

Case Number:	CM14-0132970		
Date Assigned:	08/22/2014	Date of Injury:	07/31/2000
Decision Date:	01/02/2015	UR Denial Date:	08/13/2014
Priority:	Standard	Application Received:	08/19/2014

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 Anesthesia, has a subspecialty in Acupuncture & Pain 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:

Injured worker is a male 79 years old with date of injury 7/31/00 with related neck, low back, and bilateral knee pain. Per progress report dated 7/24/14, the injured worker reported that his knees had aggravated his back. He stated that on occasion, he would have a sharp pain in his legs. He had been able to catch himself, but he was afraid of having a ground-level fall. Per physical exam, the injured worker used a cane to walk; he had significant tenderness to the lumbar and cervical paraspinal muscles. Treatment to date has included physical therapy, aquatic therapy, and medication management. The date of UR decision was 8/13/14.

IMR ISSUES, DECISIONS AND RATIONALES

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

A six-month supply of analgesic balm: Upheld

Claims Administrator guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Topical Analgesics Page(s): 111-113.

MAXIMUS guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Topical Analgesics Page(s): 111-113.

Decision rationale: Review of the submitted documentation indicates that the request analgesic balm contained ketamine, gabapentin, diclofenac, Baclofen, cyclobenzaprine, and bupivacaine. Regarding the use of multiple medications, MTUS p60 states "Only one medication should be

given at a time, and interventions that are active and passive should remain unchanged at the time of the medication change. A trial should be given for each individual medication. Analgesic medications should show effects within 1 to 3 days, and the analgesic effect of antidepressants should occur within 1 week. A record of pain and function with the medication should be recorded. (Mens, 2005) The recent AHRQ review of comparative effectiveness and safety of analgesics for osteoarthritis concluded that each of the analgesics was associated with a unique set of benefits and risks, and no currently available analgesic was identified as offering a clear overall advantage compared with the others." Therefore, it would be optimal to trial each medication individually. The MTUS Chronic Pain Medical Treatment Guidelines state that topical medications are "Largely experimental in use with few randomized controlled trials to determine efficacy or safety. Primarily recommended for neuropathic pain when trials of antidepressants and anticonvulsants have failed. (Namaka, 2004) These agents are applied locally to painful areas with advantages that include lack of systemic side effects, absence of drug interactions, and no need to titrate. (Colombo, 2006) Many agents are compounded as monotherapy or in combination for pain control (including NSAIDs, opioids, capsaicin, local anesthetics, antidepressants, glutamate receptor antagonists, adrenergic receptor agonist, adenosine, cannabinoids, cholinergic receptor agonists, prostanoids, bradykinin, adenosine triphosphate, biogenic amines, and nerve growth factor). (Argoff, 2006) There is little to no research to support the use of many of these agents. Any compounded product that contains at least one drug (or drug class) that is not recommended is not recommended." Per MTUS p113 with regard to topical gabapentin: "Not recommended. There is no peer-reviewed literature to support use." Per MTUS CPMTG p113, "There is no evidence for use of any other muscle relaxant as a topical product. [Referring to Baclofen, this is also not recommended]". Baclofen and cyclobenzaprine are not indicated. As several components of the compound are not recommended, the analgesic balm is not medically necessary.