VENTURA COUNTY
HEALTH CARE PLAN

Prior Authorization DRUG Guidelines

INLYTA (axitinib)

Effective Date: 4/24/12

Date Developed: 3/1/12 by Albert Reeves MD

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

(Archived 1/22/19)

INLYTA is an Antineoplastic Agent, Tyrosine Kinase Inhibitor; Vascular Endothelial Growth Factor (VEGF) Inhibitor.

Pre-Authorization Criteria:

VCHCP will authorize INLYTA for FDA indicated treatment of advanced renal cell cancer (RCC) after failure of one prior systemic treatment.

VCHCP requires that INLYTA be prescribed by an Oncologist.

Dosing: Adult
The starting dose is 5 mg orally twice daily. Dose adjustments can be made based on individual safety and tolerability.

Dosing: Hepatic Impairment: For patients with moderate hepatic impairment, decrease the starting dose by approximately half. A starting dose decrease is recommended when administering INLYTA to patients with moderate hepatic impairment.

Dosing: Geriatric
See adult dosing. No dosage adjustment is required in elderly patients.

Dosage Forms: U.S.
INLYTA is available in tablet form, in 1 mg and 5 mg strength.

Administration
INLYTA can be taken with our without food. It is taken two times a day approximately 12 hours apart with a whole glass of water.

Patient should avoid drinking grapefruit juice or eating grapefruit while taking INLYTA. Grapefruit may increase the amount of INLYTA in the blood.

WARNINGS / PRECAUTIONS

- High blood pressure (hypertension). Blood pressure needs to be monitored regularly.
- Thyroid gland problems. Thyroid gland function before and during treatment with INLYTA needs to be tested.
- Problem with blood clots in veins and arteries. Use with caution in patients who are at risk for arterial and venous thrombotic events.
- Bleeding/hemorrhagic events. INLYTA should not be used in patients with recent active gastrointestinal bleeding.
- Gastrointestinal Perforations
- Reversible Posterior Leukoencephalopathy Syndrome
- Increase protein in urine
- Change in liver function. Liver function need to be monitored.

REFERENCES

Pfizer pharmacy/drug insert, issued January 2012

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