

<b>Case Number:</b>	CM14-0193411		
<b>Date Assigned:</b>	12/01/2014	<b>Date of Injury:</b>	03/07/2012
<b>Decision Date:</b>	01/13/2015	<b>UR Denial Date:</b>	11/03/2014
<b>Priority:</b>	Standard	<b>Application Received:</b>	11/18/2014

### 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 Internal 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:

The patient is a 51 year old male with an injury on 3/7/12. Since then he had the diagnosis of meniscal tear and arthritis and arthroscopy was done which did not help his symptoms. On 4/8/14 he saw an orthopedist who noted bilateral knee pain, right greater than left. He noted medial joint line tenderness and diagnosed arthritis of the right knee. He stated that based on the x-rays partial knee replacement might be beneficial. However, at the age of 51 he advised against this. He stated that for now other conservative measures such as hyaluronic acid injections could be attempted. We note that on 11/3/14 the UR rejected the use of both topical Ketoprofen and topical Methyl salicylate.

### IMR ISSUES, DECISIONS AND RATIONALES

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

**Ketoprofen 100% PA 240 g:** Upheld

**Claims Administrator guideline:** The Claims Administrator did not cite any medical evidence for its decision.

**MAXIMUS guideline:** Decision based on MTUS Chronic Pain Treatment Guidelines Page(s): 112.

**Decision rationale:** The FDA does not currently recommend the use of Ketoprofen in a topical application. It has a very high incidence of inducing photosensitivity dermatitis, and the

absorption of the drug depends on the base in which it is delivered. Topical treatment can result in blood accumulations and systemic side effects similar to oral ingestion of the same medication. Patients with renal disease or other systemic diseases should use this medication with caution. Therefore, we have to say that the UR was justified in its denial of this medication.

**Methyl salicylate 120 g:** Overturned

**Claims Administrator guideline:** The Claims Administrator did not cite any medical evidence for its decision.

**MAXIMUS guideline:** Decision based on MTUS Chronic Pain Treatment Guidelines Page(s): 105 and 111.

**Decision rationale:** It is noted in the MTUS that topical pain medication use is largely experimental and lack randomized controlled trials. They are mostly used for neuropathic pain after trials of antidepressants and anticonvulsants have been tried. The medicine is applied locally and lacks systemic side effects, drug interactions, and need to titrate dose. Many are compounded from different medicines. The effects of each component must be known and if there is one compound not recommended in the mixture the entire compounded medicine cannot be recommended. We note that the specific medication methyl salicylate is the active component in Ben Gay topical medicine and is a recommended medicine for pain treatment and has been found superior to placebo for pain control. We note that the above patient complains of pain and stiffness and is not a candidate for definitive surgery and needs symptomatic treatments. The above medicine is not known to cause toxicity and has been shown to be beneficial in the treatment of pain. Therefore, the UR decision is overturned and the patient should be supplied with this medication.