

## Circular Instruction No. 175

**CIRCULAR INSTRUCTION REGARDING COMPENSATION FOR  
BYSSINOSIS****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 byssinosis and supersedes all previous instructions regarding compensation for byssinosis:

**1. DEFINITION**

Byssinosis is a disease of the lungs occurring in employees who are exposed to cotton, flax, hemp, or sisal dust in the workplace. A claim for byssinosis shall clearly be set out as contemplated in and provided for in Section 65 of COIDA.

**2. DIAGNOSIS**

Diagnosis is based on a history of occupational exposure to cotton, flax, hemp or sisal dust; clinical features and work-related symptoms or significant fall in lung function ( $> 15\%$  fall in  $FEV_1$ ) across the first shift of the working week. The Medical Officers in the Compensation Office will determine if diagnosis was made according to acceptable medical standards.

**3. IMPAIRMENT**

Criteria for the evaluation of Occupational Asthma may be applied in cases of byssinosis. In the instance of irreversible airflow obstruction, a minimum of five years exposure is required before this will be attributed to occupational exposure. Evaluations of irreversible airflow obstruction will be based on the evaluation of pulmonary impairment including lung function testing in accordance with the Compensation Commissioner's Circular instruction on Respiratory Impairment.

**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.

**4.3 Medical Aid**

Medical aid shall be provided for a period of not more than 24 months from the date of diagnosis or longer, if in the opinion of the Director General, further medical aid will reduce the extent of the disablement. Medical aid covers costs of diagnosis of byssinosis and any necessary treatment provided by any health care provider. The Compensation Commissioner shall decide on the need for, the nature and sufficiency of medical aid supplied.

**4.4 Death benefits**

Reasonable burial expenses, widow's and dependant's pensions may be payable, where applicable, if the employee dies as a result of byssinosis.

**5. REPORTING**

The following documentation should be submitted to the Compensation Commissioner or the employer individually liable or the mutual association concerned:

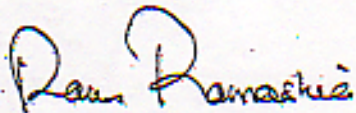
- Employer's Report of an Occupational Disease (W.CL. 1).
- First Medical Report in respect of an Occupational Disease (W.CL.22).
- Notice of an Occupational Disease and Claim for Compensation (W.CL.14).
- Industrial History (W.CL.110) or an appropriate employment history.
- Progress/Final Medical Report in respect of an Occupational Disease (W.CL.26).



- Medical report detailing the employee's symptoms and clinical features.
- An affidavit by the employee if an employer cannot be traced or the employer will not timeously supply a W.CL. 1.
- Lung function tests carried out across the first shift of the working week.
- Chest X-ray and/or radiology reports.

6. **CLAIMS PROCESSING**

The Office of the Compensation Commissioner shall consider and adjudicate upon the liability of all claims. The Medical Officers in the Compensation Commissioner's Office are responsible for medical assessment of a claim and for the confirmation of the acceptance or rejection of a claim.



**DIRECTOR GENERAL: LABOUR**

DATE: 17/09/2002

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