

# Specialty Guideline Management

## Daurismo

### Products Referenced by this Document

Drugs that are listed in the following table include both brand and generic and all dosage forms and strengths unless otherwise stated. Over-the-counter (OTC) products are not included unless otherwise stated.

Brand Name	Generic Name
Daurismo	glasdegib

### 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.

#### FDA-approved Indication<sup>1</sup>

Daurismo is indicated, in combination with low-dose cytarabine, for the treatment of newly diagnosed acute myeloid leukemia (AML) in adult patients who are  $\geq 75$  years old or who have comorbidities that preclude use of intensive induction chemotherapy.

#### Compendial Uses<sup>2</sup>

Post induction/consolidation therapy following response to previous therapy with the same regimen  
All other indications are considered experimental/investigational and not medically necessary.

## Coverage Criteria

### Acute Myeloid Leukemia (AML)<sup>1,2</sup>

Authorization of 12 months may be granted for treatment of AML when all of the following criteria is met:

- The requested medication is used in combination with low-dose cytarabine
- One of the following criteria is met:
  - Member is 75 years of age or older.
  - Member has comorbidities that preclude treatment with intensive induction chemotherapy or declines intensive induction chemotherapy.
- The requested medication will be used in any of the following clinical settings:
  - As treatment for induction therapy for AML without IDH1 mutation
  - As post-induction/consolidation therapy following response to previous therapy with the same regimen

## Continuation of Therapy

Authorization of 12 months may be granted for continued treatment in members requesting reauthorization for an indication listed in the Coverage Criteria section when there is no evidence of disease progression or an unacceptable toxicity while on the current regimen.

## References

1. Daurismo [package insert]. New York, NY: Pfizer, Inc.; December 2024.
2. The NCCN Drugs & Biologics Compendium® © 2025 National Comprehensive Cancer Network, Inc. Available at: <https://www.nccn.org> Accessed January 3, 2025.