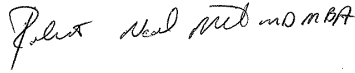


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Approved: **Robert Mills, MD**

Date: 07/28/11

**Description:**

Sweating is necessary to control body temperature during times of exercise and heat exposure. Hyperhidrosis, excessive sweating, is a medical condition defined as sweating greater than would be expected considering the temperature of the environment. This usually occurs on the palms, soles of the feet, armpits, face, inframammary regions, or groin but can occur on any part of the body.

Hyperhidrosis is classified as primary or secondary, depending on its cause or origin. Primary hyperhidrosis is caused by an overactive sympathetic nervous system and is a more frequent condition than secondary hyperhidrosis. Localized commonly in the hands, armpits, scalp, face, and/or feet, it starts during childhood or early adolescence, worsens during puberty, and then persists for the rest of one's life. Nervousness and psychiatric disorders are rarely the cause. The excessive sweating is very embarrassing and social, professional, and intimate relationships are often seriously affected. Secondary hyperhidrosis is caused by an underlying condition, such as Parkinson's disease, hyperthyroidism, diabetes mellitus, hyperpituitarism, pyrexia, hypoglycemia or menopause. Secondary hyperhidrosis usually causes excess sweating of the entire body. Treatment of the underlying medical condition is the management of secondary hyperhidrosis.

**Criteria:**

- I. ODS will cover medical treatment of intractable, disabling primary hyperhidrosis and secondary gustatory hyperhidrosis with Botox (botulinum toxin type A) or iontophoresis when **ALL** of the following criteria are met:
  - A. Topical aluminum chloride or other extra-strength antiperspirants are ineffective or result in a severe rash; and
  - B. Member is unresponsive or unable to tolerate at least one of the following pharmacotherapies prescribed for excessive sweating (i.e. anti-cholinergics, beta-blockers or benzodiazepines); and
  - C. Excessive sweating is causing significant disruption of professional and/or social life.
  
- II. ODS will cover the following surgical treatments for hyperhidrosis for members who meet the above listed criteria **AND** have failed to adequately respond to treatment with Botox and iontophoresis:
  - A. Endoscopic sympathetic ablation by electrocautery
  - B. Excision of axillary sweat glands
  - C. Lumbar sympathectomy
  - D. Thoracic sympathectomy (open, endoscopic, video-assisted, chemical)
  - E. Thoracoscopic sympathectomy
  - F. Tumescent or ultrasonic liposuction for axillary hyperhidrosis
  - G. Video-assisted endoscopic thoracic ganglionectomy
  
- III. ODS does not cover surgical treatment of secondary hyperhidrosis except for secondary gustatory hyperhidrosis. This is due to the availability of appropriate therapy which includes the treatment of the underlying cause.

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IV. ODS considers the following treatments for hyperhidrosis experimental and investigational as they have not been proven to be effective for this condition:

- A. Alternative therapy (e.g. homeopathy, massage, acupuncture and phytotherapeutic drugs)
- B. Axillary liposuction
- C. Biofeedback
- D. Hypnosis
- E. Percutaneous thoracic phenol sympathicolysis
- F. Psychotherapy
- G. Repeat/reversal of ETS
- H. Subdermal Nd-YAG laser
- I. Sympathectomy for craniofacial hyperhidrosis
- J. Sympathectomy for plantar hyperhidrosis

**Information to be Submitted with Pre-Authorization Request:**

- Physician medical records documenting current condition and therapies tried.

**Applicable CPT/HCPC Codes:**

**Note: list is not all inclusive**

J0585	Botulinum toxin type A, per unit
J0587	Botulinum toxin type B, per 100 units
32664	Thoracoscopy, with thoracic sympathectomy
64650	Chemodeneration of eccrine glands; both axillae
64653	Chemodeneration of other area(s) (eg scalp, face, neck) per day
64802	Sympathectomy, cervical
64804	Sympathectomy, cervicothoracic
64809	Sympathectomy, thoracolumbar
64818	Sympathectomy, lumbar
64818	Sympathectomy, lumbar
64820	Sympathectomy, digital arteries, each digit
64821	Sympathectomy, radial artery
64822	Sympathectomy, ulnar artery
64823	Sympathectomy, superficial palmer arch
97033	Iontophoresis, each 15 minutes

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