

## FIRST DIVISION

[ G.R. NO. 166556, July 31, 2006 ]

**GOVERNMENT SERVICE INSURANCE SYSTEM, PETITIONER, VS.  
LUZ M. BAUL, RESPONDENT.**

### D E C I S I O N

**CALLEJO, SR., J.:**

Before us is a petition for review on *certiorari* to set aside the May 31, 2004 Decision<sup>[1]</sup> of the Court of Appeals (CA) in CA-G.R. SP No. 76461 which reversed the Decision<sup>[2]</sup> of the Employees' Compensation Commission (ECC) in ECC Case No. GM-12984-202 denying the claim for compensation benefits of Luz M. Baul under Presidential Decree (P.D.) No. 626, as amended.

Luz M. Baul was employed by the Department of Education and Culture and Sports (DECS), Tarlac South District, as an elementary school teacher on August 1, 1962.

Medical records show that due to extreme dizziness, headache, chest pain, slurred speech, vomiting and general body weakness, she was admitted to the St. Martin de Porres Hospital inside Hacienda Luisita, San Miguel, Tarlac from July 1 to 9, 1993. Dr. Salvador A. Fontanilla, the medical director of the hospital, diagnosed her illness as Hypertensive Cardiovascular Disease (HCVD)-Essential Hypertension. Prognosis was "poor" and "guarded."<sup>[3]</sup> To monitor her health condition, she had frequent consultation and treatment as an outpatient until her compulsory retirement on May 2, 1998.<sup>[4]</sup>

On January 19 to 20, 1999, Luz was confined at the Ramos General Hospital in Ligtasan, Tarlac City. Dr. Conrado M. Orquiola, a cardiologist, corroborated the earlier findings of Dr. Fontanilla that she had a HCVD. On May 17, 1999, she consulted Dr. Ernesto Cunanan, an internal medicine specialist, and the doctor noted that her hypertension had worsened to Transient Ischemic Attack (TIA), Essential Hypertension Stage III (moderate to severe hypertension). Eventually, on April 17, 2000, she suffered from a Cerebro-Vascular Accident (CVA), i.e., stroke, and was rushed to the Ramos General Hospital where she stayed for four days under the medical supervision of Dr. Orquiola and Dr. Albert Lapid, a neurologist.<sup>[5]</sup> The CT Scan result revealed the impression "ischemic infarct, right occipital lobe."<sup>[6]</sup>

Convinced that her hypertension supervened by reason and in the course of her employment with the DECS and persisted even after her retirement, she filed a claim on June 10, 1999 before the Government Service Insurance System (GSIS), Tarlac Branch, for disability and hospital medical benefits under Presidential Decree (P.D.) No. 626, as amended.<sup>[7]</sup>

On August 15, 2001, GSIS Tarlac Branch Manager Amando A. Inocentes denied

petitioner's claim due to the alleged absence of proof to confirm that there was a resulting permanent disability due to hypertension prior to retirement.<sup>[8]</sup>

In its January 23, 2003 decision, the Employees' Compensation Commission (ECC) sustained the conclusions of the GSIS,<sup>[9]</sup> holding that although hypertension is among the listed compensable illnesses in Annex "A" of the Amended Rules on Employees Compensation, its compensability is qualified. The ECC declared that petitioner failed to establish that her hypertension had caused an impairment of body organ functions resulting in permanent disability. In the same way, even if her CVA is an occupational disease under No. 19 of Annex "A" of the Amended Rules of the ECC, she failed to show the existence of such conditions as required by the Rules.

Luz filed a petition for review with the CA for the reversal of the ECC decision. On May 31, 2004, the appellate court reversed the ECC ruling and ordered the GSIS to pay petitioner the benefits corresponding to permanent partial disability before retirement and permanent total disability after retirement benefits.<sup>[10]</sup> The CA ruled that probability, not certainty, is the touchstone of workmen's compensation. Since hypertension is listed as a compensable occupational disease, it is presumed that such illness is reasonably work-connected. Petitioner had proved by substantial evidence that her hypertension was work-related; it emanated from the stress caused by the mental strain of teaching many pupils aside from the loads of obligations and responsibilities appurtenant to the profession.

The ECC filed a Motion for Reconsideration,<sup>[11]</sup> which the CA denied.<sup>[12]</sup> The GSIS, now petitioner, sought relief in this Court via a petition for review on *certiorari*. Petitioner insists that the ruling of the CA rests on mere presumptions, and points out that an award of disability benefits cannot depend on surmises and conjectures. The beneficiary must present evidence to prove that the illness was caused by employment or that the working conditions increased the risk of contracting the disease. Also, there is no showing that respondent's ailment is at all considered permanent partial or total disability by the GSIS and approved by the ECC medical groups.

Petitioner also claims that the Court must respect the findings of quasi-judicial agencies entrusted with the regulation of activities coming under their special technical knowledge and training. In this case, respondent failed to file the claim before retirement and adduce evidence to prove compensability of her illness; there was no such finding of permanent partial or total disability at the time of her retirement. Moreover, her sickness, which developed after her retirement, could not be attributed to her former occupation but to factors independent thereof.

The petition is denied.

Cerebro-vascular accident and essential hypertension are considered as occupational diseases under Nos. 19 and 29, respectively, of Annex "A" of the Implementing Rules of P.D. No. 626, as amended. Thus, it is not necessary that there be proof of causal relation between the work and the illness which resulted in the respondent's disability. The open-ended Table of Occupational Diseases requires no proof of causation. In general, a covered claimant suffering from an occupational disease is automatically paid benefits.<sup>[13]</sup>

However, although cerebro-vascular accident and essential hypertension are listed occupational diseases, their compensability requires compliance with all the conditions set forth in the Rules. In short, both are *qualified* occupational diseases. For cerebro-vascular accident, the claimant must prove the following: (1) there must be a history, which should be proved, of trauma at work (to the head specifically) due to unusual and extraordinary physical or mental strain or event, or undue exposure to noxious gases in industry; (2) there must be a direct connection between the trauma or exertion in the course of the employment and the cerebro-vascular attack; and (3) the trauma or exertion then and there caused a brain hemorrhage. On the other hand, essential hypertension is compensable only if it causes impairment of function of body organs like kidneys, heart, eyes and brain, resulting in permanent disability, provided that, the following documents substantiate it: (a) chest X-ray report; (b) ECG report; (c) blood chemistry report; (d) funduscopy report; and (e) C-T scan.

The degree of proof required to validate the concurrence of the above-mentioned conditions under P.D. No. 626 is merely substantial evidence, that is, such relevant evidence as a reasonable mind might accept as adequate to support a conclusion. What the law requires is a reasonable work-connection and not direct causal relation. It is enough that the hypothesis on which the workmen's claim is based is probable.<sup>[14]</sup> As correctly pointed out by the CA, probability, not the ultimate degree of certainty, is the test of proof in compensation proceedings.<sup>[15]</sup> For, in interpreting and carrying out the provisions of the Labor Code and its Implementing Rules and Regulations, the primordial and paramount consideration is the employee's welfare. To safeguard the worker's rights, any doubt as to the proper interpretation and application must be resolved in their favor.<sup>[16]</sup>

In the instant case, medical reports and drug prescriptions of respondent's attending physicians sufficiently support her claim for disability benefits. Neither the GSIS nor the ECC convincingly deny their genuineness and due execution. The reports are made part of the record and there is no showing that they are false or erroneous, or resorted to as a means of deceiving the Court, hence, are entitled to due probative weight. The failure of respondent to submit to a full medical examination, as required by the rules, to substantiate her essential hypertension, is of no moment. The law is that laboratory reports such as X-ray and ECG are not indispensable prerequisites to compensability,<sup>[17]</sup> the reason being that the strict rules of evidence need not be observed in claims for compensation.<sup>[18]</sup> Medical findings of the attending physician may be received in evidence and used as proof of the fact in dispute.<sup>[19]</sup> The doctor's certification as to the nature of claimant's disability may be given credence as he or she normally would not make untruthful certification. Indeed, no physician in his right mind and who is aware of the far reaching and serious effect that his or her statements would cause on a money claim against a government agency would vouch indiscriminately without regarding his own interests and protection.<sup>[20]</sup>

Significantly, even medical authorities have established that the exact etiology of essential hypertension cannot be accurately traced:

The term essential hypertension has been employed to indicate those cases of hypertension for which a specific endocrine or renal basis cannot

be found, and in which the neural element may be only a mediator of other influences. Since even this latter relationship is not entirely clear, it is more properly listed for the moment in the category of unknown etiology. The term essential hypertension defines simply by failing to define; hence, it is of limited use except as an expression of our inability to understand adequately the forces at work.<sup>[21]</sup>

It bears stressing, however, that medical experiments tracing the etiology of essential hypertension show that there is a relationship between the sickness and the nature and conditions of work.<sup>[22]</sup> In this jurisdiction, we have already ruled in a number of cases<sup>[23]</sup> the strenuous office of a public school teacher. The case of *Makabali v. Employees' Compensation Commission*,<sup>[24]</sup> which we have re-affirmed in the subsequent cases of *De Vera v. Employees' Compensation Commission*,<sup>[25]</sup> *Antiporda v. Workmen's Compensation Commission*,<sup>[26]</sup> and *De la Torre v. Employees' Compensation Commission*,<sup>[27]</sup> amply summarized, thus:

We are well aware of the fact that only a handful of public elementary school teachers are fortunate enough to be assigned in urban areas where the working conditions are comparatively much better than those in the rural areas. A large majority of public elementary school teachers, as in the case of the petitioner, work in remote places such as sitios and barrios under poor working conditions. Thus, the daily task of conducting classes (normally composed of 40 to 50 pupils in urban areas and up to 70 pupils in rural areas) in an atmosphere that is, by any standard, not conducive to learning becomes even more physically taxing to the teachers. Tremendous amount of paper work during and after office hours (from correcting examination papers, assignments, school projects and reports to writing lesson plans and the computation and recording of grades) can be very physically draining especially to the senior members of the teaching profession such as the petitioner. Such and other related school activities of a teacher, aggravated by substandard, if not adverse, working conditions, give rise to increased tension, if not emotional and psychological disturbance on the part of the teachers. This is especially true in the case of public elementary school teachers whose pupils, being of tender age and immature, need to be disciplined and to be taught good manners and right conduct, as well as to be assisted in their formal school lessons

[We] must not also neglect to mention the fact that public elementary school teachers are the lowest paid government workers, considering the nature and importance of the services they render. They are the most reliable and dedicated public servants being constantly called upon by officials of the local and national government to assist in various extra-curricular and civic activities which contribute to the welfare of the community and the country. Their responsibility in molding the values and character of the young generations of the country, cannot be overestimated.

Significantly, even Republic Act No. 4670, otherwise known as the Magna Charta for Public School Teachers, mandates in one of its provisions that 'teachers shall be protected against the