

# Medical Impairment Guidelines

## Introduction

The Individual Life Operations, Underwriting Division, is responsible for the protection of the company's mortality and morbidity expectations inherent in pricing assumptions. Underwriters assess proposed insureds' various risk factors fairly, thereby providing insurance protection at an equitable price reflecting the individual's expected mortality and morbidity (disability related riders and benefits). The Underwriting Division also provides the field force with underwriting expertise reflected in quality decisions made in a timely manner, to maximize advisors' ability to place business with proposed insureds.

The guidelines are meant to help you determine how to proceed with an application for individual life insurance. The information shown is meant to be used as a guideline only; Underwriting may ask for further clarification or medical information. Although the items listed include the most frequently requested information, not every situation may be covered. If you have a situation not shown in either the medical impairments or the non-medical information, don't assume the proposed insured is uninsurable or that we can't proceed.

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# Medical Impairments

## **Abdominal aortic aneurysm**

Please see Aneurysm.

## **Abscess**

A collection of pus somewhere in the body.

Underwriting: This is usually not in itself of great concern – significance is minimal and insurance can usually be issued at standard rates – unless associated with diabetes, colitis or another underlying condition. A history of an abscess or abscesses in the brain or liver are more concerning.

## **Acquired immunodeficiency syndrome (AIDS)**

A disease caused by the HIV virus, contracted through infected body fluids, that causes immune system failure. This leads to the development of severe illnesses and ultimately death.

Underwriting: There's no cure and applicants with AIDS can't be considered for life insurance.

## **Acromegaly**

A condition caused by the growth of a benign tumor in the pituitary gland. It causes increased growth – in adults, primarily in the hands, feet, jaw and forehead.

Evidence: There's increased mortality with this condition, so an attending physician's statement (APS) will often be required if insurance is to be considered.

Underwriting: This will involve a minimum medical rating.

## **Addison's disease**

With this condition the adrenal glands fail to function and serious health problems result. Most of these may be corrected by taking several medications.

Evidence: An APS will usually be required

Underwriting: Well-controlled proposed insureds can be considered standard or with only a small medical rating.



## **Aids**

See Acquired immunodeficiency syndrome (AIDS).

## **Alcohol abuse/alcoholism**

An illness caused by a variety of genetic, social and environmental factors.

There are very serious underwriting concerns regarding alcoholism and alcohol abuse. The brain, liver, nerves and virtually every organ in the body can be adversely affected. Factors that raise concern about a problem with alcohol include physician, family or work complaints about drinking; changes in drinking patterns; or repeated observances of heavy alcohol use. There are treatment programs available to help put and keep the disease in remission. After diagnosis, positive factors include active participation in Alcoholics Anonymous as well as other support groups, preservation of family supports and ongoing employment. Negative factors include any ongoing alcohol use, any drug use, history of relapses and recent cessation of drinking.

Evidence: Accurate and detailed application information is very important. All cases will be underwritten very thoroughly, often including an APS and a blood profile.

Underwriting: This is a disease of great underwriting significance and each case will be underwritten on its own merit. Once a proposed insured is sober for five years, standard insurance coverage is often available.

## **Anemia**

This is a reduction in the amount of hemoglobin or in the number of red blood cells, or both. There are many causes including blood loss (often unnoticed if internal), lack of certain nutrients and inheritance. Most of the inherited types seen, such as thalassemia minor, are of little underwriting significance. Some however, such as sickle cell anemia, have underwriting concerns. With anemia caused by a lack of nutrients, the nutrients that may be lacking commonly include iron, vitamin B12 and folate. It isn't a concern when treated. The blood loss anemias are of concern if the blood loss is ongoing. Also, a common cause of blood loss in the older population (this usually becomes a concern when a proposed insured is over 50) is an undiscovered tumor.

Evidence: Insurance is usually postponed until the cause of the anemia is determined by the personal physician. Many times scopes of the stomach (gastroscopy) or colon (colonoscopy) are performed to look for polyps, tumours, signs of inflammatory bowel disease or celiac disease.

Underwriting: Further information is often requested in these types of cases. This disease has variable significance, depending on the underlying disorder and type of anemia. With thalassemia, sickle cell and other inherited anemias, the anemia itself may have some risk, but in most cases of anemia, the primary concern is its cause.

## **Aneurysm**

This means a bulging in the wall of a blood vessel. There are two main types commonly seen, and they have very different significance. The first type, a Berry Aneurysm, occurs in the brain. Berry aneurysms are usually found when they expand and cause headaches or when they rupture. They're often treated with surgery.

Following treatment there's little or no risk after a period of time has passed. The second common type is the aortic aneurysm, either in the abdomen or in the chest. This usually occurs in older people and is usually caused by vascular disease. Abdominal aneurysms are commonly associated with high blood pressure. When they're present there's always the risk of rupture and insurance can't be considered. An abdominal aneurysm larger than five centimetres is usually operated on at some point; however, there's still the risk from the underlying vascular disease. Also, when aneurysms are associated with cerebrovascular or coronary artery disease, insurance can't be considered.

Evidence: An APS is often required.

Underwriting: The availability of insurance depends on the type and location of the aneurysm, treatment for it and duration since diagnosis. (For example, .abdominal aneurysms smaller than five centimetres and stable for many years may be insurable with a rating.)

## **Angina**

This is the name for chest pain caused by lack of oxygen to the heart muscle. It typically comes on with exercise or stress and is relieved by rest or medication, e.g., nitroglycerin.

Evidence: The diagnosis is often made with a stress test and/or thallium test and/or stress ECHO and/or angiograms. Please see Coronary artery disease for details.

Underwriting: This disease is of great underwriting significance.

## **Angioplasty**

This involves the opening of a clogged artery without opening and repairing the vessel. Most commonly a balloon is used but at times laser or rotabators (drills) are used. See Peripheral vascular disease or

Coronary artery disease for further details.

## **Ankylosing spondylitis**

A rather painful and disabling arthritis, the main effect of which is stiffness of the spine.

Underwriting: The disability waiver benefit usually won't be considered, but there's minimal effect on life insurance in most cases. The rating, if any, will depend on the severity of the condition.

## **Anxiety disorders**

This is a group of disorders with symptoms ranging from panic attacks, to phobias, to mild anxiety. In severe cases there may be a medical rating.

Evidence: An APS may be required.

Underwriting: Anxiety disorders are usually only of minimal significance; however, ratings will depend on the severity of the condition. As with depression, the longer proposed insureds are stable on or off treatment and the longer the amount of time since proposed insureds' last significant symptoms, are positive signs.

## **Aortic valve stenosis/aortic valve regurgitation**

In this condition, the person is either born with or acquires with age, an aortic (heart) valve that's smaller (in stenosis), or bigger (in regurgitation) than normal. A common cause is rheumatic fever. The abnormal valve may place strain on the heart and in moderate or severe cases, when insurance is available, it will be on a substandard basis.

Evidence: An APS is often required, and an electrocardiogram (ECG) and chest x-ray may also be necessary.

Underwriting: Underwriting action can vary from standard to decline depending on the proposed insured's age, complications and the severity of the problem.

## **Apnea**

This literally means the cessation of breathing.

Evidence: Further information is often required, probably from an attending physician. Please see Sleep apnea for further details.

## **Arrhythmia**

This is an irregular heart beat that can have many causes – a common cause in older proposed insureds is atrial fibrillation. In addition there are a wide variety of other conditions that may be of great underwriting importance.

Evidence: Details regarding type of therapy and if possible the specific name of the problem (diagnosis) are important. Often an APS and an ECG will be requested.

Underwriting: The rating will depend on the exact diagnosis, duration since diagnosis, age of the proposed insured and complications.

## **Arteriosclerosis**

A deterioration of the arteries as they become thickened and narrowed. It may occur in any artery throughout the body. Please see sections on Peripheral vascular disease, Coronary artery disease or Stroke for details.

## **Arthritis**

A wide-ranging group of conditions, from totally disabling to causing minimal discomfort. Some of the medications required to treat severe cases of arthritis can be of concern. In addition, some severe types can cause problems in other areas of the body. The disability waiver option isn't available in many cases.

Evidence: Evidence requirements will be based on the type and severity of the arthritis. This condition is of mild to moderate significance.

Underwriting: Rating, if any, will depend on the severity of the condition and residual damage, e.g., osteoarthritis may be of less concern than arthritis connected with lupus or rheumatoid arthritis, both of which can have effects on many other organs such as the kidneys and heart.

## **Asthma**

This is a condition causing repeated attacks of shortness of breath. In most proposed insureds these are mild and not of great underwriting significance. With some proposed insureds, individual attacks can be life threatening and there's the possibility of long-term lung problems such as chronic obstructive pulmonary disease (COPD).

Evidence: Completion of the respiratory questionnaire fully is of utmost importance in assessing the severity of the disease. In addition, further evidence such as an APS may be required.

Underwriting: Proposed insureds with a history of asthma who continue smoking are an increased underwriting concern. Ratings will depend on the severity of the disease, i.e., hospitalizations, emergency room visits, use of oral steroids, etc. and frequency of attacks.

### **Atrial fibrillation/ auricular fibrillation**

A condition where the atria of the heart beat rapidly and irregularly. It can be caused by abnormalities of the heart valves, by ischemic heart disease and by many other factors; occasionally it has no cause (lone atrial fibrillation). Only lone atrial fibrillation has little effect on insurability and this condition is uncommon. In most cases there's a significant increased risk of stroke and heart attack. Medications often used in treatment of this condition are coumadin and digoxin.

Evidence: Further evidence such as an APS or ECG will usually be required if insurance is to be considered.

Underwriting: In older proposed insureds with atrial fibrillation who haven't been thoroughly investigated or who have angina, life insurance usually isn't available.

### **Atrial septal defect**

With this condition there's a hole between the left and right atria of the heart, which can seriously alter the heart's function by allowing blood to flow in the wrong direction. In mild cases atrial septal defect can correct itself with time but in serious cases it can require surgery. In children, mild cases that have been well investigated can be considered.

Underwriting: Once the hole has healed or been repaired there's minimal underwriting concern. In adults, when the problem continues, insurance can be considered on a substandard basis in selected cases.

### **Berry aneurysm**

Please see Aneurysm.

## **Bladder infection**

This is simply an infection of the bladder and has no significance to insurability.

Underwriting: Rarely, recurrent infections that haven't been investigated can be of some underwriting concern. Occasionally, when an infection shows up in a head-office specimen, insurance will be postponed until the proposed insured's doctor can clarify the situation.

## **Blindness**

This simply indicates a lack of ability to see.

Underwriting: It's of no consequence to life insurance but usually disability waiver won't be considered.

## **Blood in urine**

See Hematuria

## **Blood pressure**

This is the force exerted by blood flow through the arteries. A lowering of blood pressure usually isn't a concern to the underwriter unless it's associated with a specific disease. Elevated blood pressure has many causes. Most commonly it occurs alone although on occasion kidney problems or other unusual problems can be the cause. When treated and controlled, there's usually no increased mortality risk. Long-term elevations in blood pressure can damage the heart, kidneys and arteries, and can have serious complications.

Evidence: Evaluation of blood pressure by the underwriter involves averaging of all recent readings obtained from various sources. A paramedical examination and electrocardiogram are often required.

Underwriting: Substandard ratings will apply when elevation is present in the blood pressure and/or damage is seen in the kidneys, heart or arteries.

Many times we see elevated blood pressure on the paramedical or medical exam that may lead to a rating or decline. With physician follow up and/or treatment and investigations, we can usually reconsider within six (6) months in most cases.

## **Build**

There are two concerns that may be raised regarding the proposed insured's build. They may be overweight or underweight. Being underweight may signal an underlying serious disease or it may suggest a general state of poor health. Being overweight raises the risk of heart disease, disability and many other problems.

Evidence: A paramedical examination may be necessary. Please contact your underwriter for specifics. Underwriting: Build tables are used to evaluate the increased risk for life insurance.

## **Cancer**

This is a new and uncontrolled growth of tissue with the ability to invade nearby tissue and/or spread to distant sites. Some cancers, such as basal cell or squamous cell carcinoma of the skin and some types of testicular cancer have a very good prognosis while others have a worse prognosis. Some indications that the cancer is more serious include:

Any spread beyond the initial site Size of tumour

Origin of tumour, e.g., pancreas, lung are more concerning Any lymph node involvement

Cancer spots in other parts of the body Long courses of treatment

Recurrence of the tumor

Evidence: Because of this, for insurance to be considered, most cases will require an attending physician's statement (APS) since every cancer in the various parts of the body raises different concerns that are very specific. Also, the treatment of cancer is different depending on the site.

Underwriting: Thorough underwriting assessment will be required as cancer is of great significance to the underwriter. Try to give all available details about location and type of cancer, and dates of treatment and surgery. Of note, stage (how far a tumour has grown) and grade (how fast a tumour is likely to grow) of tumours is very helpful, if known.

## **Carotid endarterectomy**

A surgery performed to "clean out" neck arteries when arteriosclerosis becomes a problem. It may be performed after minor symptoms or after a stroke. For further details please see the sections on Stroke and

## **Transient ischemic attack/TIA.**

Cerebral vascular accident

See Stroke.

## **Chest pain**

This is a symptom that has a variety of causes. It can be a marker of heart disease and therefore it will be important that information is developed to help elucidate the cause of the pain.

Evidence: Further evidence is required for many cases depending on the nature and severity of the pain these can include APS, stress EKG etc.

## **Cardiomyopathy**

This is a disorder of the heart muscle, usually leading to a deterioration in function or output of the heart. Many types including hypertrophic, alcoholic, dilated and idiopathic (which means we're not sure what causes the cardiomyopathy). People with these disorders are at risk of irregular heart rhythms and sudden death. More concerning if associated with diabetes, high blood pressure, smoking and coronary artery disease.

Evidence: An APS and possibly an ECG will be required. Important factors include close follow up and proper investigations.

Underwriting: Most proposed insureds with this condition are uninsurable although if completely resolved, or if hypertrophic, some cases can be offered.

## **Chronic bronchitis/chronic obstructive pulmonary disease**

This lung condition refers to a chronic situation of decreased lung function. It may be caused by smoking, environmental factors, asthma or by any numerous other details. It's underwritten similarly to emphysema.

Evidence: An APS and/or chest x-ray may be required for consideration.

Underwriting: Mild cases may be insurable at standard rates but if the proposed insured is a smoker or the disease is more significant, then a substandard rate will apply.

## **Chronic fatigue syndrome**

A condition of which the cause is uncertain; one of the many symptoms is fatigue. Evidence: Further evidence is often required for larger cases.

Underwriting: The main life insurance concern is that there's no serious underlying cause of the condition; therefore the presence of recently onset chronic fatigue syndrome may require postponement. Also, the disability waiver option isn't available unless the applicant has been completely recovered for a period of time.



## **Cirrhosis of the liver**

A destructive, serious liver disease most often caused by alcoholism. Evidence: If insurance is to be considered, an APS is often required.

Underwriting: Only the most mild cases that have been stable for several years and where the cause has been removed can be considered for insurance.

## **Claudication**

This means pain in the calf of the leg caused by peripheral vascular disease. Please see Peripheral vascular disease for details.

## **Coarctation of the aorta**

In this condition a segment of the major artery leaving the heart is narrowed, causing strain on the heart and elevated blood pressure in areas before the narrowed section. It can be corrected by surgery; details about the type of surgery and whether a patch was used are important.

Evidence: An APS in addition to further evidence may be required in some cases.

Underwriting: Without surgery, most cases can't be considered for insurance. Several years after surgery most cases are insurable at standard rates.

## **Collagen diseases**

This is a complex group of diseases affecting the connective or supportive tissues of the body. Most have significant impact on insurability. Names include dermatomyositis, scleroderma, morphea, polyarteritis nodosum, lupus erythematosus, temporal arteritis and mixed connective tissue disease.

Evidence: An APS will often be required.

Underwriting: Insurability will depend on diagnosis, time in remission and internal organ involvement.

## **Colostomy**

A situation where the bowel is surgically altered to drain into a bag on the skin. In itself, once well established, this condition isn't a concern. However, it's usually performed for a serious bowel problem and the underwriter will need to know the reason why surgery was done.

Evidence: Further evidence may therefore be required. Any rating will depend on the underlying condition as well as any serious colostomy complications.

Underwriting: The presence of a colostomy alone is usually a standard risk.

### Congenital heart disease

This refers to heart abnormalities present from birth. The types included in this guide that you may want to refer to are Ventricular septal defect, Atrial septal defect, Coarctation of the aorta, Tetralogy of fallot, Pulmonary valve stenosis/pulmonary valve regurgitation and Aortic valve stenosis/aortic valve regurgitation.

## **Convulsions**

Convulsions are a symptom of some other disease. There are numerous causes, from febrile seizures in young children, to epilepsy, to brain tumors.

Evidence: An APS is often obtained.

Underwriting: The underwriting focus will be on finding the cause.

## **Coronary artery bypass surgery**

This surgery is used to bypass narrowed arteries supplying oxygen to the heart. Please see Coronary artery disease for further details.

## **Coronary artery disease**

A condition characterized by arteriosclerosis in the coronary arteries. The narrowed arteries can't supply enough blood to the heart during periods of exercise and stress, and eventually there isn't enough blood for the heart to function properly even at rest. The person develops chest pain called angina, and is investigated and given treatment to counteract the problem. Causes of coronary artery disease include normal aging, smoking, diabetes, elevated cholesterol, elevated blood pressure, family history and many other factors. Treatment includes medication and occasionally surgery (angioplasty, stenting, coronary artery bypass grafting, or others). After surgery the disease can recur. The person may have a heart attack, meaning that some of the heart muscle dies from lack of oxygen.

Evidence: An attending physician's statement, electrocardiogram, chest x-ray and paramedical examination may all be necessary.

Underwriting: Insurance likely won't be available in cases where diabetes has been present; coronary disease was present before age 35; angina co-exists with peripheral or cerebral vascular disease; angina is severe; angina exists after a heart attack; or two or more heart attacks have occurred. Details regarding the attacks, medications, surgery and hospitalizations are crucial to the underwriting process. All accepted cases will be substandard.

## **Crohn's disease**

A serious bowel problem characterized by abdominal pain and bloody diarrhea. It can occur anywhere in the digestive tract from the mouth to the anus but is most common in the small bowel. There are many associated complications and it may recur after surgery.

Evidence: An APS is often required.

Underwriting: Until the disease has been quiescent for several years, substandard rates will apply.

## **Cushing's syndrome**

This is a serious disease of overproduction of steroids by the body. Obesity with a typical fat distribution and diabetes mellitus may result.

Evidence: An APS is often required.

Underwriting: When cured, these cases may be considered.

## **Cyst**

These may occur anywhere in the body and are simply a localized collection of some sort of fluid. The life insurance significance depends on the location. Cysts are usually benign although we must be alert for evidence of malignancy.

Evidence: If there's a concern about the diagnosis, an APS may be required. Underwriting: If the cyst is benign the case is usually issued at standard rates.

## **Cystic fibrosis**

This is a serious inherited condition affecting the lungs and digestion. It's usually fatal at a young age. Underwriting: Insurance is not available with this diagnosis.

## **Deafness**

This simply indicates a lack of ability to hear.

Underwriting: It's of no consequence to life insurance but if total or progressive, disability waiver may be considered only with additional premium.

## **Depression**

This is characterized by a very depressed mood, loss of enjoyment of life, isolation and occasionally, thoughts of suicide. When this condition is present for the first time insurance coverage usually isn't available until the proposed insured is recovered for a minimum of six months. Some people suffer from chronic mild depression and they're often insurable, though often with a medical rating that will depend on the severity of the condition. Severity is measured based on symptoms, length of time off work/school, hospitalization and treatment, if applicable.

Evidence: An APS and Mental/Nervous disorder questionnaire are generally required.

Underwriting: Standard rates may apply if the person has been in long- term remission, even if on medication (with no recent changes in dosage, etc.)

## **Dermatomyositis**

See Collagen diseases

## **Developmental disability**

See Mental development delayed

## **Diabetes mellitus**

This condition results in an increase in blood sugar. There are two distinct and very different types. The first one, insulin dependent diabetes, usually starts in childhood and is caused by a lack of insulin being produced. Partially because it starts at younger ages, more complications tend to be seen with this type. The second type is non-insulin dependent diabetes that usually starts in older, overweight proposed insureds. Please note that the majority of diabetic proposed insureds are acceptable for life insurance. Long-term complications of diabetes include arteriosclerosis, kidney damage and proteinuria, retinal (eye) damage, nerve damage (lack of reflexes and/or feeling in the feet) and coma due to poor control. Positive factors are good control, careful medical follow up and good compliance with medication and diet. Negative factors are renal damage, nerve damage, eye damage, protein in the urine, problems with high or low sugars and associated cardiovascular problems. The duration of diabetes is an important factor in the medical rating. Unacceptable conditions include very poor control with high sugars, repeated episodes of dangerously low sugars, heart disease with onset after the diabetes and renal damage.

Evidence: An APS, paramedical examination, blood profile and ECG may all be necessary.

Underwriting: If insurable, most cases will be rated. The rating will be higher for those diagnosed at younger ages, but in many instances we can offer insurance to children and teens.

## **Dialysis**

This is a procedure used to clean wastes from the blood when the kidneys are not functioning.

Proposed insureds on dialysis can't be considered for life insurance.

## **Divericulitis**

This refers to infection starting in a diverticulum of the large bowel. In its acute state it's a serious condition and once it has occurred, it's more likely to recur. Usually treatment is with medication although surgery may be required. Once recovery is established from the infection, coverage may be considered.

Underwriting: Coverage will be on a slightly substandard basis for several years.

## **Diverticulosis**

This refers to a condition with multiple diverticula throughout the large bowel. The concern is that they may become infected and/or bleed.

Underwriting: Unless there have been complications, this condition doesn't usually require a medical rating. Please see Diverticulum and Divericulitis for details.

## **Diverticulum**

This refers to an outpouching of the bowel wall. It can become filled with fecal material and then infected. The plural form is diverticula. On their own diverticula of no significance.

## **Downs syndrome**

With Downs syndrome, insurance is only available for the best cases and with a substantial rating, and only for ages seven to 30.

## **Drug abuse**

Like alcohol abuse, drug abuse is a disease with many biological, psychological and sociological causes. Many organ systems may be adversely affected. To make this diagnosis a

history of street drug use or over-use of prescription drugs should be obtained. After treatment has started, positive factors include attendance at Narcotics Anonymous and other support groups, family support and ongoing employment. Negative factors include any ongoing drug use, any use of alcohol and a loss of psychosocial supports.

Evidence: All cases will be thoroughly underwritten with an APS and blood profile often required. Underwriting: Sobriety from all chemicals for a period of six years may lead to a standard offer.

## **Echocardiogram**

This is an ultrasound of the heart that allows the anatomy of the heart to be seen on a TV-like screen. It's most often used to investigate a heart murmur.

## **Electrocardiogram**

This is the electrical tracing of the heart beat. It's a relatively easy and quick way to evaluate the heart. Abnormalities that will show up include extra beats and other Arrythmia, as well as Coronary artery disease. Please see these sections for further comment.

## **Emphysema**

This lung condition refers to a chronic situation of decreased lung function. It may be caused by smoking, environmental factors, asthma or a variety of other respiratory issues. It's underwritten similarly to chronic bronchitis.

Evidence: An APS and/or chest x-ray may be required for consideration.

Underwriting: Mild cases may be insurable at standard rates but if the proposed insured is a smoker or the disease is more significant, then a substandard rate or decline may apply.

## **Epilepsy**

A condition characterized by recurrent electrical disturbances in the brain often resulting in seizures. The seizures themselves can be dangerous if not well controlled. Therefore, the underwriter will make every effort to make sure there's no underlying cause for the seizures.

Evidence: An APS and a paramedical examination are often required.

Underwriting: Insurability will be dependent on type, cause, frequency of attacks and compliance with treatment.

## **Esophagitis**

This term means inflammation of the esophagus or swallowing tube and is usually caused by stomach acid leaking back up.

Underwriting: Except in severe cases, or where associated with Barrett's esophagus, there's no underwriting concern.

## **Family history**

This refers to the presence of a condition in one or more of a proposed insured's relatives. In some conditions there's an increased risk in the proposed insured.

It's important that full details be given on the application. Usually cardiovascular disease or cancer in two or more first-degree relatives (especially if under age 55) is of concern.

## **Familial polyposis**

A serious condition where members of the family get polyps of the bowel that will become cancerous unless the whole bowel is removed. Please see Polyposis for more details.

## **Fatty liver**

This is a buildup of fat in the liver. This may be caused by alcohol, obesity, medication or any of a number of other factors.

Underwriting: In itself it's usually not dangerous but in some cases a rating may apply.

## **Gall bladder problems**

The gall bladder can become filled with stones and/or infected and cause pain in the abdomen. Treatment is usually by surgery although sound waves have been used to dissolve the stones.

Except in severe cases, gall stones aren't a concern. Infection is only a concern if there have been multiple recurrences.

## **Gangrene**

This is the death of tissue due to loss of blood supply.

Evidence: If the cause is traumatic and the condition is treated then we may consider usually with an APS.

Underwriting: If it occurs in a proposed insured with diabetes or hardening of the arteries, then the proposed insured isn't insurable.

## **Gout**

A condition with elevated uric acid in the blood. This uric acid can settle as crystals in the joints, causing pain, or in the kidneys, which can cause kidney problems. In most cases this condition is of little underwriting importance.

Evidence: If moderate to severe, an APS will often be required. Underwriting: Substandard rates may apply.

## **Hazardous occupation**

Various occupations carry a risk to a person with regards to life and/or disability insurance. An extra premium may apply for certain jobs for life insurance, disability coverage and the accidental death benefit.

## **Hazardous sports**

Various sports carry a risk to a person with regards to life and/or disability insurance. An extra premium may apply for certain jobs and avocations for life insurance, disability coverage and the accidental death benefit.

## **Heart attack**

See Myocardial infarction.



## **Heart failure**

This simply means that the heart can't keep up with the demand for pumping blood. As it falls behind, fluid builds up in the lungs, organs and limbs causing the clinical entity known as heart failure. In most cases insurance can't be considered with this history. Exceptions would be where the heart failure was secondary to a valve abnormality or other abnormality that has since been corrected.

Underwriting: In selected cases like this insurance might be considered, usually on a highly substandard basis and usually after extensive underwriting investigation.

## **Heart murmurs**

Heart murmurs are caused by increased blood flow through a normal heart or by normal blood flow through an abnormal heart. Examples of increased flow include pregnancy or acute illness and these aren't usually an underwriting concern. There are many examples of abnormal anatomy of the heart. Murmurs are commonly caused by blood passing through abnormal valves. Also, holes in the heart such as atrial septal defect and ventricular septal defect cause murmurs.

Evidence: The main investigation used for evaluating a heart murmur is the echocardiogram (ECHO). This test is an ultrasound of the heart that allows the anatomy to be visualized on a TV-like screen. Any abnormality may put extra strain on the heart and cause complications. Surgery may be performed to correct the defect. In order to evaluate the significance of a murmur the underwriter will often require a medical examination or an APS. Other tests such as an electrocardiogram (ECG), chest x-ray and echocardiogram may be required.

Underwriting: Ratings, if any, will depend on the cause of the murmur and the presence of any complications.

## **Hematuria**

This means blood in the urine. There are many causes, some of which include menstruation, kidney or bladder stones, infection and cancer. The important thing is to identify the source of the blood.

Evidence: Often two repeat urine tests as well as other evidence will be required.

Underwriting: Unexplained hematuria will usually result in the insurance being postponed until the source of the bleeding is identified. Common assessment of hematuria includes an ultrasound of the kidneys, cystoscopy (use of a camera to look into the bladder for tumours or polyps) and further urine testing.

## **Hemochromatosis**

A condition in which excess iron is stored in the liver, heart and other organs. Some cases are life threatening.

Evidence: An APS will often be required.

Underwriting: When found and treated, insurance may be available at standard rates.

## **Hemophilia**

An inherited disorder in which the person has a decreased ability to form blood clots. There are several forms and in severe cases, insurance coverage may not be granted.

Evidence: This is a very complicated group of diseases and an APS will be required.

Underwriting: Insurability will depend on the type and severity of the disease as well as the proposed insured's age.

## **Hepatitis**

An inflammation of the liver with many different causes, ranging from viral, to alcohol, to medication and many others. When caused by alcohol it's indicative of excess use and the proposed insured will have to have been abstinent for a period of time before insurance can be considered. If medication that has been prescribed was the cause, then usually once the medication is stopped, there's no more need for concern. Viral causes are very complex. Type A is a short-term illness with no long-term problems after recovery. Types B and C are of more significance in the long term and can cause serious complications such as cirrhosis, hepatitis or cancer in their chronic forms.

Evidence: Accurate and detailed information on the application is very important and an APS, blood profile and other evidence may be required.

## **Hernia-hiatus**

In this condition, the patient gets heartburn as stomach acid irritates the esophagus.

Underwriting: Except in cases where there have been complications, insurance is usually available at standard rates.

## **Hernia-inguinal**

In this condition, part of the bowel protrudes into the area under the skin of the groin. It's often cured with surgery. The bowel can become stuck and require urgent surgery.

Underwriting: Except in cases where there are complications, insurance is available at standard rates.

## **High cholesterol**

See Hypercholesterolemia

## **HIV**

See Acquired immunodeficiency syndrome (AIDS).

## **Huntington's chorea**

A nervous system disorder causing loss of muscle control and premature death. It's inherited from parents – the chance of a child being affected is 50 per cent – and doesn't usually onset until a person is in their forties. Tests are available to detect carriers who will develop this disease.

Proposed insureds with the disease aren't insurable.

## **Hydrocephalus**

This name means water in the head. There's a build up of fluid around the brain and often a permanent tube is inserted to drain it. There can be complications from the fluid itself or from the tube.

Evidence: An APS is always required.

Underwriting: Most applicants will be insurable if over age 16.

## **Hypercholesterolemia**

An elevation in cholesterol in the blood. When present there's an increased risk of coronary artery disease, peripheral vascular disease, cerebral vascular disease, angina and stroke. Treatment is with diet and sometimes with medication.

Evidence: Further evidence may be required.

Underwriting: The insurance may be issued on a substandard basis if cholesterol is elevated.

## **Hypertension**

See Blood pressure

## **Hypothyroidism**

In this condition the thyroid gland isn't functioning well and the person feels very tired, has dry skin, constipation and generally feels quite unwell. This condition can be fully treated with medication and when treated it's of no significance to insurability.

## **Hyperthyroidism**

In this condition the thyroid gland is producing too much hormone and the person feels racy, sweaty and anxious and loses weight. Usually, it can be controlled and when treated, it's of no significance to insurability.

## **Infection**

Any serious infection should usually be treated and cured before insurance can be considered. The other concern is whether there's a more serious condition underlying the infection.

Evidence: For some of the more serious infections, evidence will be required generally including an APS.

## **Kidney transplant**

A kidney transplant is performed in cases of renal (kidney) failure to remove the need for dialysis. There's a chance of organ rejection as well as a chance of the new kidney being damaged by the same disease that destroyed the original kidneys.

Underwriting: These proposed insureds can sometimes be considered for insurance but on a substandard basis.

## **Lupus erythematosis-discoid**

A type of lupus that affects only the skin.

Evidence: In order to consider, an APS will be required.

Underwriting: Usually insurance is available at standard rates. Also see Collagen diseases.

## **Lupus erythematosis-systemic**

The more severe type of lupus that affects organs throughout the body. Commonly affects the joints (arthritis), kidney, heart and skin. The disease can cause significant long-term health problems. Also see Collagen diseases.

Evidence: An APS will be required for all cases.

Underwriting: Proposed insureds with the mildest cases can be considered with a medical rating.

## **Manic depression**

A disease characterized by severe mood swings usually over a period of weeks or months. It can often be well controlled with medication but frequent recurrence is very concerning.

Evidence: An APS is usually required if insurance is to be considered. Underwriting: The best cases may be considered for standard insurance.

## **Meningitis**

An infection of the membranes surrounding the brain. Once treated, it's of minimal underwriting concern as long as there has been no lasting damage.

Evidence: If recent and if there are any resulting problems, then an APS may be required.

## **Mental development delayed**

This indicates a reduction in the level of mental functioning in one or more areas. There's an increased mortality risk for those with delayed mental and physical development in many circumstances.

Evidence: An APS will usually be necessary if insurance is to be considered.

## **Mental disorders**

There are several categories of these which are commonly seen. They are written up under their individual headings: Anxiety disorders, Manic depression, Schizophrenia, Phobias, Panic attacks, Suicide and

Personality disorders. Insurability will depend on the type and severity of the condition, and on the compliance with treatment.

## **Migraine**

A headache caused by spasm and relaxation of the blood vessels. It can be associated with slurred speech, numbness and even temporary paralysis.

Evidence: May be postponed for insurance if there has been no work-up for the cause of the headaches or there's a recent increase in frequency or severity.

Underwriting: It has no significance to life insurance underwriting although in moderate to severe cases, the disability waiver benefit won't be available.

## **Mitral valve prolapse**

In this condition one part of the mitral valve prolapses (displaces into the left atrium a bit) when the heart contracts. This condition is very common and is usually mild but may indicate an underlying heart problem. The presence of a murmur is concerning.

Underwriting: Most cases may be considered at standard rates but with the presence of complications a small medical rating may apply.

## **Mitral valve stenosis/mitral valve regurgitation**

In this condition, the person is either born with or acquires with age, a mitral (heart) valve that's smaller (in stenosis) or bigger (in regurgitation) than normal. A common cause is a history of rheumatic fever. The abnormal valve may place strain on the heart and in moderate or severe cases, when insurance is available, it will be on a substandard basis.

Evidence: An APS is usually required, and a medical examination, ECG and chest x-ray may also be necessary.

Underwriting: Action can vary from standard to decline depending on the proposed insured's age, complications and the severity of the problem.

## **Mixed connective tissue disease**

See Collagen diseases.

## **Multiple sclerosis**

A disease of the central nervous system causing progressive weakness and paralysis. There's a significant life insurance risk.

Evidence: Most cases that might be considered will require an APS. Underwriting: Cases that are accepted will usually be substandard.

## **Murmurs**

Please see Heart murmurs.

## **Muscular dystrophy**

A hereditary problem causing progressive muscle weakness. Except in stable and mild types in adults where a moderate medical rating would apply, proposed insureds with this disease usually can't be considered for life insurance.

## **Myocardial infarction**

This means the death of part of the heart muscle due to lack of oxygen. Normally, coronary artery disease is the cause. Please see Coronary artery disease for details.

Underwriting: All cases with a history of myocardial infarction will be substandard.

## **Narcolepsy**

A disease characterized by the imperative need to sleep. Evidence: An APS may be required.

Underwriting: This condition is usually of minimal underwriting significance. Severe cases may require a small medical rating.

## **Obese**

This refers to being significantly overweight. Please see Build for details.

## **Osteoarthritis**

This is the least concerning type of arthritis in most cases.

Underwriting: A medical rating will apply only in the most serious and disabling cases. The disability waiver option may not be available.

## **Osteoporosis**

This means that the bones have become weak, thinned and brittle with a propensity to fracture easily. In the elderly population where this condition is seen, it leads to an increased risk of permanent disability and death.

Underwriting: In severe cases, a rating may apply.

## **Pancreatitis**

This means inflammation of the pancreas, which is an organ important for digestion and the production of insulin. Acute pancreatitis is a very serious condition and proposed insureds would not be considered until recovery was well established. Chronic pancreatitis can have serious effects and insurance can be considered only in mild active cases and at substandard rates. Both acute and chronic cases can be associated with excess alcohol use and this is of more concern.

Evidence: An APS is often required.

## **Panic attacks**

A severe form of anxiety where a wave of intense panic will sweep over the person. They can be incapacitating and if moderate to severe in intensity.

Underwriting: Coverage may not be granted or insurance may be considered on a substandard basis.

## **Paralysis**

An inability to move a part of the body that may be caused by trauma, nervous system diseases or circulation problems. The presence or absence of bladder involvement is a significant factor.

Underwriting: There's a risk when a person is immobilized as well as a risk if the bladder is involved. In addition to this, the underwriter will try to clarify that there's no further risk from underlying disease.



## **Parkinson's disease**

This disease is characterized by rigidity in the muscles with tremor.

Underwriting: It's of significant underwriting concern. Insurability depends on the severity of the disease, the disability associated with it and the proposed insured's age.

## **Peptic ulcer disease**

This is a hole in the duodenum or stomach lining. Stomach ulcers may indicate cancer and are of concern. Duodenal ulcers are usually not a cancer risk; however, they may cause severe abdominal pain and heavy bleeding. Treatment is usually with medication although surgery is occasionally required.

Underwriting: After they are healed there's little underwriting concern except in cases of recurrent disease, when a medical rating is occasionally applied.

## **Peripheral vascular disease**

This means that the peripheral arteries become narrowed and can't carry enough oxygen. The legs, kidneys and aorta are most commonly affected. The most common symptom is claudication (calf pain with exercise) if the legs are affected and hypertension if the kidneys are affected. Causes include smoking, diabetes, high cholesterol, high blood pressure and family history. Medication can be used to control symptoms. Often angioplasty (dilation of the artery) or surgical bypass of the artery is required. Any case with co-existent heart disease, stroke or gangrene won't be considered, nor will cases where the proposed insured is diabetic.

Evidence; An APS is usually required.

Underwriting: If insurable, a substandard rating will apply.

## **Personality disorders**

A group of disorders characterized by mild to severe behaviour disturbances without underlying psychiatric illness.

Evidence: An APS will usually be necessary if insurance is to be considered.

Underwriting: They're often a significant underwriting concern. They're more concerning if associated with depression, anxiety, etc.

## **Phobias**

These are intense and irrational fears of specific things, e.g., bugs, going outside, over which the person has no control. Therapy and medications are useful treatments; however, in moderate to severe cases, coverage may not be available or available only on a substandard basis.

## **Poisoning**

May be caused by a variety of agents. The cause may be intentional or accidental. If the cause is removed and there are no residual affects, then the concern is minimal. Some agents such as lead can cause long-term problems.

Evidence: A blood profile or APS may be required.

## **Polyarteritis nodosum**

See Collagen diseases.

## **Polycystic disease of the kidney**

A condition in which there are multiple cysts in the kidneys and sometimes in the liver that slowly increase in size over the decades and eventually lead to kidney failure. This may occur at any age from the 40s to the 70s. The cysts can also lead to hypertension that's difficult to control.

Evidence: Many cases can be considered with a medical rating, and further evidence (blood test, urine or APS) is often required.

Underwriting: Usually, if testing (an ultrasound of the kidneys, kidney function tests, for example), is performed and shows normal after age 30 in a person with a relative who has the disease, we may be able to offer at standard rates.

## **Polyposis**

In this condition the bowel develops multiple polyps. These are simply growths on the bowel wall. In familial polyposis there's a high risk of malignancy and usually the bowel is totally removed. After curative surgery there's only a very small long-term risk due to the lack of any bowel.

Evidence: In most cases an APS will be necessary for evaluation.

Underwriting: In other polyposis syndromes, there's a variable degree of long-term risk.

## **Polyps**

These are benign growths usually on the bowel wall. Some have the potential to develop into cancer. Evidence: An APS will often be required.

Underwriting: The underwriter will be particularly concerned if there have been multiple polyps, if the polyp type is dangerous or if there have been signs of malignancy in the past.

## **Prostate hypertrophy**

This means the benign swelling of the prostate gland. It's a normal part of aging in all men but sometimes requires surgery. The only concern is to make sure that cancer isn't present.

Evidence: An APS will often be required.

Underwriting: Proposed insureds with benign prostate conditions are usually insurable at standard rates.

## **Proteinuria**

The presence of protein in the urine that may be caused by serious diseases such as diabetes or renal failure.

Evidence: When it's found in a urine specimen, further specimens, an APS, a blood profile or a paramedical examination may be required for clarification.

## **Pulmonary valve stenosis/pulmonary valve regurgitation**

In this condition, the person is either born with or acquires with age, a pulmonary (heart) valve that's smaller (in stenosis) and bigger (in regurgitation) than normal. This may place strain on the heart and in moderate or severe cases, when insurance is available, it will be on a substandard basis.

Evidence: An APS is usually required, and a medical examination, ECG and chest x-ray may also be necessary.

Underwriting: Action can vary from standard to decline depending on the proposed insured's age, complications and the severity of the problem.

## **Renal failure**

In this condition the kidneys can't adequately filter waste from the blood. Consequently, there's a build-up of waste in the body. When the condition is severe, dialysis may be used for treatment.

Underwriting: While on dialysis, life insurance may not be considered. A renal (kidney) transplant may be performed and after the proposed insured has recovered insurance may be available with a medical rating in select cases.

## **Renal transplant**

See Kidney transplant.

## **Rheumatic fever**

An infection that can cause scarring on the heart valves. If this damage has occurred then there's some increased underwriting concern.

Evidence: An APS may be needed. Usually the mitral and aortic valves are affected and a murmur can be heard. Physicians will typically have ordered an echocardiogram (ECHO) (ultrasound picture of the heart) to review the valves.

## **Rheumatoid arthritis**

A potentially serious form of arthritis that may cause significant problems in the joints as well as problems in other organs (such as kidney, heart and lungs).

Evidence: Some medications are potentially toxic and an APS may be required.

## **Sarcoidosis**

A chronic disease with no known cause that usually affects the lungs, bones, glands and/or liver. Evidence: An APS is usually required as the severity and extent of this disease is so widely variable.

## **Schizophrenia**

This is a long-term progressive illness and is underwritten as such. It causes hallucinations and inappropriate behaviour, but these symptoms can often be controlled with medication. However, there's extreme social isolation that can't be well treated. There's a significant increased mortality associated with this mental health disorder.

Evidence: An APS would usually be required if insurance was to be considered.

## **Scleroderma**

See Collagen diseases.

Sexually transmitted disease

A wide-ranging group of diseases spread by sexual activity that may cause local or widespread problems. Usually gonorrhoea, chlamydia and herpes are of minimal underwriting concern. Syphilis is usually well treated nowadays although it may cause widespread problems. AIDS is the most serious of these conditions.

Evidence: With a history of sexually transmitted disease (STD), a blood profile or other evidence may be required.

## **Skull fracture**

Usually caused by trauma, this has little underwriting significance once full recovery has occurred and a period of two years has passed.

Underwriting: Within the two-year time span, if the person is recovered, they are insurable on a substandard basis due to the risk of underlying brain injury.

## **Sleep apnea**

This can be a serious condition that causes the person to stop breathing while asleep. It can be related to obesity and the person is usually a heavy snorer. The treatment involves surgery or the use of oxygen at night with a mask. It's difficult to get used to sleeping with the machine and therefore people often don't use it as prescribed.

Evidence: An APS is normally required for consideration. If it's noted that the patient has many symptoms or signs of sleep apnea and a sleep test is ordered, insurance will usually be postponed until the results are available.

Underwriting: Once good compliance is documented over a period of time, the coverage may be considered at standard rates.

## **Smoking**

Smoking is a risk factor for many diseases. These include, but are not limited to, asthma, chronic bronchitis, chronic obstructive lung disease, emphysema, lung cancer, arteriosclerosis, coronary artery disease, peripheral vascular disease and cerebrovascular disease.

Underwriting: All tobacco and marijuana users will pay smoker rates until clear of all nicotine containing substances for a period of one year. In addition, for some conditions such as angina or lung conditions, an extra rating may apply for smokers

## **Spina bifida**

In this disease, the end of the spinal cord isn't fully developed and there can be a varying degree of paralysis of the lower limbs. An important concern is whether or not the bladder is involved. The only concerns are severe immobility or bladder involvement.

Underwriting: Any rating would depend on the degree of paralysis and the occurrence of any other complications.

## **Stenting (Heart)**

A stent is a wire metal mesh tube used to prop open an artery during angioplasty. The stent stays in the artery permanently, holds it open, improves blood flow to the heart muscle and relieves symptoms (usually chest pain). See Coronary artery disease and Angioplasty for more.

## **Stress test**

A test during which the proposed insured walks a treadmill (or rides a stationary bicycle) until fatigued while his electrocardiogram (ECG) is monitored. Stress tests are used to help in the evaluation of chest pain in order to make the diagnosis of coronary artery disease. These are usually used in life insurance as evidence when already performed by an attending physician. On occasion for larger cases they will be requested as an underwriting requirement.

Another, more advanced test is the stress echocardiogram (ECHO) or stress MIBI. The stress ECHO involves a resting echo (ultrasound picture) of the heart and then an echo taken at peak exercise. This allows the doctor to see how well the walls of the heart are moving and is helpful in determining if certain areas are not getting enough blood flow (oxygen). The stress MIBI involves a nuclear scan of the heart before and after exercise.

## **Stroke**

This is caused by a loss of blood supply to the brain. In older proposed insureds the cause is usually arteriosclerosis or blood clot. In younger proposed insureds the cause is often bleeding from a ruptured Berry aneurysm. The underwriting risk assessment is based on the possibility of further episodes as well as the risk of residual damage from the stroke. Insurance can't usually be considered if a proposed insured has had more than one stroke or also suffers from coronary artery disease. If the cause is atrial fibrillation then it's very unlikely that insurance can be considered. If the cause is arteriosclerosis, then substandard insurance can be considered on selected cases. Occasionally, carotid endarterectomy, which is surgery to clean out the neck arteries, is performed. After this surgery, selected cases are also insurable.

Evidence: An APS and occasionally an ECG or paramedical examination, will be required if insurance is to be considered.

Underwriting: After a single episode, some proposed insureds can be considered after one year, on a substandard basis.

## **Suicide**

Attempted suicide carries a statistical future risk of further attempts. After an attempt, a temporary extra rating will apply for some years. In addition, a rating for any underlying mental disturbance will apply.

Evidence: An APS will usually be required if insurance is to be considered.

Underwriting: After a single episode, some proposed insureds can be considered after one year, on a substandard basis.

## **Surgery**

Proposed insureds who have major surgery planned won't be considered for insurance until recovered from the surgery. The types of planned surgery leading to postponement vary with the individual's health. In general, any surgery where the abdomen or chest must be open will lead to the case being postponed.

## **Syncope**

Fainting, or syncope, is a temporary loss of consciousness. There are many causes, from a simple faint to cardiac disease.

Evidence: An APS is usually required.

Underwriting: It's important to clarify any underlying cause and details of the condition at the time of application.

## **Temporal arteritis**

See Collagen diseases.

## **Tetralogy of fallot**

A congenital condition involving several abnormalities within the heart.

Evidence: An APS and possibly other evidence will be required.

Underwriting: Selected cases will be insurable one year after surgical correction, on a substandard basis.

## **Thallium test**

This test is used to diagnose coronary artery disease. For this test, while the proposed insured is exercised a small, safe dose of a radioactive substance is given. The computerized counter can then evaluate the circulation to the heart.



## **Transient ischemic attack/TIA**

In this condition, a person temporarily appears to have had a stroke, but then recovers within hours. Causes include arteriosclerosis and atrial fibrillation.

Evidence: An APS will be required in most cases.

Underwriting: The underwriting risk relates to the fact that some of these people will go on to have a stroke. If a person has more than one episode, then they are considered the same as if they had a stroke. Additional concerns are associated high blood pressure, diabetes and continued smoking.

## **Tuberculosis**

An infectious disease making a comeback recently, particularly in the elderly population; in patients with AIDS; and in immigrants from areas where the disease is common.

Evidence: In most cases an APS will be required. Underwriting: If treated and cured there's usually no concern.

## **Ulcerative colitis**

This serious condition refers to an inflammation of the bowel. The person has bloody diarrhea and often abdominal pain. In the long term malnutrition, weight loss and cancer of the bowel are risks. Keys in the history include frequency of colonoscopies, associated illnesses (cancer of the bowel, arthritis) and history of any surgery. Treatment is with medication or surgery.

Underwriting: If the complete bowel is removed, a standard offer may be possible after a period of time if otherwise stable. Most cases can't be considered until symptoms are settled for at least six months and then will be considered on a substandard basis for several years.

## **Varicose veins**

These are dilated superficial veins on the legs. Except in the most severe cases they are of no underwriting significance.

## **Ventricular septal defect**

In this condition there's a hole between the left and right ventricles of the heart. It can seriously alter the heart's function by allowing blood to flow in the wrong direction. In mild cases it can correct itself with time but in serious cases it can require surgery.

Evidence: An APS is usually required. In children, mild cases that are well investigated can be considered.

Underwriting: Once the hole has healed or been repaired there's minimal underwriting concern. In adults, when the problem continues insurance can usually be considered although a medical rating may apply. Other concerns with the heart, e.g., irregular hearts rhythms, enlarged heart and other heart valve problems, may increase the rating.