

CARMEN SANTOS, PETITIONER, VS. EMPLOYEES' COMPENSATION COMMISSION AND GOVERNMENT SERVICE INSURANCE SYSTEM (PHILIPPINE NAVY), RESPONDENTS.

G.R. No. 89222. April 07, 1993

Ponente: NOCON, J.

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NOCON, J.:

Is liver cirrhosis an illness which is compensable? This is the question put forth by petitioner, Carmen Santos, whose husband died of liver cirrhosis while still a civilian employee of the Philippine Navy.

Francisco Santos was employed as welder at the Philippine Navy and its Naval Shipyard as early as March 22, 1955. He spent the last 32 years of his life in the government service, the first year as a welder helper and the last two years as shipyard assistant.

On December 29, 1986, Francisco was admitted at the Naval Station Hospital in Cavite City, on complaint that he was having epigastric pain and been vomiting blood 2 days prior to his hospitalization. His case was diagnosed as bleeding Peptic Ulcer disease (PUD), cholelithiasis and diabetes mellitus. On January 11, 1987, he died, the cause of which as indicated in the Death Certificate was liver cirrhosis.

Mrs. Carmen A. Santos filed a claim for the death benefit of her husband, Francisco, on January 28, 1987, pursuant to Presidential Decree No. 626, as amended. However, on a letter dated April 30, 1987, the Government Service Insurance System (GSIS), denied the claim on the ground that upon proofs and evidence submitted, Francisco's ailment cannot be considered an occupational disease as contemplated under P.D. 626, as amended.

Mrs. Santos then sought the assistance of the Commander of NASCOM, PN, who in turn wrote the GSIS requesting for a favorable action on her claim. Said letter also substantiated petitioner's claim that her husband's duties as Senior Welder, assigned at the Structural Branch of the Naval Shipbuilding Facility, required him to perform delicate welding jobs inside compartments of naval vessels, like compartmentation bulk heads; CIC rooms; officers and PO's quarters; fuel, lube oil and fresh water tanks, where he was exposed to heat and inhalation of burning chemical substances and gas fumes coming from burning welding electrodes.

Despite such endorsement, petitioner's motion for reconsideration was likewise denied, upon claim of the GSIS that Francisco's job as a welder would instead cause lung disease rather than liver cirrhosis.

On appeal to the Employees' Compensation Commission (ECC), the Commission affirmed the denial of the GSIS on petitioner's claim relying on the fact that the diagnosis on Francisco's illness did not specify the type of cirrhosis which caused his death. Nevertheless, the Commission took cognizant of the fact that the deceased employee did not have a previous history of alcoholism, hepatitis or a previous history of biliary condition which could give a clue to the nature of cirrhosis he had.

We find merit in this petition.

The law defines compensable sickness as any illness definitely accepted as 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 the working conditions. For sickness and the resulting death of an employee to be compensable, the claimant must show either: (1) that it is a result of an occupational disease listed under Annex A of the Amended Rules on Employees' Compensation with the conditions set therein satisfied; or (2) if not so listed, that the risk of contracting the disease is increased by the working conditions.[1]

Where the claimant's illness is not listed in the Table of Occupational Diseases embodied in Annex A of the Rules on Employees' Compensation, said claimant must positively prove that the risk of contracting the disease is increased by the working conditions.[2]

Cirrhosis of the liver is not listed as an occupational disease. Nevertheless, in the very recent case of *Librea v. Employees' Compensation Commission*[3] We took a liberal stand and based on the evidence presented, pronounced the said sickness compensable. In the cited case, a Division Physical Education Supervisor, who likewise spent the last 32 years of his life in public service was adjudged entitled to the benefits of the ECC, upon his death due to liver cirrhosis.

In the said case, the ECC denied the claim of the heirs on the ground that the abundant stress and strain experienced by the deceased employee were too farfetched to cause the development of liver cirrhosis. According to the medical research made by the Commission in the case, portal cirrhosis or cirrhosis of the liver occurs chiefly in males in their late middle life. Malnutrition is believed to be a predisposing factor if not the primary etiologic factor, and may account for its prevalence among alcoholics. This chronic disease characterized by increased connective tissue that spreads from the portal spaces, distorts the liver architecture thereby impairing liver functions.[4]

In granting the petition, the Court correlated the fact that the deceased experienced untold sufferings in the course of his inspection of barrio schools and that he became malnourished because of the scarcity of food in the places he travelled to. All these factors were found to have contributed to the weakening of his health rendering him susceptible to malnutrition and eventually to contracting liver cirrhosis.

In the case at bar, the Commission said that liver cirrhosis may be classified by a mixture of etiologically and morphologically defined entities as follows:

- 1) Alcoholic cirrhosis, chronic alcoholism is a major cause of alcohol cirrhosis. The amount and duration of ethanol ingestion rather than the type of alcoholic beverage or the pattern of ingestion, appear to be an important determinant of liver injury. Nutritional factors may augment the detrimental effects of chronic alcohol ingestion on the liver.
- 2) Post necrotic cirrhosis is the final pathway of many types of advanced liver injury of both specific and unknown causes. Viral hepatitis, (hepatitis B, Non A, Non B) may be an antecedent. Other causes are drugs, toxins and alcoholic liver disease and primary biliary cirrhosis.
- 3) Biliary cirrhosis results from injury to or prolonged obstruction of either the intrahepatic or extrahepatic biliary system.
- 4) Cardiac cirrhosis - prolonged severe right-sided congestive heart failure may lead to chronic liver injury and cardiac cirrhosis.
- 5) Metabolic, hereditary, drug-related and other types.

We do not pretend to be an expert in the realm of medical discipline. However, We cannot discount the fact that the cause of death of petitioner's husband could very well be related to his previous working conditions. Even the

Commission volunteered the theory that post necrotic cirrhosis show that of the many types of advanced liver injury, one cause may be due to toxins.

As a welder, Francisco was exposed to heat, gas fumes and chemical substances coming from the burning electrodes caused by welding. Generally, the metal burned is iron. In the course thereof, other compounds and oxides, such as carbon monoxide, carbon dioxide, sulfur and phosphorus, may be emitted in the process of welding, depending on the kind of material used and extent of corrosion of the metal worked on. These vaporized metals are inhaled by the welder in the process and significantly in this case, Francisco had to do welding jobs within enclosed compartments.

Research shows that ingestion or inhalation of small amounts of iron over a number of years may lead to siderosis. Acute poisoning brings about circulatory collapse which may occur rapidly or be delayed to 48 hours with liver failure.[5] These are industrial hazards to which Francisco was exposed. And in the long course of time, 32 years at that, his continuous exposure to burned electrodes and chemicals emitted therefrom would likely cause poisoning and malfunction of the liver.

The leading doctrine on compensability is that laid down in the case of *Raro v. Employees' Compensation Commission*,[6] where this Court said:

"There is a widespread misconception that the poor employee is still arrayed against the might and power of his rich corporate employer. Hence, he must be given all kinds of favorable presumptions. This is fallacious. It is now the trust fund and not the employer which suffers if benefits are paid to claimants who are not entitled under the law. The employer joins the employee in trying to have their claims approved. The employer is spared the problem of proving a negative proposition that the disease was not caused by employment."

The decision of this Court in *Raro* in effect supersedes the cases with conclusions different from that stated therein, such as *Nemaria v. ECC*, 155 SCRA 166 (1987); *Ovenson v. ECC*, 156 SCRA 21 (1987); *Mercado v. ECC*, 127 SCRA 664 (1984).

The reason behind the present doctrine is that the New Labor Code has abolished the presumption of compensability for illness contracted by a worker during employment. To be entitled to disability benefits, the claimant has to present evidence to prove that his ailment was the result of, or the risk of contracting the same were aggravated by working conditions or the nature of his work.[7]

However, while the presumption of compensability and theory of aggravation under the Workmen's Compensation Act may have been abandoned under the new Labor Code, the liberality of the law in general in favor of the working man still prevails.[8] The Employees' Compensation Act is basically a social legislation designed to afford relief to the working man and woman in our society. The Employees' Compensation Commission, as the agency tasked with implementing the social justice mandate guaranteed by the Constitution, should be more liberal in resolving compensation claims of employees especially where there is some basis in the facts for inferring a work connection to the cause of death.[9]

This interpretation gives meaning and substance to the liberal and compassionate spirit of the law as embodied in Article 4 of the New Labor Code which states that "all doubts in the implementation and interpretation of the provisions of the Labor Code including its implementing rules and regulations shall be resolved in favor of labor." [10]

The policy is to extend the applicability of PD 626 to a greater number of employees who can avail of the benefits under the law, which is in consonance with the avowed policy of the state to give maximum aid and protection to labor.[11]

Premises considered, We find the petition meritorious. Liver cirrhosis, although not one among those listed as compensable ailment, is considered in the case at bar as covered under the Act, on the ground that the nature of the work of petitioner's husband, exposed him to the risk of contracting the same.

WHEREFORE, petition is hereby GRANTED and the decision of the Employees' Compensation Commission is REVERSED.

SO ORDERED.

Narvasa, C.J., (Chairman), Padilla, Regalado, and Campos, Jr., JJ., concur.

- [1] Quizon v. Employees Compensation Commission, G.R. No. 87590, 203 SCRA 426 (1991).
- [2] De Guia v. Employees Compensation Commission, G.R. No. 95595, 198 SCRA 834 (1991).
- [3] G.R. No. 58879, 203 SCRA 545 (1991).
- [4] Id. at p. 548
- [5] Gradwohl's Legal Medicine, 2[nd] Edition, Bristol: John Wright & Sons Ltd. (1968).
- [6] G.R. No. 58445, 172 SCRA 845 (1989).
- [7] Naval v. Employees' Compensation Commission, G.R. No. 83568, 199 SCRA 388 (1991).
- [8] Nitura v. Employees Compensation Commission, G.R. No. 89217, 201 SCRA 278 (1991).
- [9] Lazo v. Employees' Compensation Commission, G.R. No. 78617, 186 SCRA 569 (1990).
- [10] Nitura, supra.
- [11] Carbajal v. Government Service Insurance System, G.R. No. 46654, 164 SCRA 204 (1988).

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