

# Initial Prior Authorization

## Epiduo, Epiduo Forte

### Retinoid/Benzoyl Peroxide Combinations (Topical)

## 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
Epiduo	adapalene/benzoyl peroxide
Epiduo Forte	adapalene/benzoyl peroxide

## Indications

### FDA-Approved Indications

#### Epiduo

Epiduo gel is indicated for the topical treatment of acne vulgaris in patients 9 years of age and older.

#### Epiduo Forte

Epiduo Forte is indicated for the topical treatment of acne vulgaris in adults and pediatric patients 12 years of age and older.

Reference number(s)
3655-A

# Coverage Criteria

## Acne Vulgaris

Authorization may be granted when the requested drug is being prescribed for the topical treatment of acne vulgaris

# Continuation of Therapy

## Acne Vulgaris

Authorization may be granted when the requested drug is being prescribed for the topical treatment of acne vulgaris when the following criteria is met:

- The patient has achieved or maintained a positive clinical response as evidenced by improvement (e.g., reduction in number of lesions, patient satisfaction, etc.)

# Duration of Approval (DOA)

- 3655-A: Initial therapy DOA: 4 months; Continuation of therapy DOA: 12 months

# References

1. Epiduo [package insert]. Fort Worth, TX: Galderma Laboratories, L.P.; February 2018.
2. Epiduo Forte [package insert]. Fort Worth, TX: Galderma Laboratories, L.P.; April 2022.
3. Lexicomp Online, Lexi-Drugs Online, Hudson, OH: UpToDate, Inc.; 2024; Accessed July 17, 2024.
4. Micromedex® (electronic version). Merative, Ann Arbor, Michigan, USA. Available at: <https://www.micromedexsolutions.com/> (cited: 07/17/2024).
5. Reynolds RV, Yeung H, Cheng CE, et al. Guidelines of care for the management of acne vulgaris. J Am Acad Dermatol. 2024; 90(5):1006.e1-1006.e30.