CareFirst Family of health care plans

CVS caremark™

# QUANTITY LIMIT CRITERIA

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|---|---|
| **DRUG CLASS** | **INFLUENZA TREATMENT & PREVENTION (NEURAMINIDASE INHIBITORS)** |
| **BRAND NAME (generic)** | |
| | **RELENZA (zanamivir)** |
| | **TAMIFLU (oseltamivir)** |

***Status: CVS Caremark Criteria***
***Type: Quantity Limit***

**POLICY**

**FDA APPROVED INDICATIONS**

**Relenza**

Treatment of Influenza

Relenza (zanamivir) inhalation powder is indicated for treatment of uncomplicated acute illness due to influenza A and B virus in adults and pediatric patients aged 7 years and older who have been symptomatic for no more than 2 days.

Prophylaxis of Influenza

Relenza is indicated for prophylaxis of influenza in adults and pediatric patients aged 5 years and older.

Important Limitations on Use of Relenza

Relenza is not recommended for treatment or prophylaxis of influenza in individuals with underlying airways disease (such as asthma or chronic obstructive pulmonary disease) due to risk of serious bronchospasm.

Relenza has not been proven effective for treatment of influenza in individuals with underlying airways disease.

Relenza has not been proven effective for prophylaxis of influenza in the nursing home setting.

Relenza is not a substitute for early influenza vaccination on an annual basis as recommended by the Centers for Disease Control's Immunization Practices Advisory Committee.

Influenza viruses change over time. Emergence of resistance mutations could decrease drug effectiveness. Other factors (for example, changes in viral virulence) might also diminish clinical benefit of antiviral drugs. Prescribers should consider available information on influenza drug susceptibility patterns and treatment effects when deciding whether to use Relenza.

There is no evidence for efficacy of zanamivir in any illness caused by agents other than influenza virus A and B.

Patients should be advised that the use of Relenza for treatment of influenza has not been shown to reduce the risk of transmission of influenza to others.

Compendial Uses

Treatment of influenza A or B viral infection when administered after 48 hours in patients aged 7 years and older who are at higher risk for influenza complications or in patients aged 7 years and older with severe, complicated, or progressive illness[3-9]

**Tamiflu**

Treatment of Influenza

Tamiflu is indicated for the treatment of acute, uncomplicated illness due to influenza A and B infection in patients 2 weeks of age and older who have been symptomatic for no more than 48 hours.

Prophylaxis of Influenza

Tamiflu is indicated for the prophylaxis of influenza A and B in patients 1 year and older.

Limitations of Use

Tamiflu is not a substitute for early influenza vaccination on an annual basis as recommended by the Centers for Disease Control and Prevention Advisory Committee on Immunization Practices.

Influenza viruses change over time. Emergence of resistance substitutions could decrease drug effectiveness. Other factors (for example, changes in viral virulence) might also diminish clinical benefit of antiviral drugs. Prescribers should consider available information on influenza drug susceptibility patterns and treatment effects when deciding whether to use Tamiflu.

Tamiflu is not recommended for patients with end-stage renal disease not undergoing dialysis.

Compendial Uses

Treatment of influenza A or B viral infection when administered after 48 hours in patients who are at higher risk for influenza complications or in patients with severe, complicated, or progressive illness[3-9]

## REFERENCES


1. Relenza [package insert]. Research Triangle Park, NC: GlaxoSmithKline; August 2016.
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3. AHFS DI (Adult and Pediatric) [database online]. Hudson, OH: Lexi-Comp, Inc.; http://online.lexi.com/lco/action/index/dataset/complete_ashp [available with subscription]. Accessed December 2016.
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5. Seasonal Influenza (Flu) Influenza - Flu Basics. Centers for Disease Control and Prevention; 2016-2017. Available at: http://www.cdc.gov/flu/professionals/antivirals/index.htm. Accessed December 2017.
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8. Harper S, Bradley J, Englund J, et al., Seasonal Influenza in Adults and Children – Diagnosis, Treatment, Chemoprophylaxis, and Institutional Outbreak Management: Clinical Practice Guidelines of the Infectious Diseases Society of America; 2009. Available at: http://www.idsociety.org/uploadedFiles/IDSA/GuidelinesPatient_Care/PDF_Library/Infuenza.pdf. Accessed December 2017.
9. Centers for Disease Control and Prevention. Antiviral Agents for the Treatment and Chemoprophylaxis of Influenza. MMWR 2011;60. Available at: https://www.cdc.gov/mmwr/pdf/rr/rr6001.pdf. Accessed December 2017.


## LIMIT CRITERIA

| **Limits should accumulate across all drugs and strengths up to highest quantity listed depending on the order the claims are processed. Accumulation does not apply if limit is coded for daily dose.** | | |
|---|---|---|
| **Medication** | **Strength** | **Limit every 90 days*<br>1 Month Limit and 3 Months Limit*** |
| Relenza (zanamivir) | 5-mg blister per inhalation | 40 blisters |
| Tamiflu (oseltamivir) | 6 mg/mL suspension | 300 mL |
| | 30 mg per capsule | 40 capsules |
| | 45 mg per capsule | 20 capsules |
| | 75 mg per capsule | 20 capsules |
| *These drugs are indicated for short-term acute use and chronic use may not be appropriate, therefore the 3 month limit will be the same as the 1 month limit. | | |