

Case Number:	CM15-0026724		
Date Assigned:	03/25/2015	Date of Injury:	07/07/2006
Decision Date:	05/01/2015	UR Denial Date:	01/29/2015
Priority:	Standard	Application Received:	02/12/2015

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: 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 52 year old male who sustained an industrial injury on 07/07/2006. Diagnoses include chronic pain syndrome, herniated C3-4 disc, cervical radiculopathy, and cervicalgia. Treatment to date has included medications, physical therapy, epidural injections, and is awaiting cervical spine surgery. A physician progress note dated 12/19/2014 documents the injured worker complains of neck, right and left arm pain which started several years ago. He has paraspinous muscle tenderness present in the lower cervical spine, and moderate limitation of range of motion secondary to pain. Pain is rated 5 out of 10 on the pain scale. Norco and Soma help with his pain and he takes Sonata 5mg for sleep. He said Sonata is not helping as much as it used to. He does wake up more restful and is able to perform more daily activities. Medications help decrease his pain by 60%, and helps improve his function. Sonata was increased to help with sleep. The injured worker is awaiting cervical spinal surgery. Treatment requested is for Sonata 10mg, #30.

IMR ISSUES, DECISIONS AND RATIONALES

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

Sonata 10mg #30: Upheld

Claims Administrator guideline: The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines, Treatment in Workers' Compensation, 7th Edition, Insomnia Treatment.

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG) Chapter: Pain/Chronic Section: Insomnia/Treatment.

Decision rationale: The Official Disability Guidelines comment on the use of a number of different pharmacologic treatments for insomnia. The guidelines comment on the use of Sonata as well. The guidelines state that pharmacological agents should only be used after careful evaluation of potential causes of sleep disturbance. Failure of sleep disturbance to resolve in a 7 to 10 day period may indicate a psychiatric and/or medical illness. Primary insomnia is generally addressed pharmacologically. Secondary insomnia may be treated with pharmacological and/or psychological measures. The specific component of insomnia should be addressed: (a) Sleep onset; (b) Sleep maintenance; (c) Sleep quality; & (d) Next-day functioning. Pharmacologic Treatment: There are four main categories of pharmacologic treatment: (1) Benzodiazepines; (2) Non-benzodiazepines; (3) Melatonin & melatonin receptor agonists; & (4) Over-the-counter medications. The majority of studies have only evaluated short-term treatment (i.e., 4 weeks) of insomnia; therefore more studies are necessary to evaluate the efficacy and safety of treatments for long-term treatment of insomnia. In 2007, the FDA requested that manufacturers of all sedative-hypnotic drugs strengthen product labeling regarding risks (i.e., severe allergic reactions and complex sleep-related behaviors, such as sleep driving). It is recommended that treatments for insomnia should reduce time to sleep onset, improve sleep maintenance, avoid residual effects and increase next-day functioning. Regarding zaleplon, also known as (Sonata), this drug reduces sleep latency. Side effects: headache, drowsiness, dizziness, fatigue, confusion, abnormal thinking. Because of its short half-life (one hour), may be re-administered upon nocturnal waking provided it is administered at least 4 hours before wake time. This medication has a rapid onset of action. Short-term use (7-10 days) is indicated with a controlled trial showing effectiveness for up to 5 weeks. In this case, there is insufficient documentation that the patient has undergone an evaluation for the cause of insomnia. Further, the guidelines indicate that Sonata should be used as a short-term treatment. The records indicate that Sonata's use has been long-term; which is not consistent with the above cited guidelines. For these reasons, Sonata is not a medically necessary treatment.