

**Zyvox (linezolid) tablets**  
**Linezolid oral suspension**  
**Effective 11/26/2018**

<b>Plan</b>	<input type="checkbox"/> MassHealth UPPL <input checked="" type="checkbox"/> Commercial/Exchange	<b>Program Type</b>	<input checked="" type="checkbox"/> Prior Authorization <input checked="" type="checkbox"/> Quantity Limit <input type="checkbox"/> Step Therapy
<b>Benefit</b>	<input checked="" type="checkbox"/> Pharmacy Benefit <input type="checkbox"/> Medical Benefit (NLX)		
<b>Specialty Limitations</b>	N/A		
<b>Contact Information</b>	<b>Specialty Medications</b>		
	All Plans	Phone: 866-814-5506	Fax: 866-249-6155
	<b>Non-Specialty Medications</b>		
	MassHealth	Phone: 877-433-7643	Fax: 866-255-7569
	Commercial	Phone: 800-294-5979	Fax: 888-836-0730
	Exchange	Phone: 855-582-2022	Fax: 855-245-2134
	<b>Medical Specialty Medications (NLX)</b>		
	All Plans	Phone: 844-345-2803	Fax: 844-851-0882
<b>Exceptions</b>	N/A		

### Overview

Linezolid is an antibiotic that fights bacteria in the body. Linezolid is also a MAO (monoamine oxidase) inhibitor. Linezolid is used to treat different types of bacterial infections, such as pneumonia, skin infections, and infections that are resistant to other antibiotics.

### Coverage Guidelines

Authorization may be granted for members when ANY of the following criteria are met, and documentation is provided:

1. Member was started on linezolid therapy in the hospital or another inpatient facility.
2. Member has a documented blood, sputum, tissue or urine culture positive for vancomycin-resistant Enterococcus (VRE).
3. Member has a documented blood, sputum, tissue or urine culture positive for methicillin-resistant Staphylococcus (MRSA) and treatment with vancomycin is not an option (e.g. lack of IV access, etc.).
4. Member currently has a complicated skin or skin structure infection with no concomitant osteomyelitis where a culture cannot be obtained (e.g. closed wound infections, diabetic foot infections, cellulitis infections, etc.) and patient has a history of MRSA infections.
5. Member has hospital-acquired or healthcare-associated pneumonia caused by *S. aureus* (methicillin-susceptible and -resistant isolates), or *S. pneumoniae*.
6. Member has uncomplicated skin and skin structure infections caused by *S. aureus* (methicillin-susceptible isolates) or *S. pyogenes*.

## Limitations

1. Approvals for the following will be granted for 28 days:
  - a. Therapy has been started in a hospital/inpatient facility,
  - b. Blood, sputum, tissue or urine culture positive for VRE/MRSA,
  - c. Hospital-acquired or healthcare-associated pneumonia caused by *S. aureus* or *S. pneumoniae*.
2. Approvals for the following will be granted for 14 days:
  - a. Complicated skin or skin structure infection with no concomitant osteomyelitis and a history of MRSA infections.
  - b. Uncomplicated skin and skin structure infection cause by *S.aureus* or *S. pyogenes*
3. For treatment duration exceeding 2 weeks, weekly monitoring of patient’s complete blood count (CBC) is required.
4. The following quantity limits apply:

Linezolid 600mg tablets	56 tablets per 90 days
Linezolid oral suspension	1800mL (12 bottles) per 90 days

## References

1. Zyvox (linezolid) [prescribing information]. New York, NY: Pharmacia & Upjohn Co; July 2018.
2. Stevens DL, Bisno AL, Chambers HF, Everett ED, Dellinger P, Goldstein EJC, et al. Practice Guidelines for the Diagnosis and Management of Skin and Soft-Tissue Infections. IDSA Guidelines. CID. 2005; 41:1373-406.
3. Lipsky BA, Berendt AR, Cornia PB, Pile JC, Peters EJG, Armstrong DG, et al. 2012 IDSA Clinical Practice Guideline for the Diagnosis and Treatment of Diabetic Foot Infections. CID. 2012;54(12):132-73.
4. Mandell LA, Wundering RG, Anzueto A, Bartlett JG, Douglas Campbell G, Dean NC, et al. IDSA/American Thoracic Society Consensus Guidelines on the Management of Community-Acquired Pneumonia in Adults. CID. 2007;44: S27-72.
5. Liu C, Bayer A, Cosgrove SE, Datum RS, Fridkin SK, Gorwitz RJ, et al. Clinical practice guidelines by the Infectious Diseases Society of America for the treatment of methicillin-resistant *Staphylococcus aureus* infections in adults and children. CID. 2011; 52:1-38.
6. Yue J, Dong BR, Yang M, Chen X, Wu T, Liu GJ. Linezolid versus vancomycin for skin and soft tissue infections. *Cochrane Database Syst Rev*. 2016;1:CD008056. [\[PubMed 26758498\]](#) 10.1002/14651858.CD008056.pub3
7. Itani KM, Dryden MS, Bhattacharyya H, Kunkel MJ, Baruch AM, Weigelt JA. Efficacy and safety of linezolid versus vancomycin for the treatment of complicated skin and soft-tissue infections proven to be caused by methicillin-resistant *Staphylococcus aureus*. *Am J Surg*. 2010;199(6):804-816. [\[PubMed 20227056\]](#)
8. Pea F, Cojutti PG, Baraldo M. A 10-year experience of therapeutic drug monitoring (TDM) of linezolid in a hospital-wide population of patients receiving conventional dosing: is there enough evidence for suggesting TDM in the majority of patients? *Basic Clin Pharmacol Toxicol*. 2017;121(4):303-308. [\[PubMed 28419737\]](#) 10.1111/bcpt.12797

## Review History

12/09/05 – Reviewed  
11/27/06 – Reviewed  
11/26/07 – Reviewed  
11/24/08 – Reviewed  
11/23/09 – Reviewed and revised  
11/22/10 – Reviewed  
11/28/11 – Reviewed and revised  
11/26/12 – Reviewed and revised



11/25/13 – Reviewed  
11/24/14 – Reviewed  
11/2016 – Reviewed  
11/27/17 – Reviewed in P&T Meeting  
11/26/18 – Reviewed and revised in P&T Meeting  
01/22/2020 – Reviewed P&T Mtg.

