

IMEG

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Traumatic Injury to Genitalia (Male and Female)



TOPIC 2 - Traumatic Injury to Genitalia (Male and Female)

Severe multiple injuries and burns due to blast injury from Improvised Explosive Devices have characterised recent and current conflicts. Involvement of the abdomen, pelvis and perineum can cause traumatic physical damage to both male and female reproductive structures and organs and excretory organs, leading to compromised fertility and sexual function, urinary and faecal continence. Such injuries can be associated with severe disfigurement and consequent severe psychological trauma. Where serious damage or loss of external genitalia leads to disfigurement, these will impact on self-image, confidence and self-worth. Such effects can occur in both men and women.

While there have been very few claims for these, it is essential the Scheme recognises the potentially devastating effects in young men and women.

Other categories of injuries recognised in the Scheme can also cause sexual dysfunction and continence problems (e.g. spinal cord injury). We are here only concerned with conditions which have followed traumatic physical injury to male and female reproductive organs and structures and to excretory function (urinary tract and lower bowel).

Argument

As a general approach it seems appropriate to recognise as separate: the primary injury(ies), which will determine the lump sum payment and level of the GIP, and separately any associated effects of the anatomical damage on reproduction, sexual activity and continence.

The primary injury is likely to be placed in Table 1, Burns and especially Table 2, Injury, Wounds and Scarring.

Item	Level	Injury
10	7	Complex injury to abdomen, including pelvis, with complications, causing permanent significant functional limitation and restriction.
15	8	Injury to abdomen, including pelvis, with complications, causing permanent significant functional limitation and restriction.
16	8	Complex injury to abdomen, including pelvis, causing permanent significant functional limitation and restriction.
18	9	Injury to abdomen, including pelvis, causing permanent significant functional limitation and restriction.
29	11	High velocity gun shot wound, deep shrapnel fragmentation or one or more puncture wounds (or all or any combination of these injuries) to the head and neck, chest, back, abdomen or limb, with damage to one or more vital structures causing permanent significant functional limitation and restriction.

33	11	Complex injury to abdomen, including pelvis, with complications, causing or expected to cause significant functional limitation and restriction at 26 weeks, with substantial recovery beyond that date.
39	12	High velocity gun shot wound, deep shrapnel fragmentation or one or more puncture wounds (or all or any combination of these injuries) to the head and neck, chest, back and abdomen or limb with substantial recovery.
40	12	Traumatic injury to genitalia requiring treatment resulting in severe permanent damage or loss.
42	12	Complex injury to abdomen, including pelvis, causing or expected to cause significant functional limitation and restriction at 26 weeks, with substantial recovery beyond that date.
44	13	Injury to abdomen, including pelvis, with complications, causing or expected to cause significant functional limitation and restriction at 26 weeks, with substantial recovery beyond that date.
57	14	Traumatic injury to genitalia requiring treatment resulting in moderate permanent damage.

The current AFCS Tariff includes a single reference to sexual dysfunction in Table 4, Item 3 where Infertility attracts an award of Level 8 and a Guaranteed Income Payment based on 50% military salary. Infertility has no effect on employability. This is therefore illogical and a different approach is needed. As the affected population are young people there is no need for the AFCS approach to include a range of awards varying with claimant age, as seen in civil awards, but rather a single level of award is merited.

Recommendations

I. Where traumatic physical damage is accompanied by problems with sexual activity (impotence), fertility, bowel and bladder continence or disfigurement, it is recommended there should be an additional one-off supplement of £60,000 (sixty thousand) paid for each condition. For psychological symptoms, otherwise than associated with disfigurement, the approach as in the rest of the Scheme would be to consider that the award for the primary injury already takes account of psychological symptoms, which do not constitute a discrete diagnosis. A separate award for a diagnosed mental disorder will be considered and paid if it is predominantly due to service.

II. The group also recommends that where appropriate and regardless of location in the UK, AFCS recipients of an award for infertility should be entitled to a minimum of three full cycles of IVF treatment, or otherwise approved best practice treatment provided by the NHS.

New descriptors	Additional Tariff lump sum
Incontinence – bowel or bladder or both	£60,000
Impotence	£60,000
Infertility	£60,000
Physical disfigurement	£60,000