



MedHealth Review, Inc.
661 E. Main Street
Suite 200-305
Midlothian, TX 76065
Ph 972-921-9094
Fax (972) 827-3707

Notice of Independent Review Decision

DATE NOTICE SENT TO ALL PARTIES: 3/11/14

IRO CASE #:

DESCRIPTION OF THE SERVICE OR SERVICES IN DISPUTE

The item in dispute is the prospective medical necessity of Celexa 40 mg PO QD and Seroquel ½ to 1 tablet at bedtime.

A DESCRIPTION OF THE QUALIFICATIONS FOR EACH PHYSICIAN OR OTHER HEALTH CARE PROVIDER WHO REVIEWED THE DECISION

The reviewer is a Medical Doctor who is board certified in Internal Medicine. The reviewer has been practicing for greater than 10 years.

REVIEW OUTCOME

Upon independent review the reviewer finds that the previous adverse determination/adverse determinations should be:

- Upheld (Agree)
- Overturned (Disagree)
- Partially Overturned (Agree in part/Disagree in part)

The reviewer disagrees with the previous adverse determination regarding the prospective medical necessity of Celexa 40 mg PO QD and Seroquel ½ to 1 tablet at bedtime.

INFORMATION PROVIDED TO THE IRO FOR REVIEW

Records were received and reviewed from the following parties:

These records consist of the following (duplicate records are only listed from one source): Records reviewed

PATIENT CLINICAL HISTORY [SUMMARY]:

The claimant is a male with post-traumatic stress disorder related to witnessing the gruesome death of a coworker, as well as major depressive disorder. He has

significant flashbacks, as well as anxiety with pervasive nervousness, jitteriness, hyper arousal, and poor concentration. The claimant also has chronic headaches and upper extremity pain; these manifestations are felt to be psychosomatic and related to the psychiatric diagnoses. He has tried and failed to Zoloft, Klonopin, and Lexapro but has responded positively to Celexa, the dose of which was titrated to 40 mg daily in February 2014. He has also been treated with Seroquel 100 mg, 1/2-1 tablet at bedtime since February 2014. At follow up on 3/5/14, the claimant was documented to have had an excellent response to the increase in Celexa dose and to initiation of Seroquel, which had allowed him to reduce his Xanax dosage by at least 50%.

ANALYSIS AND EXPLANATION OF THE DECISION INCLUDE CLINICAL BASIS, FINDINGS AND CONCLUSIONS USED TO SUPPORT THE DECISION.

Pharmacy compendia state that concurrent use of Celexa and quetiapine may result in increased risk of QT interval prolongation. Micromedex qualifies that the documentation for this possible interaction as "fair." It does not state that this combination of drugs is contraindicated.

The ODG indicates this is not a first line treatment; however, this claimant has tried and failed many other medications. According to the study by Hamner et al, "Eighteen of 20 patients enrolled in the study completed 6 weeks of open-label treatment. This preliminary open trial suggests that quetiapine is well tolerated and may have efficacy in reducing PTSD symptoms in patients who have not had an adequate response other medications."

In addition, the combination of an SSRI and Seroquel is very commonly used in the psychiatric community in patients with posttraumatic stress disorder. This claimant has had an excellent response to this combination of medications. It is also notable that the claimant is being managed very closely by a psychiatrist for response to these agents. Thus, Celexa 40 mg daily and Seroquel 100 mg 1/2-1 tablet at bedtime are medically necessary.

A DESCRIPTION AND THE SOURCE OF THE SCREENING CRITERIA OR OTHER CLINICAL BASIS USED TO MAKE THE DECISION:

- ACOEM- AMERICAN COLLEGE OF OCCUPATIONAL & ENVIRONMENTAL MEDICINE UM KNOWLEDGEBASE
- AHCPR- AGENCY FOR HEALTHCARE RESEARCH & QUALITY GUIDELINES
- DWC- DIVISION OF WORKERS COMPENSATION POLICIES OR GUIDELINES
- EUROPEAN GUIDELINES FOR MANAGEMENT OF CHRONIC LOW BACK PAIN
- INTERQUAL CRITERIA
- MEDICAL JUDGEMENT, CLINICAL EXPERIENCE AND EXPERTISE IN ACCORDANCE WITH ACCEPTED MEDICAL STANDARDS
- MERCY CENTER CONSENSUS CONFERENCE GUIDELINES
- MILLIMAN CARE GUIDELINES
- ODG- OFFICIAL DISABILITY GUIDELINES & TREATMENT GUIDELINES
- PRESSLEY REED, THE MEDICAL DISABILITY ADVISOR
- TEXAS GUIDELINES FOR CHIROPRACTIC QUALITY ASSURANCE & PRACTICE PARAMETERS
- TEXAS TACADA GUIDELINES
- TMF SCREENING CRITERIA MANUAL
- PEER REVIEWED NATIONALLY ACCEPTED MEDICAL LITERATURE (PROVIDE A DESCRIPTION) Hamner MB, Deitsch SE, Brodrick PS, Ulmer HG, Lorberbaum JP. Quetiapine treatment in patients with posttraumatic stress disorder: an open trial of adjunctive therapy. *J Clin Psychopharmacol* 2003 Feb;23(1):15-20.
- OTHER EVIDENCE BASED, SCIENTIFICALLY VALID, OUTCOME FOCUSED GUIDELINES (PROVIDE A DESCRIPTION)