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## 5.21.121

Section: Prescription Drugs Effective Date: April 1, 2024

Subsection: Antineoplastic Agents Original Policy Date: December 7, 2018

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Last Review Date: March 8, 2024

### Daurismo

#### **Description**

Daurismo (glasdegib)

#### **Background**

Daurismo (glasdegib) is an inhibitor of the Hedgehog pathway. Daurismo binds to and inhibits Smoothened, a transmembrane protein involved in hedgehog signal transduction. Daurismo in combination with low-dose cytarabine inhibits increases in tumor size and reduces the percentage of CD45+/CD33+ blasts in the marrow to a greater extent than Daurismo or low-dose cytarabine alone (1).

#### **Regulatory Status**

FDA-approved indication: Daurismo is a Hedgehog pathway inhibitor indicated, in combination with low-dose cytarabine, for the treatment of newly-diagnosed acute myeloid leukemia (AML) in adult patients who are ≥75 years old or who have comorbidities that preclude use of intensive induction chemotherapy (1).

Daurismo has a boxed warning regarding embryo-fetal death or severe birth defects. Pregnancy testing should be done in females of reproductive potential prior to initiation of Daurismo treatment. Females of reproductive potential should be advised to use effective contraception during treatment with Daurismo and for at least 30 days after the last dose. Males with a pregnant partner or a female partner of reproductive potential should be advised to use condoms during treatment with Daurismo and for at least 30 days after the last dose (1).

Complete blood counts, electrolytes, renal, and hepatic function should be assessed prior to initiation of Daurismo and at least once weekly for the first month. Electrolytes and renal

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function should be monitored once monthly for the duration of therapy. Serum creatinine kinase levels should be obtained prior to initiating Daurismo and as indicated clinically thereafter. Electrocardiograms (ECGs) should be monitored prior to initiation of Daurismo, approximately one week after initiation, and then once monthly for the next two months to assess for QTc prolongation (1).

The safety and effectiveness of Daurismo in pediatric patients have not been established (1).

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#### Related policies

### **Policy**

This policy statement applies to clinical review performed for pre-service (Prior Approval, Precertification, Advanced Benefit Determination, etc.) and/or post-service claims.

Daurismo may be considered **medically necessary** if the conditions indicated below are met.

Daurismo may be considered **investigational** for all other indications.

## **Prior-Approval Requirements**

**Age** 18 years of age or older

#### **Diagnosis**

Patient must have the following:

Newly-diagnosed acute myeloid leukemia (AML)

#### **AND ALL** of the following:

- 1. Used in combination with low-dose cytarabine
- 2. Patient is 75 years of age or older **OR** patient has comorbidities that preclude the use of intensive induction chemotherapy
- 3. Prescriber agrees to monitor electrocardiograms (ECGs) for QTc prolongation
- 4. Prescriber agrees to advise females of reproductive potential to use effective contraception during treatment and for at least 30 days after the last dose
- 5. Prescriber agrees to advise males with female partners of reproductive potential to use condoms during treatment and for at least 30 days after the

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last dose

## Prior - Approval Renewal Requirements

Age 18 years of age or older

#### **Diagnosis**

Patient must have the following:

Acute myeloid leukemia (AML)

#### AND ALL of the following:

- 1. Used in combination with low-dose cytarabine
- 2. NO disease progression or unacceptable toxicity
- 3. Prescriber agrees to monitor electrocardiograms (ECGs) for QTc prolongation
- 4. Prescriber agrees to advise females of reproductive potential to use effective contraception during treatment and for at least 30 days after the last dose
- Prescriber agrees to advise males with female partners of reproductive potential to use condoms during treatment and for at least 30 days after the last dose

### **Policy Guidelines**

#### Pre - PA Allowance

None

## **Prior - Approval Limits**

#### Quantity

| Strength       | Quantity Limit                    |
|----------------|-----------------------------------|
| 25 mg tablets  | 180 tablets per 90 days <b>OR</b> |
| 100 mg tablets | 90 tablets per 90 days            |

**Duration** 12 months

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### Prior - Approval Renewal Limits

Same as above

#### Rationale

#### **Summary**

Daurismo (glasdegib) is an inhibitor of the Hedgehog pathway. Daurismo binds to and inhibits Smoothened, a transmembrane protein involved in hedgehog signal transduction. Daurismo in combination with low-dose cytarabine inhibits increases in tumor size and reduces the percentage of CD45+/CD33+ blasts in the marrow to a greater extent than Daurismo or low-dose cytarabine alone. The safety and effectiveness of Daurismo in pediatric patients have not been established (1).

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

#### References

- 1. Daurismo [package insert]. NY, NY: Pfizer Inc.; March 2023.
- 2. NCCN Drugs & Biologics Compendium<sup>®</sup> Glasdegib 2024. National Comprehensive Cancer Network, Inc. Accessed on January 29, 2024.

| Policy History |  |
|----------------|--|
| Date           | Action                                       |
| December 2018  | Addition to PA                               |
| March 2019     | Annual review                                |
| June 2020      | Annual editorial review and reference update |
| March 2021     | Annual editorial review                      |
| March 2022     | Annual review and reference update           |
| March 2023     | Annual review and reference update           |
| December 2023  | Annual review and reference update           |
| March 2024     | Annual review and reference update           |
| Keywords       |  |

This policy was approved by the FEP® Pharmacy and Medical Policy Committee on March 8, 2024 and is effective on April 1, 2024.

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