presumptive period following service in the theater. Section 202 of the "Veterans Education and Benefits Expansion Act of 2001" expanded the definition of "qualifying chronic disability" to include (1) a medically unexplained chronic multi-symptom illness (such as chronic fatigue syndrome, fibromyalgia, and functional gastrointestinal disorders) that is defined by a cluster of signs or symptoms; and (2) any diagnosed illness that the Secretary of the VA determines in regulations warrants a presumption of service-connection. To fulfill the requirement for chronicity, the claimed illness must have persisted for a period of 6 months. The 6-month period of chronicity is measured from the earliest date on which all pertinent evidence establishes that the signs or symptoms of the disability first became manifest. (38 CFR 3.317)

Your service treatment records do not contain complaints, treatment, or diagnosis for this condition. The evidence does not show an event, disease or injury in service. (38 CFR 3.303, 38 CFR 3.304) The evidence does not show that your claimed disability is related to a service-connected disability, nor is there any evidence that your claimed disability was incurred during military service. (38 CFR 3.303, 38 CFR 3.306, 38 CFR 3.310)

We received your medical evidence from the VA Medical Center at Danville along with your private treatment records from Carle Health System and correspondence from April Williams which discusses the symptoms of your medical condition. However, the VA medical opinion found no link between your diagnosed medical condition and your service connected post-traumatic stress disorder (PTSD) and obstructive sleep apnea. The examiner stated, the conditions of GERD and PTSD are not medically related. The GERD is a separate entity entirely from the PTSD and unrelated to it. A thorough review of medical literature failed to demonstrate a causal relationship. As for obstructive sleep apnea, these two conditions are not medically related. The claimed condition is a separate entity entirely from the service connected and unrelated to it. A thorough review of medical literature failed to demonstrate a causal relationship. A nexus has not been established. The Veteran's GERD is a disease with a clear and specific etiology and diagnosis. It is less likely than not that the GERD is related to the exposure event experienced in Southwest Asia. There is lack of evidence in current medical literature supporting southwest exposures as a cause of GERD.

Therefore, service connection under this provision is precluded if there is affirmative evidence that the disability was unrelated to service in the Southwest Asia theater of operations. Service connection for gastroesophageal reflux disease (GERD) is denied because evidence established that this disability resulted from a clear and specific etiology. (38 CFR 3.317) Service connection is denied since this condition neither occurred in nor was caused by service. (38 CFR 3.303, 38 CFR 3.304)

Favorable Findings identified in this decision:

You have been diagnosed with a disability. LHI examination dated November 18, 2021, shows a diagnosis of gastroesophageal reflux disease (GERD).

The claimed primary disability is service-connected. You are service connected for post-traumatic stress disorder and obstructive sleep apnea.