Procrit® (epoetin alfa)

LENGTH OF AUTHORIZATION: UP TO SIX MONTHS

REVIEW CRITERIA:

Trial and failure to therapy of a preferred medication (e.g. Aranesp or Epogen) is required for each indication listed below:

Anemia associated with chronic kidney disease (CKD) in patients not on dialysis or receiving home dialysis (Approve for 6 months):

- **Initial Therapy:**
  - Hemoglobin < 10 g/dL, Transferrin saturation ≥ 20% and Serum Ferritin ≥ 100ng/mL.
  - Lab data within 2 months of PA submission.

- **Continuation of Therapy:**
  - Hemoglobin ≤ 11 g/dL, Transferrin saturation ≥ 20% and Serum Ferritin ≥ 100ng/mL.
  - Lab data within 2 months of PA submission.

Anemia associated with chemotherapy: (Approve for 6 months):

- **Initial Therapy:**
  - No existing history of iron or folate deficiency, hemolysis, or gastrointestinal bleeding.
  - Hemoglobin < 10 g/dL, Transferrin saturation ≥ 20% and Serum Ferritin ≥ 100ng/mL.
  - Must be on or initiating chemotherapy.

- **Continuation of Therapy:**
  - No existing history of iron or folate deficiency, hemolysis, or gastrointestinal bleeding.
  - Hemoglobin ≤ 12 or lowest level sufficient to avoid transfusion
  - Transferrin saturation ≥ 20% Serum Ferritin ≥ 100ng/mL.

Anemia associated with human immunodeficiency virus (Approve for 3 months):

- **Initial Therapy:**
  - No existing history of iron or folate deficiency, hemolysis, or gastrointestinal bleeding.
  - Hemoglobin < 13 g/dL, in men and < 12 g/dL in women.
  - Transferrin saturation ≥ 20% and Serum Ferritin ≥ 100ng/mL.

- **Continuation of Therapy:**
  - Hemoglobin < 13 g/dL in men and < 12 g/dl in women
  - Transferrin saturation ≥ 20% and Serum Ferritin ≥ 100ng/mL.
Anemia associated with Hepatitis C (Approve for 6 months):

- **Initial Therapy:**
  - No existing history of iron or folate deficiency, hemolysis, or gastrointestinal bleeding.
  - Hemoglobin ≤ 12 g/dl. Transferrin saturation ≥ 20% and Serum Ferritin ≥ 100ng/mL
  - Current HCV therapy with Ribavirin.
- **Continuation of Therapy:**
  - Hemoglobin ≤ 12 g/dL. Transferrin saturation ≥ 20% and Serum Ferritin ≥ 100ng/mL
  - Current HCV therapy with Ribavirin.

To reduce the need for allogenic blood transfusions in anemic patients scheduled to undergo elective, non-cardiac, nonvascular surgery (Approve no more than 15 doses):

- Must be unwilling to donate blood.
- Patient must have a hemoglobin > 10 and ≤ 13 g/dL.
- Must be receiving iron supplementation.

Supplemental iron therapy is recommended for all patients whose serum ferritin is below 100 mcg/L or whose serum transferrin saturation is below 20%.

*Procrit* is not intended for patients who require immediate correction of severe anemia. *Procrit* may remove the need for maintenance transfusions but is not a substitute for emergency transfusion or treatment of other causes of anemia, such as iron deficiency, underlying infectious, inflammatory, or malignant processes, occult blood loss, underlying hematologic diseases, folic acid, vitamin B-12 deficiency, or hemolysis.

**DOSING INFORMATION:**

**Chronic Kidney Disease**

**Starting Dose:**

- **For adult patients not on dialysis** the recommended starting dose:
  - 50 to 100 units/kg 3 times weekly intravenously or subcutaneously.
- **For pediatric patients not on dialysis** the recommended starting dose:
  - 50 units/kg three times weekly intravenously or subcutaneously.

**Starting Dose:**

- **For adult patients on dialysis:**
  - 50 to 100 units/kg 3 times weekly intravenously or subcutaneously.
  - The intravenous route is recommended for patients on hemodialysis.
- **For pediatric patients on dialysis:**
  - 50 units/kg three times weekly intravenously or subcutaneously.
The intravenous route is recommended for patients on hemodialysis.

**Zidovudine-treated HIV-infected Patients**

**Starting Dose:**
- The recommended starting dose in adults is 100 units/kg as an intravenous or subcutaneous injection 3 times per week.

**Cancer Patients on Chemotherapy**

**Starting Dose:**
- The recommended starting dose in adults:
  - 150 units/kg subcutaneously 3 times per week until completion of a chemotherapy course OR
  - 40,000 units subcutaneously weekly until completion of a chemotherapy course.
  - The recommended starting dose in pediatric patients (5 to 18 years):
    - 600 units/kg intravenously weekly until completion of a chemotherapy course.

**Surgery Patients**

**Recommended Dose:**
- 300 units/kg subcutaneously daily for a total of 15 days. The dose is administered for 10 days pre-surgery, the day of surgery, and 4 days post-surgery OR
- 600 units/kg subcutaneously for a total of 4 doses administered. The doses are administered on days 21, 14, and 7 days pre-surgery and on the day of surgery.