

<b>Case Number:</b>	CM14-0128362		
<b>Date Assigned:</b>	08/15/2014	<b>Date of Injury:</b>	09/08/2008
<b>Decision Date:</b>	12/04/2014	<b>UR Denial Date:</b>	08/05/2014
<b>Priority:</b>	Standard	<b>Application Received:</b>	08/12/2014

### 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 Family Medicine and is licensed to practice in California. 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:

This is a 51 year old male patient who sustained a work related injury on 9/8/2008. The exact mechanism of injury was not specified in the records provided. The current diagnoses include hypertension, hyperlipidemia, shortness of breath secondary to anxiety, abdominal pain, acidreflux secondary to stress, mitral stenosis, gastritis and pterygium-ophthalmology and fatty liver. Per the doctor's note dated 7/8/14, patient had complaints of bilateral elbow pain at 6/10, cervical spine pain at 5-6/10 and lumbar pain at 7/10. Physical examination revealed normal examination of the eye, chest, cardiovascular and abdomen and normal vital examination, 4/5 strength and no change on tenderness on palpation. The current medication lists include HCTZ, Lisinopril, Dexilant, Gaviscon, Carafate, probiotics, ASA, Medrox patches, Hypertensa, Sentra AM and Sentra PM. The patient has had x-rays of the left elbow on 3/25/14 that revealed moderate degenerative changes and X-ray of the right knee on 3/25/14 that revealed Osteoarthritic changes of the knee; ultrasound of abdomen on 4/6/14 that revealed fatty liver; X-ray of the abdomen that was normal; normal carotid duplex study and sonography of abdominal aorta; vadenystagmography on 2/19/14 that revealed a central pathology. The patient has had normal CBC value. The patient has had endoscopy procedure on 1/15/2014 that was normal. The patient's surgical history include right knee repair in 1992. Patient has received an unspecified number of PT visits for this injury.

### IMR ISSUES, DECISIONS AND RATIONALES

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

**Probiotics #60:** Upheld

**Claims Administrator guideline:** The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation <http://www.webmd.com/digestive-disorders/tc/probiotics-topic-overview>

**MAXIMUS guideline:** The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation Other Medical Treatment Guideline or Medical Evidence: PubMed Probiotics: do they help to control intestinal inflammation? Ann N Y Acad Sci. 2006;1072:339. ===== PubMed Clinical usefulness of probiotics in inflammatory bowel diseases. J Physiol Pharmacol. 2006;57 Suppl 9:23. Thompson Micomedex Therapeutic uses of lactobacillus

**Decision rationale:** CA mtus and ODG do not address this issue. The therapeutic uses of the probiotics include "Allergic rhinitisAntibiotic-associated diarrhea; ProphylaxisAtopic dermatitis; ProphylaxisBacterial vaginosisCandidal vulvovaginitisConstipationCreation of ileal pouch - IleitisCrohn's diseaseDiarrhea, chronicDiarrhea - Radiation-induced disorderHelicobacter pylori gastrointestinal tract infection; AdjunctHepatic encephalopathyInfectious diarrheal diseaseInfectious diarrheal disease; ProphylaxisIrritable bowel syndromeLactose intolerancePancreatitis, acutePseudo-obstruction of intestineRecurrent urinary tract infection; ProphylaxisRespiratory symptom, Cold and Influenza-like; ProphylaxisRespiratory tract infection; ProphylaxisShort bowel syndromeUlcer of mouthVentilator-associated pneumonia; Prophylaxis" As per cited guidelines the Probiotics are useful in antibiotic associated diarrhea, inflammatory bowel disease, especially ulcerative colitis, probiotics offer a safe alternative to current therapy and helpful in the prevention and treatment of acute diarrhea in adults and children and have some effects on the course of inflammatory bowel diseases (IBD). Any evidence of acute diarrhea and inflammatory bowel diseases (IBD)- ulcerative colitis was not specified in the records provided. The records provided did not specify any current use of antibiotics Therefore, the medical necessity of Probiotics #60 is not fully established for this patient at this time.