

## ATTRUBY (acoramidis)

#### RATIONALE FOR INCLUSION IN PA PROGRAM

## **Background**

Attruby (acoramidis) is a selective stabilizer of transthyretin (TTR). Attruby binds TTR at thyroxine binding sites and slows dissociation of the TTR tetramer into its constituent monomers, the rate-limiting step in amyloidogenesis (1).

### **Regulatory Status**

FDA-approved indication: Attruby is a transthyretin stabilizer indicated for the treatment of the cardiomyopathy of wild-type or variant transthyretin-mediated amyloidosis (ATTR-CM) in adults to reduce cardiovascular death and cardiovascular-related hospitalization (1).

The recommended dosage of Attruby is 712 mg orally twice daily (1).

Initiation of Attruby causes an increase in serum creatinine and decrease in eGFR which generally occurs within 4 weeks of starting therapy and stabilizes. The changes in serum creatinine and eGFR were reversible after treatment discontinuation (1).

In clinical studies, subjects were primarily (87.9%) white and so Attruby's safety and efficacy in other races may be limited (1).

The safety and effectiveness of Attruby in pediatric patients less than 18 years of age have not been established (1).

#### **Summary**

Attruby is a transthyretin stabilizer indicated for the treatment of the cardiomyopathy of wild-type or variant transthyretin-mediated amyloidosis (ATTR-CM) in adults to reduce cardiovascular death and cardiovascular-related hospitalization. The safety and effectiveness of Attruby in pediatric patients less than 18 years of age have not been established (1).

Prior authorization is required to ensure the safe, clinically appropriate, and cost-effective use of Attruby while maintaining optimal therapeutic outcomes.



Federal Employee Program.

# ATTRUBY (acoramidis)

#### References

- 1. Attruby [package insert]. Palo Alto, CA: BridgeBio Pharma, Inc.; November 2024.
- Eidos Therapeutics Inc. Treatment of Symptomatic ATTR Cardiomyopathy Protocol Amendment. June 16, 2022. Accessed January 10, 2025. https://cdn.clinicaltrials.gov/large-docs/35/NCT03860935/Prot\_000.pdf