

Case Number:	CM15-0167637		
Date Assigned:	09/08/2015	Date of Injury:	02/03/2006
Decision Date:	10/07/2015	UR Denial Date:	08/01/2015
Priority:	Standard	Application Received:	08/26/2015

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: Massachusetts

Certification(s)/Specialty: Physical Medicine & Rehabilitation, 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 53 year old male who sustained an industrial injury on 2-3-06. The diagnosis is lumbar sprain and strain with rule out (IVD) intervertebral disc. Previous treatment includes MRI-lumbar spine, medication, acupuncture, physical therapy, and pain management care. In a progress report dated 7-23-15, the physician notes diminished range of motion of the lumbar spine, muscle splinting, and tenderness to palpation. Lower back pain is rated at 8 out of 10 without medications and 5-6 out of 10 with medications. Work status is to return to modified work on 7-23-15. The treatment plan is an orthopedic referral, acupuncturist referral, Dendracin Neurodendraxin topical relief lotion, and Synovacin Glucosamine Sulfate. The requested treatment is Dendracin Neurodendraxin topical pain relief lotion, apply 3 times a day.

IMR ISSUES, DECISIONS AND RATIONALES

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

Dendracin Neurodendraxin topical pain relief lotion, apply three times a day: Upheld

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

MAXIMUS guideline: Decision based on MTUS Chronic Pain Treatment Guidelines (1) Medications for chronic pain, p60 (2) Topical Analgesics, p111-113.

Decision rationale: The claimant has a remote history of a work injury occurring in February 2006 and continues to be treated for low back pain. Medications are referenced as decreasing pain from 5-6/10 to 8/10. When seen, there was decreased lumbar spine range of motion and sacroiliac and lumbar paraspinal muscle tenderness. Dendracin neurodendraxin is a combination of capsaicin, methyl salicylate, and menthol. Menthol and methyl salicylate are used as a topical analgesic in over the counter medications such as Ben-Gay or Icy Hot. They work by first cooling the skin then warming it up, providing a topical anesthetic and analgesic effect which may be due to interference with transmission of pain signals through nerves. Guidelines address the use of capsaicin which is believed to work through a similar mechanism and is recommended as an option in patients who have not responded or are intolerant to other treatments. Guidelines recommend that when prescribing medications only one medication should be given at a time. By prescribing a multiple combination medication, in addition to the increased risk of adverse side effects, it would be difficult or impossible to determine whether any derived benefit was due to a particular component. In this case, there are other single component topical treatments with generic availability that could be considered. There is no apparent intolerance or contraindications of other medications such as an oral NSAID. Dendracin neurodendraxin was not medically necessary.