

Case Number:	CM14-0015376		
Date Assigned:	02/28/2014	Date of Injury:	05/03/1997
Decision Date:	08/07/2014	UR Denial Date:	01/28/2014
Priority:	Standard	Application Received:	02/06/2014

HOW THE IMR FINAL DETERMINATION WAS MADE

MAXIMUS Federal Services sent the complete case file to an expert reviewer. He/she has no affiliation with the employer, employee, providers or the claims administrator. The expert reviewer is Board Certified in Psychiatry and is licensed to practice in Texas. 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 expert 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 injured worker is a 64-year-old male who was injured at work and has had continued pain in his right shoulder. He has also had sleep issues and was prescribed Citalopram 20 mg to take two daily. Additionally he was prescribed oxycontin, Senna and Silenor. The injured worker reports, per the provided records, that he does well on the prescribed medications.

IMR ISSUES, DECISIONS AND RATIONALES

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

CELEXA 20 MG TAB 2 DAILY QUANTITY 60: Upheld

Claims Administrator guideline: Decision based on MTUS Chronic Pain Treatment Guidelines.

MAXIMUS guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Selective Serotonin Reuptake Inhibitors Page(s): 107.

Decision rationale: Per MTUS, selective serotonin reuptake inhibitors are not recommended as a treatment for chronic pain, but selective serotonin reuptake inhibitors may have a role in treating secondary depression. Selective serotonin reuptake inhibitors are a class of antidepressants that inhibit serotonin reuptake without action on noradrenaline, are controversial based on controlled trials. It has been suggested that the main role of selective serotonin reuptake inhibitors may be in addressing psychological symptoms associated with chronic pain. More

information is needed regarding the role of selective serotonin reuptake inhibitors and pain. Selective serotonin reuptake inhibitors have not been shown to be effective for low back pain. See antidepressants for chronic pain for general guidelines, as well as specific selective serotonin reuptake inhibitors listing for more information and references. Selective serotonin reuptake inhibitors, a class of antidepressants that inhibit serotonin reuptake without action on noradrenaline, are controversial based on controlled trials. (Finnerup, 2005) (Saarto-Cochrane, 2005) It has been suggested that the main role of selective serotonin reuptake inhibitors may be in addressing psychological symptoms associated with chronic pain. (Namaka, 2004) More information is needed regarding the role of selective serotonin reuptake inhibitors and pain. Based upon the MTUS guidelines Citalopram would not be considered medically necessary for the treatment of a pain syndrome.