

<b>Case Number:</b>	CM14-0070048		
<b>Date Assigned:</b>	07/14/2014	<b>Date of Injury:</b>	04/17/2011
<b>Decision Date:</b>	08/29/2014	<b>UR Denial Date:</b>	05/14/2014
<b>Priority:</b>	Standard	<b>Application Received:</b>	05/15/2014

### 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 Occupational and Environmental Medicine, and is licensed to practice in West Virginia and Ohio. 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:

Individual is a 43 year old female with a 4-17-2011 date of injury. Individual describes her pain (arm, neck and shoulder) as constant. She rates her pain as a 6 out of 10 and describes it as aching, burning and stinging (subjective). Objectively, crepitus noted in the right shoulder, tenderness to palpation in the biceps tendon bilaterally, LATS on the right, trigger points palpated in the spilius capitis and the quadratus lumborum bilaterally. Limited range of motion of the right shoulder and cervical spine, additionally. Pertinent diagnosis include: sprains and strains of neck and shoulder; shoulder impingement; bicipital tenosynovitis, de Quervain's tenosynovitis, diverticulitis and constipation. Current medications include: Biofreeze gel topical PRN, Pantoprazole Sodium DR 20 mg daily, and Amitiza 24 Mcg capsule daily. Individual was taken off Tramadol HCL ER 150mg daily in July 2014, per her medical records. Utilization review 5-14-14 denied approval for Amitiza 24 Mcg taken daily.

### IMR ISSUES, DECISIONS AND RATIONALES

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

**Amitiza 24mcg #60:** Upheld

**Claims Administrator guideline:** Decision based on MTUS Chronic Pain Treatment Guidelines Chronic Pain Medical Treatment Guidelines Page(s): 15 of 127.

**MAXIMUS guideline:** The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG) Chronic Pain,

opioid induced constipation Other Medical Treatment Guideline or Medical Evidence:  
<http://www.amitiza.com>.

**Decision rationale:** MTUS does not discuss Amitiza (Lubiprostone) and the official disability guidelines were referenced for this decision. Amitiza is a locally acting chloride channel activator that has a distinctive mechanism that counteracts the constipation associated with opioids without interfering with the opiates binding to their target receptors. Amitiza shows efficacy and tolerability in treating opioid-induced constipation without affecting patients' analgesic response to the pain medications. However, it is not recommended as a first line treatment. ODG recommends increasing fluids, increasing exercise and adherence to a diet high in fiber as a means to reduce or prevent the constipation that is associated with opioid usage. Additionally, over the counter laxatives can help to stimulate gastric motility, and the use of stool softeners can be helpful in bulking up the stool by increasing the water content. If the first line treatments are not effective in treating the constipation, then a second line treatment, such as Amitiza, can be helpful. It was not noted in the record review if the physician offered counseling in the treatment or prevention of constipation: exercise, drinking extra water, fiber diet. The patient did have an unsuccessful trial with docusate sodium but no other laxatives or prevention were noted. Furthermore, the physician has since discontinued the use of an opioid for pain control, per office notes in July 2014. Hence, opioid induced constipation should resolve in the absence of medication. Therefore, Amitiza 24 mcg #60 is deemed not medically necessary.