

<b>Case Number:</b>	CM15-0110892		
<b>Date Assigned:</b>	06/17/2015	<b>Date of Injury:</b>	09/29/2009
<b>Decision Date:</b>	07/22/2015	<b>UR Denial Date:</b>	05/11/2015
<b>Priority:</b>	Standard	<b>Application Received:</b>	06/09/2015

### 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: Physical Medicine & Rehabilitation

### 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 54 year old male, who sustained an industrial injury on 9/29/2009. Diagnoses include right hand fourth digit flexion contracture similar to Dupuytren's contracture due to repetitive surgery. Treatment to date has included multiple surgical interventions to the right fourth finger, diagnostics, injections, ice, medications, home exercise, bracing, activity and work modification and physical/occupational therapy. Per the Primary Treating Physician's Progress Report dated 12/09/2014 the injured worker reported improvement in the left wrist since the last visit. He is interested in treatment options for the fourth digit of his right hand. He reported difficulty performing activities of daily living with his right hand due to the deformation. Physical examination revealed a flexion contracture of the right hand fourth digit which was flexed to 90 degrees and unable to be straightened past 90 degrees. He is able to flex the digit to approximately 100 degrees but it cannot be straightened with manual pressure or any device. The plan of care included, and authorization was requested for injection Xiaflex 0.58mg for the right fourth finger.

### IMR ISSUES, DECISIONS AND RATIONALES

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

**Injection Xiaflex 0.58mg for the right fourth finger:** Overturned

**Claims Administrator guideline:** Decision based on MTUS ACOEM Chapter 11 Forearm, Wrist, and Hand Complaints. Decision based on Non-MTUS Citation ODG Forearm, Wrist, and Hand.

**MAXIMUS guideline:** The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official disability guidelines Forearm/wrist/hand chapter, Collagenase clostridium histolyticum (Xiaflex).

**Decision rationale:** This patient presents with bilateral wrist/hand pain. The current request is for injection Xiaflex 0.58mg for the right fourth finger. The RFA is dated 04/29/15. Treatment to date has included multiple surgical interventions to the right fourth finger, diagnostics, injections, ice, medications, home exercise, bracing, activity and work modification and physical/occupational therapy. The patient is working. The ODG guidelines, under the Forearm/wrist/hand chapter has the following: Collagenase clostridium histolyticum (Xiaflex) "Recommended for the treatment of Dupuytren's contracture, upon final FDA approval of the drug. Collagenase clostridium histolyticum is a novel, first-in-class biologic agent designated as orphan-drug status for the treatment of Dupuytren's contracture." The earliest report provided for review is from 12/09/14. According to this report, the patient complains of difficulty performing activities of daily living and activities requiring dexterity with the right hand secondary to flexion deformity of the right ring finger and inability to extend the finger. Examination revealed 90 degrees flexion contracture of the right ring finger, and large scar over the proximal phalangeal joint of the right ring finger. The treater states that the patient has right hand fourth digit flexion contracture similar to Dupuytren's contracture due to repetitive surgery. There is no indication of prior Xiaflex injection into the right ring finger. In this case, the patient has had multiple surgeries and continues to have pain and limited function. ODG supports Collagenase clostridium histolyticum (Xiaflex) for the treatment of Dupuytren's contracture; therefore, a trial injection at this juncture is reasonable. This request IS medically necessary.