

8-Mop

(Methoxsalen, Methoxypsoralen, Psoralen, 8-MOP)

Effective Date: 10/22/13

Date Developed: 9/3/13 by Albert Reeves MD

Last Approval Date: 1/26/16, 1/24/17; 1/23/18; 1/22/19

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8-Mop is a naturally occurring photoactive substance used to treat psoriasis, eczema, vitiligo and some cutaneous lymphomas in conjunction with exposing the skin to UVA light from lamps or sunlight.

Pre-Authorization Criteria: severe or recalcitrant psoriasis, vitiligo, or cutaneous T cell lymphoma (CTCL)

Adult Dosing (should be administered by a dermatologist):

Psoriasis: Oral:

Initial: 10-70 mg 1.5-2 hours (Oxsoralen-Ultra®) or 2 hours (8-MOP®) before exposure to UVA light; dose may be repeated 2-3 times per week, based on UVA exposure; doses must be given at least 48 hours apart; dosage is based upon patient's body weight and skin type:

<30 kg: 10 mg

30-50 kg: 20 mg

51-65 kg: 30 mg

66-80 kg: 40 mg

81-90 kg: 50 mg

91-115 kg: 60 mg

>115 kg: 70 mg

Note: Dosage may be increased (one time) by 10 mg after 15th treatment if minimal or no response.

Maintenance: When 95% psoriasis clearing achieved, may begin 1 treatment every week for at least 2 treatments; followed by 1 treatment every 2 weeks for at least 2 treatments; then every 3

weeks for at least 2 treatments then as needed to maintain response while minimizing UVA exposure.

Vitiligo: Oral (8-MOP®): 20 mg 2-4 hours before exposure to UVA light; dose may be repeated based on erythema and tenderness of skin; do not give on 2 consecutive days

CTCL: Extracorporeal (Uvadex®): Dose is determined by treatment volume; amount of Uvadex® needed for each treatment may be calculated using the following equation: Treatment volume x 0.017 = mL of Uvadex® needed. Inject this amount into the photoactivation bag during the collection cycle using the UVAR® photopheresis system (consult user's guide).

Treatment schedule: Two consecutive days every 4 weeks for a minimum of 7 treatment cycles, may accelerate to 2 consecutive days every 2 weeks if skin score worsens (eg, increases from baseline) after assessment during the fourth treatment cycle. If skin score improves by 25% after 4 consecutive weeks of accelerated therapy, may resume regular treatment schedule. Maximum: 20 accelerated therapy cycles.

PRECAUTIONS: hypotension; dizziness/vertigo; nausea; skin reactions (painful blistering, pigment changes, photosensitivity, premature aging); cataracts; skin cancer (basal cell, squamous cell, melanoma); children <12 y.o. (long term safety not established); hard and soft gelatin capsules are not interchangeable [U.S. Boxed Warning]

DRUG INTERACTIONS: Several potential drug interactions. Refer to product information for a complete listing.

REFERENCES

1. Stern RS, "Psoralen and Ultraviolet a Light Therapy for Psoriasis," *N Engl J Med*, 2007, 357(7):682-90. [PubMed [17699818](#)]
2. Stern RS, Nichols KT and Vateva LH, "Malignant Melanoma in Patients Treated for Psoriasis With Methoxsalen (Psoralen) and Ultraviolet A Radiation (PUVA). The PUVA Follow-Up Study," *N Engl J Med*, 1997, 336(15):1041-5. [PubMed [9091799](#)]
3. Uvadex(methoxsalen) [prescribing information]. Greenville, NC: DSM Pharmaceuticals; November 2013.
4. 8-MOP(methoxsalen)[prescribing information].AlisoViejo,CA:Valeant Pharmaceuticals; December 2007.

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