

**NOTICE 119 OF 2005**

Circular Instruction No 187

**CIRCULAR INSTRUCTION REGARDING COMPENSATION FOR WORK-RELATED UPPER RESPIRATORY TRACT DISORDERS****COMPENSATION FOR OCCUPATIONAL INJURIES AND DISEASES ACT, 1993(COIDA) (ACT No. 130 OF 1993), AS AMENDED**

The following circular instruction is issued to clarify the position in regard to compensation of claims for Work-related Upper Respiratory Tract Disorders and supersedes all previous instructions regarding compensation for Work-related Upper Respiratory Tract Disorders

**1. DEFINITION**

Work-related Upper Respiratory Tract Disorders are diseases affecting the mucosal lining of the nose, larynx and pharynx caused or aggravated by conditions attributable to a particular working environment. Two types of Work-related Upper Respiratory Tract Disorders are generally recognisable; irritant and allergic Work-related Upper Respiratory Tract Disorders. These may include allergic and/or irritant rhinitis and nasal erosions and perforations

**2. DIAGNOSIS**

The diagnosis of Work-related Upper Respiratory Tract Disorders relies on:

- A medical practitioner's diagnosis of Work-related Upper Respiratory Tract Disorders
- Workplace exposure to agent(s) reported to give rise to Work-related Upper Respiratory Tract Disorders.
- A chronological relationship between the Work-related Upper Respiratory Tract Disorders and the work environment
- Evidence of sensitization to a known workplace allergen where applicable

The Medical Officers in the office of the Compensation Commissioner will determine whether the diagnosis of Work-related Upper Respiratory Tract Disorders was made according to acceptable medical standards.

### 3. IMPAIRMENT

Impairment will be assessed after maximum medical improvement has been reached and where necessary after removal from exposure.

### 4. BENEFITS

The benefits payable according to the Act

#### 4.1 Temporary disablement

Payment for temporary total or partial disablement shall be made for as long as such disablement continues, but not for a period exceeding 24 months.

#### 4.2 Permanent disablement

Payment for permanent disablement shall be made, where applicable, and when a Final Medical Report is received. For persistent nasal erosion and/or perforation after optimal medical treatment, the percentage disablement will depend on the size of the perforation and/or erosion.

Size of the nasal perforation or erosion	Per-centage Permanent Disablement
Presence of erosion or a perforation less than 0.5 cm diameter	5
Presence of erosion or a perforation between 0.5 to 2.0 cm diameter	10
Presence of erosion or a perforation more than 2.0 cm diameter	15