

Case Number:	CM14-0038704		
Date Assigned:	06/27/2014	Date of Injury:	11/27/2004
Decision Date:	08/15/2014	UR Denial Date:	03/03/2014
Priority:	Standard	Application Received:	04/02/2014

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 Anesthesiology, has a subspecialty in Pain Medicine 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 43 year old female who was diagnosed with irritable bowel symptoms. The injured worker clinical note dated 11/25/13 indicated the injured worker had complaints of diarrhea and constipation and acid reflux with intermittent burning at gastric pain. A clinical note dated 11/01/13 indicated the injured worker continuing with epigastric pain and gastritis. The injured worker utilized Gaviscon, Carafate, probiotics, Sentra, ranitidine, Theramine, and Dexilant. A clinical note dated 12/02/13 indicated the injured worker showing signs consistent with Complex regional pain syndrome (CRPS) in right upper extremity. The use of Prevpac indicated to treat or prevent infections strongly suspected to be caused by bacteria. The injured worker was diagnosed with gastritis and acid reflux which remained stable. Therefore the request was not indicated.

IMR ISSUES, DECISIONS AND RATIONALES

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

Probiotics #180: Upheld

Claims Administrator guideline: The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation Probiotics ncbi.nlm.nih.gov.

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:1.)Rijkers GT, Bengmark S, Enck P, Haller D, Herz U, Kalliomaki M, Kudo S, Lenoir-

Wijnkoop I, Mercenier A, Myllyluoma E, Rabot S, Rafter J, Szajewska H, Watzl B, Wells J, Wolvers D, Antoine JM. : Guidance for substantiating the evidence for beneficial effects of probiotics: current status and recommendations for future research. *J Nutr.* 2010 Mar;140(3):671S-6S.2.)Reid G, Gaudier E, Guarner F, Huffnagle GB, Macklaim JM, Munoz AM, Martini M, Ringel-Kulka T, Sartor BR, Unal RR et al.: Responders and non-responders to probiotic interventions. How can we improve the odds? *Gut Microbes* 2010, 1:200-204.

Decision rationale: Currently, no high quality studies have been published in peer reviewed literature supporting the use of probiotics for gastrointestinal complaints. Without confirmatory evidence this use of probiotics is not fully supported at this time. Given this the request for probiotics #180 is not medically necessary.

Prevpak 14 day treatment: Upheld

Claims Administrator guideline: The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation pdr.net Prevpak.

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: 1.)Jeremy J Gilbreath et al. A core microbiome associated with the peritoneal tumors of pseudomyxoma peritonei. *Orphanet Journal of Rare Diseases* 2013, 8:105 <http://www.ojrd.com/content/8/1/105>.2.)Cristina Semino-Mora et al. Antibiotic Treatment Decreases Microbial Burden Associated with Pseudomyxoma Peritonei and Affects β -Catenin Distribution. Published OnlineFirst June 6, 2013; doi: 10.1158/1078-0432.CCR-13-0616 *Clin Cancer Res* July 15, 2013 19; 3966.

Decision rationale: Prevpac is indicated for patients who have been diagnosed with gastritis or bacterial infections. The patient has been diagnosed with acid reflux and gastritis. However, the symptoms appear to be stabilized. Therefore, it is unclear whether the patient would benefit from a Prevpac administration. Such as, Prevpac is not medically necessary.