In the Matter of the Compensation of
**JEFRE C. BROWN, Claimant**
WCB Case No. 15-01459
ORDER ON REVIEW
Dale C Johnson, Claimant Attorneys
MacColl Busch Sato PC, Defense Attorneys

Reviewing Panel: Members Lanning and Curey.

Claimant requests review of Administrative Law Judge (ALJ) Donnelly's order that upheld the self-insured employer's denial of his occupational disease claim for bilateral carpal tunnel syndrome (CTS). On review, the issue is compensability.

We adopt and affirm the ALJ's order with the following supplementation.

Claimant began working for the employer as a delivery driver in January 2014. (Tr. 5). His work involved driving between 30 and 130 miles per day and delivering food products to multiple restaurants. (Tr. 14-19). Claimant's work required him to lift, slide, push, and pull food products weighing up to 80 pounds, and to use a hand truck and pallet jack to move the products from his truck to the restaurant food storage areas. (*Id.*) His truck was pre-loaded with the products to be delivered before his shift. (*Id.*) While the truck was supposed to be loaded in the order of the deliveries, he frequently would need to move products within, and sometimes out of, the truck in order to reach all of the products needed for a particular delivery. (*Id.*)

In February 2014, claimant was evaluated for bilateral finger numbness and left foot pain by Dr. Meyers, a primary care physician. (Ex. A-1). He reported that his symptoms were worse at night with his arms resting on his chest. (*Id.*) Dr. Meyers recommended wrist splints for use at night, and noted that it appeared that claimant had CTS related to "repetitive motions" from his work. (Ex. A-2).

In August 2014, Dr. Meyers recommended a nerve conduction study for evaluation of claimant's ongoing bilateral finger numbness. (Ex. 1). The electro-diagnostic study performed by Dr. Balm indicated bilateral CTS and bilateral cubital tunnel syndrome. (Ex. 2).

In December 2014, claimant filed a claim for bilateral CTS. (Ex. 4).

Following an employer-requested medical examination by Dr. Bell, which concluded that claimant's work activities were not the major contributing cause of his bilateral upper extremity conditions, the employer issued a denial of the claim. (Exs. 9, 10).

The ALJ upheld the insurer's denial and concluded that the opinion of Dr. Meldrum, on whom claimant relied to establish compensability of CTS condition, was not persuasive. On review, claimant contends that Dr. Meldrum's opinion is persuasive, and the contrary opinions of Drs. Bell and Green are unpersuasive because they are based on statistical analysis, rather than factors that are specific to him. Based on the following reasoning, in addition to that expressed by the ALJ, we affirm.

Dr. Bell noted that claimant had been diagnosed with bilateral neuropathies of the carpal tunnel and cubital tunnel, and additionally described paresthesias in his feet. (Ex. 17-2). She considered claimant to have polyneuropathy which was indicative of a high risk of diabetes, and she concluded that claimant's obesity, in combination with genetic and other factors, were the major contributing cause of claimant's upper extremity condition. (*Id.*) Dr. Green considered the presence of bilateral neuropathies at both the cubital tunnel and the carpal tunnel to be indicative of a systemic cause of claimant's CTS, rather than work-related causes. (Ex. 20-2).

While Dr. Meldrum responded to the opinions expressed by Drs. Bell and Green regarding the contribution of claimant's obesity, he did not comment on the implications of claimant's "polyneuropathy" presentation. Because this presentation supported Drs. Bell and Green's opinions that claimant's CTS was caused by personal and constitutional causes rather than his work activities, Dr. Meldrum's lack of response to their opinions on this point diminishes the persuasiveness of his opinion. *See Janet Benedict*, 59 Van Natta 2406, 2409 (2007), *aff'd without opinion*, 227 Or App 289 (2009) (medical opinion less persuasive when it did not address contrary opinions).

Finally, Drs. Bell and Green relied on a detailed consideration of claimant's specific work activities as well as on epidemiological studies based on statistical analysis, and explained why the work activities were not the major contributing cause of claimant's CTS condition. While Dr. Meldrum offered a general caution regarding the application of epidemiological studies, he did not disagree with the generic conclusions that Drs. Bell and Green reached based on those studies, but took issue with their specific application to claimant. For the reasons explained in

this order, as well as those expressed in the ALJ's order, we are persuaded that Drs. Bell and Green thoroughly considered claimant's specific circumstances and work activities. *See Maria S. Arreola*, 66 Van Natta 1359, 1362 (2014). Consequently, their analysis was more persuasive than the contrary analysis of Dr. Meldrum. Therefore, we affirm the ALJ's order upholding the employer's denial.

## ORDER

The ALJ's order dated February 17, 2016 is affirmed.

Entered at Salem, Oregon on August 5, 2016