

May 3, 2010

Iowa Medicaid DUR Commission
C/o Iowa Medicaid Enterprise
100 Army Post Rd.,
Des Moines, Ia 50315

To Whom It May Concern:

I will not be at the next DUR meeting but would like my concerns to be read to the committee regarding the Clinical PA criteria for Fibromyalgia.

I have been a physician since 1984 and have treated patients with Fibromyalgia through the years and have utilized various medicines to treat the pain. These patients need pain relief before they can emotionally talk about ways to deal with their pain or partake with an exercise program, which I agree is very important for these patients.

I also understand the importance of cost containment but I am concerned that the number of criteria in the proposed PA would require frequent visits to the care provider to try and potentially fail the number of medicines required in the PA. It is also expensive to see providers like psychologists for counseling for pain management and therapists for the proposed exercise. A lot of patients are able to deal with the pain and exercise on their own if their pain is well controlled.

Please reconsider if the non-pharmacological therapies are needed in the protocol especially if it requires additional providers to see these patients.

I am also concerned that Savella is the first medicine that is to be tried and failed before Cymbalta or Lyrica can be tried. As you are aware, many of these patients are depressed and are on an SSRI and they need their antidepressant. By adding Savella, there is a risk of too much serotonin and by using it alone, there is a risk of more depression since it is not an approved antidepressant in this country. Please reconsider these proposed criteria especially if someone needs an antidepressant.

Thank you for considering the above concerns and for your continued time and effort all of you offer to DUR committee.

Sincerely,