

Case Number:	CM15-0130108		
Date Assigned:	07/16/2015	Date of Injury:	03/01/1999
Decision Date:	09/22/2015	UR Denial Date:	06/16/2015
Priority:	Standard	Application Received:	07/06/2015

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: Colorado

Certification(s)/Specialty: Family Practice

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 61 year old female who sustained an industrial injury on 3/1/99. The injured worker was diagnosed as having generalized pain, lumbosacral neuritis or radiculitis, and lumbar disc displacement without myelopathy. The injured worker also has chronic knee pain and bilateral wrist pain, as well as chronic headaches and rectovaginal fistula. Previous treatments included status post knee arthroplasty and left knee arthroscopy, epidural steroid injection, medication management, physical therapy, bilateral wrist supports and right knee support. Previous diagnostic studies included right knee computed tomography, electrodiagnostic studies, nerve conduction velocity studies, and a magnetic resonance imaging of the right wrist and lumbar spine. The current plan of care includes request for Senna 8.6 milligrams quantity of 120.

IMR ISSUES, DECISIONS AND RATIONALES

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

Senna 8.6mg #120: Upheld

Claims Administrator guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Page(s): 77.

MAXIMUS guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Pain Interventions and Treatments Page(s): 77. Decision based on Non-MTUS Citation www.nlm.nih.gov/medlineplus/druginfo.

Decision rationale: Per the MTUS Guidelines, prophylactic treatment of constipation should be initiated, when also initiating opioid therapy. The MTUS does not address Senna specifically, so Medline Plus search was conducted. Senna is an herb and leaves/fruit of the plant are used to create an FDA-approved nonprescription laxative. Senna is indicated in the short term treatment of constipation including opioid induced constipation. Senna is recommended for use alone or in combination with fiber supplement or stool softener. Senna can be used for irritable bowel syndrome (IBS), hemorrhoids, and weight loss, though there is insufficient evidence to support its use for these conditions. The active chemicals in senna are sennosides that irritate the gastrointestinal lining creating a laxative effect. Per the natural medicines database, Senna is not be used at high doses and is not be used for longer than 2 weeks as long term use can result in dependence and electrolyte imbalance. For the patient of concern, the records indicate she has multiple orthopedic complaints as well as chronic headaches, hearing loss and constipation. Records show that patient has been taking Amitiza for more than 6 months for constipation and January notes from treating physician indicate patient tolerating regimen with good effect and no adverse effects. (Noted specifically at that visit that patient has no bowel complaints.) However, also noted for the January clinic appointment, Senna is initiated to be taken in addition to Amitiza for constipation. No specific reason or need for Senna addition is given in the records supplied for review. While the MTUS does recommend treatment of constipation related to opioid use, the patient already takes a medication for constipation, and there is no documentation that additional treatment, such as Senna, would be needed. Furthermore, there is no discussion of the nature of patient's constipation (other possible causes besides opioids) or other measures tried and the success or failure of same. The requested quantity for Senna exceeds 2 weeks of use and there is no literature to support long term use of Senna. Therefore, the Senna is not medically necessary.