

Case Number:	CM13-0023797		
Date Assigned:	12/04/2013	Date of Injury:	07/15/1998
Decision Date:	02/03/2014	UR Denial Date:	08/20/2013
Priority:	Standard	Application Received:	09/12/2013

HOW THE IMR FINAL DETERMINATION WAS MADE

MAXIMUS Federal Services sent the complete case file to a physician reviewer. He/she has no affiliation with the employer, employee, providers or the claims administrator. The physician reviewer is Board Certified in Toxicology, has a subspecialty in Pediatrics and is licensed to practice in Massachusetts and New York. He/she has been in active clinical practice for more than five years and is currently working at least 24 hours a week in active practice. The physician reviewer was selected based on his/her clinical experience, education, background, and expertise in the same or similar specialties that evaluate and/or treat the medical condition and disputed items/services. He/She is familiar with governing laws and regulations, including the strength of evidence hierarchy that applies to Independent Medical Review determinations.

CLINICAL CASE SUMMARY

The expert reviewer developed the following clinical case summary based on a review of the case file, including all medical records:

The patient is a 58 year old male with 7/15/1998 date of injury. The patient is complaining of back spasms, lower back pain, weakness with hip flexion, and knee extension. A MRI shows a disc herniation in L3-L4. The modalities of pain therapy so far include back surgery, pain medicine, TENS and activity modification. The therapies in question/dispute are Aquatic therapy and Terocin cream.

IMR ISSUES, DECISIONS AND RATIONALES

The Final Determination was based on decisions for the disputed items/services set forth below:

Aquatic Therapy, 2x26: Upheld

Claims Administrator guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Page(s): 111-113.

MAXIMUS guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Page(s): 22-23. Decision based on Non-MTUS Citation Krumova EK, Zeller M, Westermann A, Maier C. Lidocaine patch (5%) produces a selective, but incomplete block of A δ and C fibers Pain. 2012 Feb;153(2):273-80. doi: 10.1016/j.pain.2011.08.020. Epub 2011 Oct 2011.

Decision rationale: As per the MTUS guideline aquatic therapy can improve some components of health related quality of life, balance and stair climbing in females with fibromyalgia, but the timeline or the window of time after the injury is not clear and not substantiated. The injury

happened in 1998, hence after 16 years, doing any new kind of an alternative therapy, the benefits are dubious. Also, there is no evidence in literature regarding the efficacy in failed back syndrome. Also in a review by Kamioka H, et al, 2009, Aquatic exercise had a small but statistically significant short-term effect on locomotor diseases. Also Hall et al, 2008 recommended that there are no differences in pain-relieving effects between aquatic and land exercise in this article; it is also recommended that compared with no treatment, aquatic exercise has only a small pain-relieving effect; however, the small number of good-quality studies and inconsistency of results means that insufficient evidence limits firm conclusions

Terocin Cream: Upheld

Claims Administrator guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Page(s): 111-113.

MAXIMUS guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Page(s): 111-113. Decision based on Non-MTUS Citation Krumova EK, Zeller M, Westermann A, Maier C. Lidocaine patch (5%) produces a selective, but incomplete block of A δ and C fibers Pain. 2012 Feb;153(2):273-80. doi: 10.1016/j.pain.2011.08.020. Epub 2011 Oct 2011.

Decision rationale: Terocin is a topical lotion with combination of methyl salicylate, lidocaine, menthol and capsaicin. However, as per MTUS guidelines, any combination with lidocaine topical alone or in combination is not an indication to treat the pain of discogenic lower back pain or failed back syndrome. Also it is very unlikely that given the remote injury date (1998) a topical treatment will be beneficial after 16 years.