

Case Number:	CM14-0077340		
Date Assigned:	07/18/2014	Date of Injury:	07/24/2007
Decision Date:	08/26/2014	UR Denial Date:	04/26/2014
Priority:	Standard	Application Received:	05/27/2014

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 North Carolina. 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 claimant had a date of injury of 7/24/2007. Active diagnoses include failed back syndrome, chronic back pain with radicular symptoms and recurrent myofascial strain. There are additional diagnoses of chronic reactive anxiety, erectile dysfunction, and insomnia. Current treatment includes NSAIDs, muscle relaxers, opioids and anti-epileptic's. The request is for Viagra 100 mg #5.

IMR ISSUES, DECISIONS AND RATIONALES

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

Viagra 100mg #5: Upheld

Claims Administrator guideline: The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation Physician's Desk Reference 2014, Viagra.

MAXIMUS guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Section 2, Hypogonadism Page(s): 110-111.

Decision rationale: CA MTUS does not directly address Viagra, which is used for treatment of erectile dysfunction. CA MTUS does recognize that hypogonadism has been noted in patients taking intrathecal or high dose opioid therapy long term. However, The etiology of decreased sexual function, a symptom of hypogonadism, is confounded by several factors including the following: (1) The role of chronic pain itself on sexual function; (2) The natural occurrence of

decreased testosterone that occurs with aging; (3) The documented side effect of decreased sexual function that is common with other medications used to treat pain (SSRIs, Tricyclic Anti-Depressants, and certain Anti-Epilepsy Drugs); & (4) The role of comorbid conditions such as diabetes, hypertension, and vascular disease in erectile dysfunction. In this case there are no documented objective findings of hypogonadism and no clear connection of the diagnosed erectile dysfunction with chronic opioid use. Viagra 100 mg # 5 is therefore not medically necessary.