

REFERENCES

Underwriting Medications

THE CASE

STUDY FOR

THIS MONTH

A 55-year-old woman is looking for \$600,000 of life insurance. Her only medical history is the very troubling skin rash eczema. However the eczema is well controlled by her daily dose of Prednisone. She otherwise profiles as preferred plus.

Certain medications impose mortality risks despite the fact that the condition produces little or no consequence to longevity. The most commonly encountered medications that can limit lifespan are Prednisone, Coumadin and Methotrexate. Often a proposed insured is taking one of these.

1 Prednisone, which is a cortisone, is the most common of the three. It is frequently used to treat allergies, skin conditions (as in the case study), asthma, arthritis, Crohn's Disease, ulcerative colitis and others. Prednisone is the most powerful anti-inflammatory medication. It calms the immune system, which is often overly reactive.

The risks of Prednisone to mortality are many, for example:

- It can lead to ulcers of the stomach and intestine causing them to rupture or bleed massively.
- It can activate dormant infections like tuberculosis and can also make a person vulnerable to new infections like pneumonia.
- It can soften the bones leading to fractures—the hip and back are especially at risk.
- It can suppress the adrenal glands that are necessary for the body to respond normally to physical stress.
- It can cause diabetes by increasing weight and decreasing the ability to use the normal insulin.
- It can cause high blood pressure.
- It can cause high cholesterol and hardening of the arteries.

Even though these risks seem overwhelming, Prednisone can most often be taken without complication. The higher the dose and the longer it is taken, the greater the risk.

2 Coumadin (Warfarin), is the blood thinner used when there is atrial fibrillation and other conditions where the blood clots too quickly. These circumstances can lead to fatal blood clots and require Coumadin. However, Coumadin can cause a sudden hemorrhage such as a stroke. The death rate from Coumadin is three per 1,000 persons a year. Still, Coumadin is less of a risk than the conditions it treats.

3 Methotrexate is commonly given for arthritis to settle the immune reaction that is involved in psoriasis or rheumatoid arthritis. Methotrexate can increase susceptibility to infections or cancer due to this immune suppression. Methotrexate can also lead to scarring of the internal organs such as cirrhosis. A small dosage can have only a small risk and improve the quality of life greatly.

In the case study the most likely offer would be Table 2 on standard plus base. While eczema has no extra mortality risk, this miserable condition so diminishes the quality of life that the risk of Prednisone becomes a reasonable risk to the proposed insured. The life insurer must assess that risk to life.

For a person taking Coumadin or Methotrexate, the risk is also most likely Table 2.



In occasional instances when only a tiny dose of these medications has been prescribed and there are no other complications, then an improved offer can often be made.

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