

QUANTITY LIMIT CRITERIA

BRAND NAME (generic)

**AKYNZEO CAPSULES
(netupitant/palonosetron)**

**AKYNZEO INJECTION
(fosnetupitant/palonosetron)**

**Status: CVS Caremark® Criteria
Type: Quantity Limit**

POLICY

FDA-APPROVED INDICATIONS

- Akynzeo capsules is indicated in combination with dexamethasone in adults for the prevention of acute and delayed nausea and vomiting associated with initial and repeat courses of cancer chemotherapy, including, but not limited to, highly emetogenic chemotherapy. Akynzeo capsules is a combination of palonosetron and netupitant: palonosetron prevents nausea and vomiting during the acute phase and netupitant prevents nausea and vomiting during both the acute and delayed phase after cancer chemotherapy.
- Akynzeo for injection and Akynzeo injection are indicated in combination with dexamethasone in adults for the prevention of acute and delayed nausea and vomiting associated with initial and repeat courses of highly emetogenic cancer chemotherapy. Akynzeo for injection is a combination of palonosetron and fosnetupitant, a prodrug of netupitant: palonosetron prevents nausea and vomiting during the acute phase and fosnetupitant prevents nausea and vomiting during both the acute and delayed phase after cancer chemotherapy.

Limitations of Use

Akynzeo for injection and Akynzeo injection have not been studied for the prevention of nausea and vomiting associated with anthracycline plus cyclophosphamide chemotherapy.

INITIAL LIMIT QUANTITY

Limits do not accumulate together; patient is allowed the maximum limit for each drug and strength

<u>Drug</u>	<u>4 Week Limit*</u>	<u>12 Week Limit*</u>
Akynzeo capsules (netupitant/palonosetron)	2 capsules / 21 days	Does Not Apply**
Akynzeo for injection (fosnetupitant/palonosetron lyophilized powder in single-dose vial for reconstitution)	2 vials / 21 days	Does Not Apply**
Akynzeo injection (fosnetupitant/palonosetron solution in single dose 20 mL vial)	40 mL / 21 days	Does Not Apply**

* The duration of 21 days is used for a 28-day fill period to allow time for refill processing.

Akynzeo Limit Policy 01-2024.docx

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**** These drugs are for short-term acute use; therefore, the mail limit will be the same as the retail limit. The intent is for prescriptions of the requested drug to be filled one month at a time, even if filled at mail order; there should be no 3 month supplies filled.**

REFERENCES

1. Akynzeo [package insert]. Iselin, NJ: Helsinn Therapeutics (U.S.), Inc.; February 2023.
2. Lexicomp Online, AHFS DI (Adult and Pediatric) Online. Waltham, MA: UpToDate, Inc.; 2023. <https://online.lexi.com>. Accessed November 29, 2023.
3. Micromedex (electronic version). Merative, Ann Arbor, Michigan, USA. Available at: <https://www.micromedexsolutions.com/> (cited: 11/29/2023).