where you left off, on any device.

Mock exams that tell you where you stand.

Timed multiple-choice exams graded instantly, with per-subject score breakdowns and focus suggestions that point you at your weakest topics first.

A study planner that keeps you on pace.

Set your schedule and BATAS tells you every day whether you are on track for bar day - and exactly which lesson to take next.

Start free at <https://batas.org>

The law library is free forever - and your first lesson is one click away.

The text of this document is an official public record and remains in the public domain. Formatting, presentation, and compilation © 2026 batas.org.

Downloaded free from the batas.org Law Library. Share it freely - the library is free for every law student, bar reviewee, and practitioner.