

## SPECIALTY GUIDELINE MANAGEMENT

### WILATE (von Willebrand factor/coagulation factor VIII complex [human])

#### POLICY

##### I. INDICATIONS

The indications below including FDA-approved indications and compendial uses are considered a covered benefit provided that all the approval criteria are met and the member has no exclusions to the prescribed therapy.

###### A. FDA-Approved Indication

Wilate is indicated in children and adults with von Willebrand Disease (vWD) for:

1. On-demand treatment and control of bleeding episodes
2. Perioperative management of bleeding

###### B. Compendial Use

Acquired von Willebrand Syndrome

All other indications are considered experimental/investigational and are not a covered benefit.

##### II. CRITERIA FOR INITIAL APPROVAL

###### A. **Von Willebrand Disease**

Indefinite authorization may be granted for treatment of vWD when either of the following criteria is met:

1. Member has type 1, 2A, 2M, or 2N vWD and has had an insufficient response to desmopressin or a documented clinical reason for not using desmopressin (see Appendix).
2. Member has type 2B or type 3 vWD.

###### B. **Acquired von Willebrand Syndrome**

Indefinite authorization may be granted for treatment of acquired von Willebrand syndrome.

##### III. CONTINUATION OF THERAPY

All members (including new members) requesting authorization for continuation of therapy must meet ALL initial authorization criteria.

##### IV. APPENDIX

###### **Clinical Reasons For Not Utilizing Desmopressin in Patients with Type 1, 2A, 2N and 2M vWD**

- A. Age < 2 years
- B. Pregnancy
- C. Fluid/electrolyte imbalance
- D. High risk for cardiovascular or cerebrovascular disease (especially the elderly)
- E. Predisposition to thrombus formation
- F. Trauma requiring surgery
- G. Life-threatening bleed
- H. Contraindication or intolerance to desmopressin
- I. Severe type 1 von Willebrand disease

## V. REFERENCES

1. Wilate [package insert]. Hoboken, NJ: Octapharma USA Inc.; August 2015.
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3. Tiede A, Rand J, Budde U, et al. How I treat the acquired von Willebrand syndrome. *Blood*. 2011;117(25):6777-85.
4. Federici A, Budde U, Castaman G, Rand J, Tiede A. Current diagnostic and therapeutic approaches to patients with acquired von Willebrand syndrome: a 2013 update. *Semin Thromb Hemost*. 2013;39(2):191-201.
5. National Hemophilia Foundation. MASAC recommendations concerning products licensed for the treatment of hemophilia and other bleeding disorders. Revised October 2016. MASAC Document # 246. Accessed December 1, 2016.
6. National Hemophilia Foundation. MASAC recommendations regarding the treatment of von Willebrand disease. MASAC Document #244. <https://www.hemophilia.org/sites/default/files/document/files/244.pdf>. Accessed December 1, 2016.
7. Stimate [package insert]. King of Prussia, PA: CSL Behring LLC; June 2013.
8. Leissinger C, Carcao M, Gill JC, et al. Desmopressin (DDAVP) in the management of patients with congenital bleeding disorders. *Haemophilia*. 2014;20:158-167.