Characteristic attacks that occur more than once a day, last an average of more than two hours each, respond poorly to treatment, and that restrict most routine daily activities ......................................................... 100

Characteristic attacks that occur more than once a day, last an average of more than two hours each, and respond poorly to treatment, but that do not restrict most routine daily activities .................................................................

Characteristic attacks that occur daily or more often but that respond to treatment .................................................................

Characteristic attacks that occur less than daily but at least three times a week and that respond to treatment .................................................................

Characteristic attacks that occur more than daily but at least three times a week and that respond to treatment 30

Characteristic attacks that occur daily or more often but that respond to treatment 30

Characteristic attacks that occur less than daily but at least three times a week and that respond to treatment 30

NOTE: These evaluations are for involvement of a single extremity. If more than one extremity is involved, evaluate each extremity separately and combine (under §4.25), using the bilateral factor (§4.26), if applicable.

7122 Cold injury residuals:

Arthralgia or other pain, numbness, or cold sensitivity plus two or more of the following: tissue loss, nail abnormalities, color changes, locally impaired sensation, hyperhidrosis, X-ray abnormalities (osteoporosis, subarticular punched out lesions, or osteoarthritis) ................................................................. 30

Arthralgia or other pain, numbness, or cold sensitivity plus tissue loss, nail abnormalities, color changes, locally impaired sensation, hyperhidrosis, or X-ray abnormalities (osteoporosis, subarticular punched out lesions, or osteoarthritis) ................................................................. 30

Asymptomatic palpable or visible varicose veins ................................................................. 0

NOTE: These evaluations are for involvement of a single extremity. If more than one extremity is involved, evaluate each extremity separately and combine (under §4.25), using the bilateral factor (§4.26), if applicable.

7123 Soft tissue sarcoma (of vascular origin) .......... 100

NOTE: For purposes of this section, a characteristic attack of erythromelalgia consists of burning pain in the hands, feet, or both, usually bilateral and symmetrical, with increased skin temperature and redness, occurring at warm ambient temperatures. These evaluations are for the disease as a whole, regardless of the number of extremities involved.

7120 Varicose veins:

With the following findings attributed to the effects of varicose veins: Massive board-like edema with constant pain at rest ........................ 100

Persistent edema or subcutaneous induration, stasis pigmentation or eczema, and persistent ulceration .........................

Persistent edema and stasis pigmentation or eczema, with or without intermittent ulceration .................................

Persistent edema, incompletely relieved by elevation of extremity, with or without beginning stasis pigmentation or eczema .......

Intermittent edema of extremity or aching and fatigue in leg after prolonged standing or walking, with symptoms relieved by elevation of extremity or compression hose .................................

Asymptomatic palpable or visible varicose veins .................................................................

NOTE: These evaluations are for involvement of a single extremity. If more than one extremity is involved, evaluate each extremity separately and combine (under §4.25), using the bilateral factor (§4.26), if applicable.

7121 Post-phlebitic syndrome of any etiology:

With the following findings attributed to varicous disease:

Massive board-like edema with constant pain at rest .........

Persistent edema or subcutaneous induration, stasis pigmentation or eczema, and persistent ulceration .........................

Persistent edema and stasis pigmentation or eczema, with or without intermittent ulceration .................................

Persistent edema, incompletely relieved by elevation of extremity, with or without beginning stasis pigmentation or eczema .......

Intermittent edema of extremity or aching and fatigue in leg after prolonged standing or walking, with symptoms relieved by elevation of extremity or compression hose .................................

7121 Post-phlebitic syndrome of any etiology:

With the following findings attributed to varicous disease:

Massive board-like edema with constant pain at rest .........

Persistent edema or subcutaneous induration, stasis pigmentation or eczema, and persistent ulceration .........................

Persistent edema and stasis pigmentation or eczema, with or without intermittent ulceration .................................

Persistent edema, incompletely relieved by elevation of extremity, with or without beginning stasis pigmentation or eczema .......

Intermittent edema of extremity or aching and fatigue in leg after prolonged standing or walking, with symptoms relieved by elevation of extremity or compression hose .................................

7121 Post-phlebitic syndrome of any etiology:

With the following findings attributed to varicous disease:

Massive board-like edema with constant pain at rest .........

Persistent edema or subcutaneous induration, stasis pigmentation or eczema, and persistent ulceration .........................

Persistent edema and stasis pigmentation or eczema, with or without intermittent ulceration .................................

Persistent edema, incompletely relieved by elevation of extremity, with or without beginning stasis pigmentation or eczema .......

Intermittent edema of extremity or aching and fatigue in leg after prolonged standing or walking, with symptoms relieved by elevation of extremity or compression hose .................................

7121 Post-phlebitic syndrome of any etiology:

With the following findings attributed to varicous disease:

Massive board-like edema with constant pain at rest .........

Persistent edema or subcutaneous induration, stasis pigmentation or eczema, and persistent ulceration .........................

Persistent edema and stasis pigmentation or eczema, with or without intermittent ulceration .................................

Persistent edema, incompletely relieved by elevation of extremity, with or without beginning stasis pigmentation or eczema .......

Intermittent edema of extremity or aching and fatigue in leg after prolonged standing or walking, with symptoms relieved by elevation of extremity or compression hose .................................

7121 Post-phlebitic syndrome of any etiology:

With the following findings attributed to varicous disease:

Massive board-like edema with constant pain at rest .........

Persistent edema or subcutaneous induration, stasis pigmentation or eczema, and persistent ulceration .........................

Persistent edema and stasis pigmentation or eczema, with or without intermittent ulceration .................................

Persistent edema, incompletely relieved by elevation of extremity, with or without beginning stasis pigmentation or eczema .......

Intermittent edema of extremity or aching and fatigue in leg after prolonged standing or walking, with symptoms relieved by elevation of extremity or compression hose .................................

7121 Post-phlebitic syndrome of any etiology:

With the following findings attributed to varicous disease:

Massive board-like edema with constant pain at rest .........

Persistent edema or subcutaneous induration, stasis pigmentation or eczema, and persistent ulceration .........................

Persistent edema and stasis pigmentation or eczema, with or without intermittent ulceration .................................

Persistent edema, incompletely relieved by elevation of extremity, with or without beginning stasis pigmentation or eczema .......

Intermittent edema of extremity or aching and fatigue in leg after prolonged standing or walking, with symptoms relieved by elevation of extremity or compression hose .................................

(Authority: 38 U.S.C. 1155)


**The Digestive System**

§ 4.110 Ulcers.

Experience has shown that the term “peptic ulcer” is not sufficiently specific for rating purposes. Manifest differences in ulcers of the stomach or duodenum in comparison with those at an
§ 4.111 Postgastrectomy syndromes.

There are various postgastrectomy symptoms which may occur following anastomotic operations of the stomach. When present, those occurring during or immediately after eating and known as the “dumping syndrome” are characterized by gastrointestinal complaints and generalized symptoms simulating hypoglycemia; those occurring from 1 to 3 hours after eating usually present definite manifestations of hypoglycemia.

§ 4.112 Weight loss.

For purposes of evaluating conditions in § 4.114, the term “substantial weight loss” means a loss of greater than 20 percent of the individual’s baseline weight, sustained for three months or longer; and the term “minor weight loss” means a weight loss of 10 to 20 percent of the individual’s baseline weight, sustained for three months or longer. The term “inability to gain weight” means that there has been substantial weight loss with inability to regain it despite appropriate therapy. “Baseline weight” means the average weight for the two-year-period preceding onset of the disease.

Note: Ratings for adhesions will be considered mental principle relating to pyramiding as outlined in § 4.14.

§ 4.114 Schedule of ratings—digestive system.

Ratings under diagnostic codes 7301 to 7329, inclusive, 7331, 7342, and 7345 to 7348 inclusive will not be combined with each other. A single evaluation will be assigned under the diagnostic code which reflects the predominant disability picture, with elevation to the next higher evaluation where the severity of the overall disability warrants such elevation.

Ratings under diagnostic codes 7301 to 7329, inclusive, 7331, 7342, and 7345 to 7348 inclusive will not be combined with each other. A single evaluation will be assigned under the diagnostic code which reflects the predominant disability picture, with elevation to the next higher evaluation where the severity of the overall disability warrants such elevation.

<table>
<thead>
<tr>
<th>Rating</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>7200</td>
<td>Mouth, injuries of: Rate as for disfigurement and impairment of function of mastication.</td>
</tr>
<tr>
<td>7201</td>
<td>Lips, injuries of: Rate as for disfigurement of face.</td>
</tr>
<tr>
<td>7202</td>
<td>Tongue, loss of whole or part: With inability to communicate by speech .......... 100</td>
</tr>
<tr>
<td>7203</td>
<td>Esophagus, stricture of: Permitting passage of liquids only, with marked impairment of general health .......... 80</td>
</tr>
<tr>
<td>7204</td>
<td>Esophagus, spasm of (cardiospasm). If not amenable to dilation, rate as for the degree of obstruction (stricture).</td>
</tr>
<tr>
<td>7205</td>
<td>Esophagus, diverticulum of, acquired. Rate as for obstruction (stricture).</td>
</tr>
<tr>
<td>7301</td>
<td>Peritoneum, adhesions of: Severe: definite partial obstruction shown by X-ray, with frequent and prolonged episodes of severe colic distension, nausea or vomiting, following severe peritonitis, ruptured appendix, perforated ulcer, or operation with drainage .... 50</td>
</tr>
<tr>
<td>7304</td>
<td>Ulcer, gastric.</td>
</tr>
<tr>
<td>7305</td>
<td>Ulcer, duodenal: Severe: pain only partially relieved by standard ulcer therapy, periodic vomiting, recurrent hematemesis or melena, with manifestations of anemia and weight loss productive of definite impairment of health .......... 60</td>
</tr>
<tr>
<td></td>
<td>Moderately severe: less than severe but with impairment of health manifested by anemia and weight loss; or recurrent incapacitating episodes averaging 10 days or more in duration at least four or more times a year .......... 40</td>
</tr>
<tr>
<td></td>
<td>Mild Note: Ratings for adhesions will be considered when there is history of operative or other traumatic or infectious (intraabdominal) process, and at least two of the following: disturbance of motility, actual partial obstruction, reflex disturbances, presence of pain.</td>
</tr>
</tbody>
</table>