

Case Number:	CM14-0089283		
Date Assigned:	07/23/2014	Date of Injury:	04/07/1996
Decision Date:	03/31/2015	UR Denial Date:	05/28/2014
Priority:	Standard	Application Received:	06/13/2014

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. 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/Service. He/she is familiar with governing laws and regulations, including the strength of evidence hierarchy that applies to Independent Medical Review determinations.

The Expert Reviewer has the following credentials:
 State(s) of Licensure: California, District of Columbia, Maryland
 Certification(s)/Specialty: Anesthesiology, Pain Management

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 49 year old female, who sustained an industrial injury on 4/7/1996. She has reported low back pain. The diagnoses have included lumbar degenerative disc disease and lumbar radiculopathy. Treatment to date has included medications, diagnostics and chiropractic. Currently, the injured worker complains of chronic low back pain. She states that chiropractic therapy has been useful. She has limitations with activity but range of motion and functioning has improved. She states that she is taking her anti-inflammatories and oxycodone less frequently. The pain is rated 4/10 in the back and leg and described as cramping and aching. The physical exam revealed mild bilateral lumbosacral paraspinal tenderness and complaint of pain with extension of low back. Requesting continued chiropractic over the next 6 weeks and genetic testing done. On 5/28/14 Utilization Review non-certified a request for Genetic drug metabolism test and Genetic testing narcotic risk, noting that regarding Genetic drug metabolism test, guidelines do not support genetic metabolism test as current research is experimental and there were several limitations to the quality of evidence with this test. Regarding the Genetic testing narcotic risk, guidelines do not support as current research is experimental and not every addict will carry the same gene and not everyone who carries an addiction gene will exhibit the same trait. The Official Disability Guidelines (ODG) was cited.

IMR ISSUES, DECISIONS AND RATIONALES

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

Genetic drug metabolism test: Upheld

Claims Administrator guideline: The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation AAFP article by David B.Matchar, MD Duke Center for Clinical Health Policy Research, Duke University Medical Center, Durham, North Carolina

MAXIMUS guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Drug Metabolism Testing Page(s): 43.

Decision rationale: Not recommended. There is no current evidence to support the use of cytokine DNA testing for the diagnosis of pain, including chronic pain. Scientific research on cytokines is rapidly evolving. There is vast and growing scientific evidence base concerning the biochemistry of inflammation and it is commonly understood that inflammation plays a key role in injuries and chronic pain. Cellular mechanisms are ultimately involved in the inflammatory process and healing, and the molecular machinery involves cellular signaling proteins or agents called cytokines. Given rapid developments in cytokine research, novel applications have emerged and one application is cytokine DNA signature testing which has been used as a specific test for certain pain diagnoses such as fibromyalgia or complex regional pain syndrome. The specific test for cytokine DNA testing is performed by the Cytokine Institute. (www.cytokineinstitute.com)Two articles were found on the website. However, these articles did not meet the minimum standards for inclusion for evidence-based review. (Gavin, 2007) (Gillis, 2007)According to the Official Disability Guidelines (ODG), genetic testing for potential opioids abuse is not recommended. While there appears to be a strong genetic component to addictive behavior, current research is experimental in terms of testing for this. Studies are inconsistent, with inadequate statistics and large phenotype range. Different studies use different criteria for definition of controls. More work is needed to verify the role of variants suggested to be associated with addiction and for clearer understanding of their role in different populations.

Genetic testing narcotic risk: Upheld

Claims Administrator guideline: The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines-Genetic testing for potential opioid abuse is not recommended.

MAXIMUS guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Genetic Testing, Cytokines Page(s): p43.

Decision rationale: Not recommended. There is no current evidence to support the use of cytokine DNA testing for the diagnosis of pain, including chronic pain. Scientific research on cytokines is rapidly evolving. There is vast and growing scientific evidence base concerning the biochemistry of inflammation and it is commonly understood that inflammation plays a key role in injuries and chronic pain. Cellular mechanisms are ultimately involved in the inflammatory process and healing, and the molecular machinery involves cellular signaling proteins or agents called cytokines. Given rapid developments in cytokine research, novel applications have

emerged and one application is cytokine DNA signature testing which has been used as a specific test for certain pain diagnoses such as fibromyalgia or complex regional pain syndrome. The specific test for cytokine DNA testing is performed by the Cytokine Institute. (www.cytokineinstitute.com) Two articles were found on the website. However, these articles did not meet the minimum standards for inclusion for evidence-based review. (Gavin, 2007) (Gillis, 2007). According to the Official Disability Guidelines (ODG), genetic testing for potential opioids abuse is not recommended. While there appears to be a strong genetic component to addictive behavior, current research is experimental in terms of testing for this. Studies are inconsistent, with inadequate statistics and large phenotype range. Different studies use different criteria for definition of controls. More work is needed to verify the role of variants suggested to be associated with addiction and for clearer understanding of their role in different populations.