

**VANFLYTA  
(quizartinib)****RATIONALE FOR INCLUSION IN PA PROGRAM****Background**

Vanflyta (quarzaritinib) is a small molecule inhibitor of the receptor tyrosine kinase FLT3. Vanflyta and its major active metabolite AC886 bind to the adenosine triphosphate (ATP) binding domain of FLT3 with comparable affinity, and both had a 10-fold lower affinity towards FLT3-ITD mutation compared to FLT3 in binding assay. Vanflyta and AC886 inhibited FLT3 kinase activity, preventing autophosphorylation of the receptor, thereby inhibiting downstream FLT3 receptor signaling and blocking FLT3-ITD-dependent cell proliferation (1).

**Regulatory Status**

FDA-approved indications: Vanflyta is a kinase inhibitor indicated in combination with standard cytarabine and anthracycline induction and cytarabine consolidation, and as maintenance monotherapy following consolidation chemotherapy, for the treatment of adult patient with newly diagnosed acute myeloid leukemia (AML) that is FLT3 internal tandem duplication (ITD)-positive as detected by an FDA-approved test (1).

**Limitations of Use: (1)**

1. Vanflyta is not indicated as maintenance monotherapy following allogeneic hematopoietic stem cell transplantation (HSCT); improvement in overall survival with Vanflyta in this setting has not been demonstrated.

Vanflyta includes a boxed warning citing the risks of QT interval prolongation. Prior to Vanflyta administration and periodically, perform electrocardiograms (ECGs), monitor for hypokalemia or hypomagnesemia, and correct deficiencies. Torsades de pointes and cardiac arrest have occurred in patients receiving Vanflyta. Do not administer Vanflyta to patients with severe hypokalemia, severe hypomagnesemia, or long QT syndrome. Do not initiate treatment or escalate the dose if the QT interval corrected by Fridericia's formula (QTcF) is greater than 450 ms. Monitor ECGs more frequently if concomitant use of drugs known to prolong the QT interval is required. Reduce the Vanflyta dose when used concomitantly with strong CYP3A inhibitors, as they may increase Vanflyta exposure. Because of the risks QT prolongation, Vanflyta is available only through a restricted program called the Vanflyta Risk Evaluation and Mitigation Strategy (REMS) (1).

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Vanflyta can cause fetal harm when administered to a pregnant women. Advise females of reproductive potential to use effective contraception during treatment with Vanflyta and for 7 months after the last dose. Advise males with female partners of reproductive potential to use effective contraception during treatment with Vanflyta and for 4 months after the last dose (1).

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

**Summary**

Vanflyta is a kinase inhibitor indicated for the treatment of FLT3 ITD-positive acute myeloid leukemia. Vanflyta may prolong the QT interval. Therefore, ECGs should be performed periodically and hypokalemia and hypomagnesemia should be monitored and corrected for deficiencies (1).

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

**References**

1. Vanflyta [package insert]. Basking Ridge, NJ: Daiichi Sankyo, Inc.; June 2024.
2. NCCN Drugs & Biologics Compendium® Quizartinib 2025. National Comprehensive Cancer Network, Inc. Accessed on January 9, 2025.