# SUMMARY OF MEDICAL EXAMINATIONS OF SEAFARERS CONDUCTED BY APPROVED DOCTORS 1 January – 31 December 2022

Required in accordance with The Merchant Shipping (Medical Certification) Regulations 2010

### 1. SUMMARY OF APPROVED DOCTORS' DECISIONS

Fitness	Result	Validity Period	Form Issued	Number
Cat.				Issued
Cat 1	UNRESTRICTED	2 years	ENG 1	40076
	UNRESTRICTED	Less than 2 years – non- medical reasons e.g. under 18 years	ENG 1	338
	UNRESTRICTED - U (TL)	Less than 2 years – UNRESTRICTED - U (TL) medical reasons E		4398
Cat 2	RESTRICTED - R	2 years	ENG 1 + ENG 3	831
	RESTRICTED - R (TL)	Less than 2 years – medical reasons	ENG 1 + ENG 3	1151
Cat 3	TEMPORARILY UNFIT - TU	Any	ENG 3	955
Cat 4	FAILURE - F	Permanent	ENG 3	59
No. of R	eturns entered = 208	TOTAL No. OF EXA	MINATIONS	47808

#### 2. ANNUAL COMPARISON OF EXAMINATIONS AND MEDICAL REVIEWS

TOTAL	2009	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022
Exams	42257	47482	51759	52200	54311	54058	52880	52483	53315	51294	51862	38567	46134	47808
ENG	81	66	51	48	41	31	47	46	48	24	23	18	18	23
Referral														

#### 3. ANALYSIS OF REFEREES' DECISIONS ON APPEAL CASES

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Medical Category	AD's Decision Upheld	AD's Decision changed	Cases awaiting decision	Cases withdrawn	TOTAL
Cancers					0
Endocrine and metabolic					0
Blood disorders					0
Mental disorders	4	3			7
Diseases of the nervous system	2	3			5
Cardio-vascular system	1				1
Respiratory system		2			2
Digestive system	1	1			2
Genito-urinary conditions		2			2
Musculoskeletal		1			1
Sensory	2				2
General	1				1
Physical fitness					0
Skin					0
Unknown (geographical/incomplete)					0
TOTAL NUMBER OF CASES	11	12	0	0	23

**Key: U(TL)** – Unrestricted (less than 2 years) **R-** Restricted (2 years); **R(TL)** - Restricted (less than 2 years); **F-** Failed; **TU** – Temporarily Unfit

	<b>R(TL) -</b> Restricted (less than 2 years); <b>F-</b> F	·ailed; IL	ו – וemp	orariiy Unt	Iτ	
Ref No	Condition	U(TL)	R	R(TL)	TU	F
1.0	INFECTIONS					
1.1	Gastro intestinal infection	1	0	1	0	0
1.2	Other infection					
1.3	Pulmonary TB	1	1	0	3	1
1.4	Sexually transmissible diseases	5	0	5	4	0
1.5	HIV +	0	0	0	0	0
		17	0	1	3	0
1.6	Hepatitis A	0	0	0	0	0
1.7	Hepatitis B, C etc	8	1	1	0	0
2.0	CANCERS					
2.1	Malignant neoplasms	110	0	40	45	
		112	8	48	15	2
<b>3.0</b> 3.1	ENDOCRINE AND METABOLIC Endocrine disease					
		38	0	8	7	0
3.2	Diabetes – non insulin treated by diet	33	0	6	10	0
3.3	Diabetes - non-insulin treated by oral medication	325	11	78	22	1
3.4	Diabetes - insulin using					
23.5	Obesity / abnormal body mass	0	6	131	9	0
		1582	18	196	103	1
4.0	BLOOD DISORDERS					
4.1	Blood-forming organs	4	1	0	2	0
4.2	Anaemia	3	0	1	0	0
4.3	Splenectomy (history of surgery)					
		0	4	0	3	0
5.0	MENTAL DISORDERS					
5.1	Psychosis (acute)	0	0	10	4	1
5.2	Alcohol abuse (dependency)	1	0	4	9	1
5.3	Drug dependence / persistent substance abuse	·				
		1	0	12	8	4
5.4 a	Mood / affective disorders severe anxiety state, depression, or any other mental disorder likely to impair performance	40	4	76	48	3
5.4 b	Mood / affective disorders minor or reactive					
5.5	symptoms of anxiety/depression  Disorder of personality - clinically recognised	426	7	79	32	0
5.6	Disorder of psychological development -	0	0	0	0	0
	autism, Aspergers syndrome	4	1	4	3	0
5.7	Hyperkinetic disorders -	34	1	8	27	0

Ref No	Condition	U(TL)	R	R(TL)	TU	F
NO	Attention Deficit Hyperactivity Disorder					
5.8	Other mental health and cognitive disorders	5	0	6	4	0
6.0	DISEASES OF THE NERVOUS SYSTEM					
6.1	Organic nervous disease e.g multiple sclerosis, Parkinson's disease	7	3	4	8	1
6.2	Syncope	1	1	3	7	0
6.3	Epilepsy - no provoking factors	4	11	14	15	0
6.4	Epilepsy provoked by alcohol, medication, head injury	0	1	2	5	1
6.5	Risk of seizures from intra-cranial surgery	1	1	2	2	0
6.6	Migraine	3	1	1	2	0
6.7	Meniere's disease					
6.8	Sleep apnoea	0	0	0	0	0
6.9	Narcolepsy	24	2	15	9	1
		0	0	1	0	0
7.0	CARDIO-VASCULAR SYSTEM					
7.1	Heart – congenital and valve disease	28	4	17	24	0
7.2	Hypertension	1187	13	50	146	2
7.3	Cardiac event	165	3	102	36	0
7.4	Cardiac arrhythmias	39	6	43	28	0
7.5	Other heart disease	35	9	8	5	1
7.6	Ischaemic cerebrovascular disease					
7.7	Arterial – claudication	16	5	30	8	2
7.8	Varicose veins	2	0	3	1	1
7.9	Deep vein thrombosis / pulmonary embolus	5	0	1	1	0
		8	6	8	7	1
8.0	RESPIRATORY SYSTEM					
8.1	Sinusitis / nasal obstruction	4	0	4	1	0
8.2	Throat infections	1	0	1	1	
8.3	Chronic bronchitis and /or emphysema	1	0	1	1	0
8.4	Asthma	12	2 16	19	4 16	3
8.5	Pneumothorax					
		1	0	2	4	0
<b>9.0</b> 9.1	DIGESTIVE SYSTEM Oral Health					
0.1	- Ciai i Ioanii	15	23	12	36	0

Ref No	Condition	U(TL)	R	R(TL)	TU	F
9.2	Peptic ulcer	0	0	1	0	0
9.3	Non infectious enteritis, colitis, Crohn's disease, diverticulitis etc.	36	13	42	23	3
9.4	Stoma (ileostomy, colostomy)					
9.5	Cirrhosis of liver	0	2	2	. 1	0
9.6	Biliary tract disease, biliary colic	0	0	2	1	1
9.7	Pancreatitis	7	1	2	6	0
9.8	Anal conditions: piles (haemorrhoids) fissures,	2	1	2	2	1
9.9	fistulae  Hernias – inguinal and femoral	3	1	0	2	0
9.10	Hernias –umbilical	5	11	12	12	0
9.11	Hernias – diaphragmetic (hiatus)	8	4	6	1	0
		0	0	1	0	0
10.0	GENITO-URINARY CONDITIONS					
10.1	Proteinuria, haematuria, glycosuria, or other urinary abnormality	56	2	12	40	0
10.2	Acute nephritis	0	0	1	1	0
10.3	Sub acute or chronic nephritis or nephrosis	5	2	8	1	1
10.4	Acute urinary infection	2	2	0	2	0
10.5	Renal or ureteric calculus renal colic	13	8	25	21	0
10.6	Prostatic enlargement / Urinary obstruction	10	2	2	5	0
10.7	Removal of kidney or one non-functioning kidney	4	0	6	1	1
10.8	Incontinence of urine	1	0	0	0	0
10.9	Heavy vaginal bleeding or other gynecological conditions	2	0	1	2	0
11.0	PREGNANCY	_	Ü		_	Ű
11.1	Pregnancy	3	1	4	2	0
12.0	SKIN	J			_	Ü
12.1	Skin infections	1	1	1	1	0
12.2	Other skin diseases e.g. eczema, dermatitis, psoriasis	15	0	3	6	0
		. 0				
<b>13.0</b> 13.1	MUSCULO-SKELETAL Osteo arthritis, other joint diseases and					
13.2	subsequent joint replacement  Recurrent instability of shoulder or knee joints	32	12	31	19	3
13.3	Limb prosthesis	1	1	3	4	0
13.4	Back pain	1	0	0	1	0
10.4	Saon pain	6	7	12	10	2

Ref No	Condition	U(TL)	R	R(TL)	TU	F
14.0	SENSORY					
14.1	Speech defect	0	0	1	0	0
14.2	Otitis – externia and media	0	0	0	0	0
14.3	Hearing	42	27	23	56	2
14.4	Eyesight – Visual acuity	13	78	20	70	12
	Colour vision	54	404	37	17	5
	Other sight problems	11	19	9	7	1
15.0	GENERAL					
15.1	Prescribed medication	57	37	66	30	1
15.2	Transplants – kidney, heart, lung, liver	1	0	7	1	1
15.3	Progressive conditions	3	0	5	0	0
15.4	Allergies (other than allergic dermatitis and asthma)	5	58	18	33	9
15.5	Conditions not specifically listed	269	14	12	22	1
16.0	PHYSICAL FITNESS					
16.0	Physical fitness (see Appendix 2 of MSN 1839)	64	0	19	13	1

## Chief Medical Advisor's COMMENTARY

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Each year all MCA Approved Doctors (ADs) complete a return. This lists the number of medical examinations performed, and how many medical certificates have been issued in each category (fit for service worldwide and fit for restricted duties whether for two years or a limited time), as well as how many seafarers and fishermen are made temporarily or permanently unfit. The medical reasons for all restricted certificates and decisions of unfitness are anonymously noted. The MCA then analyses these returns and produces this summary report.

In previous years all this information was collected from paper records and so only limited analysis was possible. It did however enable the pattern of illnesses to be noted and any major trends to be highlighted. During 2022 the MCA began the role out of a new, Approved Doctor Information System (ADIS) that enables ENG1 medical examinations to be documented on an electronic system with the appropriate certificate issued once a decision has been made. In future years all the required information on the number of examinations etc will be available electronically which will allow greater analysis of trends. However, for 2022, and 2023, the information was collected both electronically and from paper records.

Recent year's statistics were significantly affected by the pandemic and the difficulty in accessing a medical examination along with an exceptional exemption from regulation that allowed for expired certificates to be accepted on board ship for 6 months as opposed to the 3 months. All Covid restrictions were lifted in early 2022 and the exemption was withdrawn in July 2022, however health services have not all returned to pre pandemic levels in many areas, and it is likely that this year's numbers are still affected by the pandemic.

Since 2019 UK fishermen working on larger vessels have been included in the medical examination process, following the implementation of the Work in Fishing convention 2007 (ILO 188). Fishermen on smaller vessels that meet certain parameters will not require a medical certificate until November 2023. A policy on Grandfather Rights for existing fishermen who had worked safely with stable medical conditions prior to the introduction of the medical certificates was developed to minimise the impact on industry. A total of 1051 fishermen attended for ENG medical fitness examination this year, 17 of whom were certified using Grandfather rights, and only 2 were made permanently unfit.

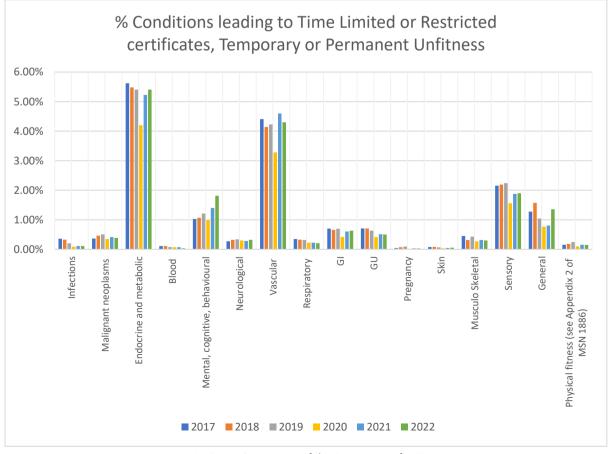
For the 9 years prior to the pandemic, the total number of medical examinations had been remaining relatively steady between approximately 51,000 and 54,000 but this number dropped during the pandemic with 38,567 examinations done in 2021. This year saw an increase to 47 808, approaching those figures seen prior to 2020. This may be due to the further expansion of the leisure industry.

Regional figures continue to be reviewed annually to ensure that any significantly high or low numbers are considered when renewing appointments or appointing new ADs. As usual, around 40% of ENG medicals were performed overseas, the majority of these taking place in areas associated with yachting with the exception of the Philippines, where many seafarers work in the cruising sector. Figures in the former areas are almost back to prepandemic levels, while although they have risen slightly again in the Philippines they have not regained pre pandemic levels.

Seafarers or fishermen who either fail or are issued with a restricted certificate are entitled to seek a review of the AD's decision by an independent medical referee if they have reservations about the initial decision. The results of the referee reviews are also presented. Fuller details of the procedures for ADs and referees can be found in MSN 1883, MSN 1886, MSN 1887 and in the MCA Approved Doctors' Manual, July 2020 Edition which can be found on line at <a href="https://www.gov.uk/government/publications/the-approved-doctors-manual">https://www.gov.uk/government/publications/the-approved-doctors-manual</a>.

An Executive Agency of the Department for Transport Referrals to referees had remained stable at between 30 and 50 reviews each year but dropped in the two years prior to the pandemic and are now stable at 18 per year, no doubt due to the lower number of medicals performed. Decisions were altered in 12 out of the 18 cases reviewed, but it should be noted that a change in decision may represent a different restriction, and does not necessarily mean that the end result was more lenient.

Analysis of the type of certificate issued showed 94% Category 1 Unrestricted certificates, 4% Category 2 Restricted certificates, and 2% temporarily or permanently unfit. These percentages remain relatively stable year on year. The total number of ADs varies during the year with ongoing retirements and new appointments. 195 sets of data were collected from 206 ADs in total, most of whom are on the general list and able to perform medicals for any seafarer, while 22 performed medicals only for one or more named companies, data being collected separately for each company. On reviewing the conditions underlying a decision of temporary or permanent unfitness, the majority were caused by vascular disease (mostly hypertension), followed by endocrine disease (mostly obesity, but also diabetes), then sensory (mostly visual acuity but also hearing). When restricted certificates are considered, a significant majority represented defective colour vision, followed by vascular and endocrine conditions. These trends remain relatively constant year on year although mental health does appear to be increasingly significant as a cause of unfitness or restriction.



Although every condition noted for each seafarer is recorded, one seafarer may have several different conditions leading to their fitness decision. It is not possible to report whether specific conditions were linked, although it is likely for instance that hypertension was seen with other diagnoses such as obesity or diabetes. Since the introduction of Colour Assessment and Diagnosis (CAD) testing as a supplementary test for deck candidates failing the Ishihara screening test for colour vision, statistics around the pass rate have been gathered. The pass rate for this test is low, at less than 5%. This is similar to the low pass rate for Holmes Wright B Lantern testing and illustrates the fact that most of those who fail the Ishihara test do indeed have defective colour vision.

The potential for analysis of the useful data collected by ADs remains limited when working with paper systems, but the electronic system of certification will eventually allow the automatic collection of data represented within the annual returns system and will allow for a much simpler review of data regarding health patterns and trends as mentioned above.

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