

Case Number:	CM15-0130159		
Date Assigned:	07/16/2015	Date of Injury:	04/11/2012
Decision Date:	08/13/2015	UR Denial Date:	06/19/2015
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: California

Certification(s)/Specialty: Internal Medicine

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 57 year old male injured worker suffered an industrial injury on 04/11/2012. The diagnoses included post-traumatic stress disorder, lower extremity reflex sympathetic dystrophy, hypogonadism, neurogenic bladder, myofascial pain syndrome, erectile dysfunction and peripheral neuropathy. The diagnostics included computerized tomography of the abdomen and pelvis. The treatments included opioid medications and Axiron. On 6/4/2015 the treating provided reported urinary hesitation, occasional erectile dysfunction, and genital pain during intercourse, decreased sensation, difficulty reaching climax, and loss of libido. The provider indicated on 3/3/2015 that the urologist impression was that erectile dysfunction arose from the use of opioids. The injured worker had returned to work with restrictions. The requested treatments included Viagra 100mg (30min prior sex) #8 refills: 0.

IMR ISSUES, DECISIONS AND RATIONALES

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

Viagra 100mg (30min prior sex) #8 refills: 0: Overturned

Claims Administrator guideline: The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation Wein (Ed.) Campbell-Walsh Urology, 10th Ed., 2011.

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation Up to date topic 7469 and version 17.0.

Decision rationale: Therapy of men with sexual dysfunction includes identifying the underlying etiology, including such drugs as antidepressants and anti-hypertensives that may cause erectile dysfunction. Identifying and treating such disorders as smoking, obesity, hypertension, and dyslipidemia may be effective in prevention and treatment of erectile dysfunction. First line medical treatment is the phosphodiesterase-5 inhibitors, or PDE-5 medications. They are recommended because of their efficacy, ease of use, and favorable side effect profile. Sildenafil or Viagra, Vardenafil, and Avanafil, and Tadalafil appear to be equally effective. These medicines are contraindicated in men who take nitrates. Also, these medicines should not be taken in men who are on alpha-adrenergic antagonists due to potential for hypotension with combination therapy. However, tamsulosin 0.4 mg appears to be safe when taken with Tadalafil. The above patient was diagnosed with erectile dysfunction by a Urologist and was not taking nitrates or alpha-adrenergic antagonists. He did not present with any other contraindications to the use of Viagra. Therefore, he should be authorized to have this medicine. The request is medically necessary.