



INLAND EMPIRE HEALTH PLAN

**IEHP UM Subcommittee Approved Authorization Guidelines**  
***Iontophoresis for Hyperhidrosis***

**Policy:**

IEHP considers treatment of intractable disabling primary hyperhidrosis with iontophoresis (electrophoresis, Drionic device) medically necessary when all of the following criteria are met:

1. Topical aluminum chloride or other extra-strength antiperspirants are ineffective or result in severe rash; and
2. Member is unresponsive or unable to tolerate pharmacotherapy prescribed for excessive sweating (e.g., Drysol, anti-cholinergics, beta-blockers, benzodiazepines) if sweating is episodic; and
3. Significant disruption of professional and/or social life has occurred because of excessive sweating.

**Background:**

Hyperhidrosis is defined as a condition of excessive sweating beyond what is necessary for thermal regulation. Hyperhidrosis can be classified as either primary or secondary. Primary localized hyperhidrosis is idiopathic and typically involving hands (palmar), feet (plantar), or axillary. Secondary hyperhidrosis may be result of variety of medications or underlying disease/conditions and typically is generalized or craniofacial.

Iontophoresis is the introduction of ionizable drugs through intact skin by administration of continuous, direct electrical current into to the tissue.

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