

<b>Case Number:</b>	CM15-0191093		
<b>Date Assigned:</b>	10/05/2015	<b>Date of Injury:</b>	07/26/2012
<b>Decision Date:</b>	11/18/2015	<b>UR Denial Date:</b>	09/14/2015
<b>Priority:</b>	Standard	<b>Application Received:</b>	09/29/2015

### 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, Arizona, Maryland  
 Certification(s)/Specialty: Psychiatry

### 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 58 year old female, who sustained an industrial-work injury on 7-26-12. A review of the medical records indicates that the injured worker is undergoing treatment for major depressive disorder, somatoform disorder, pain disorder, anxiety disorder, mood disorder and post-traumatic stress disorder. The physician indicates that he is prescribing the Nuedexta to manage her pain. The current treatment included pain medications, psyche care, psychotherapy, med evaluation, pain management, and other modalities. The current medications include Saphris, Pristiq, Lunesta and Nudexta. Medical records dated (4-17-15 to 6-26-15) indicate that the injured worker is noted to be under great duress as the family physician discontinued all opiates. The physician indicates that she has been a drug abuser all her life and to withdraw in an abrupt fashion is extremely difficult for her to tolerate. She complains of awakening very early in the morning. The physical exam dated from (4-17-15 to 6-26-15) reveals that because of her pain the physician indicates that she is experiencing physiological distress. She is in significant distress and she is referred to pain management specialist since she is not in a detox program. The physical exam reveals no evidence of tardive dyskinesia, extrapyramidal symptoms or cogwheeling. The request for authorization date was 7-24-15 and requested service included Retrospective: Nuedexta 20-10mg QTY: 120 (Dispensed 07-24-15). The original Utilization review dated 9-14-15 non-certified the request for included Retrospective: Nuedexta 20-10mg QTY: 120 (Dispensed 07-24-15).

### IMR ISSUES, DECISIONS AND RATIONALES

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

**Retrospective: Nuedexta 20/10mg QTY: 120 (Dispensed 07/24/15): Upheld**

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

**MAXIMUS guideline:** The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG) Mental Illness & Stress/ Nuedexta.

**Decision rationale:** Per ODG, "Nuedexta: Not recommended. The FDA has approved this treatment for pseudobulbar affect (PBA) in adults (Nuedexta, [REDACTED]), a combination of dextromethorphan hydrobromide and quinidine sulphate. PBA is seen in a number of neurologic conditions and is characterized by sudden and uncontrollable bouts of laughing or crying that is either unrelated or disproportionate to the emotional state of the patient. This agent has been studied to date in patients with multiple sclerosis (MS) and amyotrophic lateral sclerosis (ALS). PBA occurs when neurological disorders such as MS or stroke damage areas of the brain involved in the control of normal expression of emotion. Although it is not a life-threatening condition, it can have a significant effect on the patient's ability to interact normally in society and their relationships. Nuedexta is not suitable for treating episodes of laughing or crying brought on by mood swings and not due to pseudobulbar affect. (FDA, 2012) There are no quality published studies of the off label use of Nuedexta to treat chronic neuropathic pain. There had been a study initiated to compare the effectiveness of dextromethorphan at reducing hyperalgesia in individuals addicted to opioids, but this study was discontinued. (NCT, 2008)" The injured worker has been diagnosed with major depressive disorder, somatoform disorder, pain disorder, anxiety disorder, mood disorder and post-traumatic stress disorder. The request for Retrospective: Nuedexta 20/10mg QTY: 120 (Dispensed 07/24/15) is excessive and not medically necessary as per guidelines Nuedexta is not recommended. The FDA has approved this treatment only for pseudobulbar affect (PBA) in adults which the injured worker has not been diagnosed with. There is no clinical indication for use of Nuedexta in this case. Therefore the request is not medically necessary.