

Influenza Treatment & Prevention
Relenza (zanamivir), Tamiflu (oseltamivir), Xofluza (baloxavir)
Effective 01/01/2024

Plan	<input type="checkbox"/> MassHealth UPPL <input checked="" type="checkbox"/> Commercial/Exchange		Program Type	<input checked="" type="checkbox"/> Prior Authorization
Benefit	<input checked="" type="checkbox"/> Pharmacy Benefit <input type="checkbox"/> Medical Benefit			<input checked="" type="checkbox"/> Quantity Limit <input type="checkbox"/> Step Therapy
Specialty Limitations	N/A			
Contact Information	Medical Benefit Pharmacy Benefit		Phone: 833-895-2611 Phone: 800-711-4555	Fax: 888-656-6671 Fax: 844-403-1029
Exceptions	N/A			

Overview

Relenza

Treatment of Influenza

Relenza (zanamivir) inhalation powder is indicated for treatment of uncomplicated acute illness due to influenza A and B virus in adults and pediatric patients aged 7 years and older who have been symptomatic for no more than 2 days.

Prophylaxis of Influenza

Relenza is indicated for prophylaxis of influenza in adults and pediatric patients aged 5 years and older.

Important Limitations on Use of Relenza

Relenza is not recommended for treatment or prophylaxis of influenza in individuals with underlying airways disease (such as asthma or chronic obstructive pulmonary disease) due to risk of serious bronchospasm.

Relenza has not been proven effective for treatment of influenza in individuals with underlying airways disease.

Relenza has not been proven effective for prophylaxis of influenza in the nursing home setting.

Relenza is not a substitute for early influenza vaccination on an annual basis as recommended by the Centers for Disease Control's Immunization Practices Advisory Committee.

Influenza viruses change over time. Emergence of resistance mutations could decrease drug effectiveness. Other factors (for example, changes in viral virulence) might also diminish clinical benefit of antiviral drugs. Prescribers should consider available information on influenza drug susceptibility patterns and treatment effects when deciding whether to use Relenza.

There is no evidence for efficacy of zanamivir in any illness caused by agents other than influenza virus A and B. Patients should be advised that the use of Relenza for treatment of influenza has not been shown to reduce the risk of transmission of influenza to others.

Compendial Uses

Treatment of influenza A or B viral infection when administered after 48 hours in patients aged 7 years and older who are at higher risk for influenza complications or in patients aged 7 years and older with severe, complicated, or progressive illness⁴⁻¹⁰.

Tamiflu

Treatment of Influenza

Tamiflu is indicated for the treatment of acute, uncomplicated illness due to influenza A and B infection in patients 2 weeks of age and older who have been symptomatic for no more than 48 hours.

Prophylaxis of Influenza

Tamiflu is indicated for the prophylaxis of influenza A and B in patients 1 year and older.

Limitations of Use

Tamiflu is not a substitute for early influenza vaccination on an annual basis as recommended by the Centers for Disease Control and Prevention Advisory Committee on Immunization Practices.

Influenza viruses change over time. Emergence of resistance substitutions could decrease drug effectiveness.

Other factors (for example, changes in viral virulence) might also diminish clinical benefit of antiviral drugs.

Prescribers should consider available information on influenza drug susceptibility patterns and treatment effects when deciding whether to use Tamiflu.

Tamiflu is not recommended for patients with end-stage renal disease not undergoing dialysis.

Compindial Uses

Prophylaxis of influenza A or B viral infection in patients 3 months to 1 year of age if necessary after exposure to another person with influenza⁴⁻¹⁰

Treatment of influenza A or B viral infection when administered after 48 hours in patients who are at higher risk for influenza complications or in patients with severe, complicated, or progressive illness⁴⁻¹⁰.

Xofluza

Xofluza is indicated for the treatment of acute uncomplicated influenza in patients 12 years of age and older who have been symptomatic for no more than 48 hours.

Limitations of Use

Influenza viruses change over time, and factors such as the virus type or subtype, emergence of resistance, or changes in viral virulence could diminish the clinical benefit of antiviral drugs. Consider available information on drug susceptibility patterns for circulating influenza virus strains when deciding whether to use Xofluza.

Coverage Guidelines

Authorization may be granted for members new to the plan who are currently receiving treatment with the requested medication, excluding when the product is obtained as samples or via manufacturer's patient assistance programs.

OR

Authorization may be granted when ONE of the following criteria is met:

1. The request is for Xofluza (baloxavir) for a patient 12 years of age or older who has acute uncomplicated influenza.
2. The requested drug, i.e., Tamiflu or Relenza, is being prescribed for the prophylaxis (prevention) or the treatment of influenza A or B viral infection.
3. The request is for Tamiflu (oseltamivir) for the prophylaxis of influenza A or B viral infection in a patient 3 months of age or older who has been exposed to a community outbreak.
4. The request is for Relenza (zanamivir) for the prophylaxis of influenza A or B viral infection in a patient 5 years of age or older who has been exposed to a community outbreak.

Limitations

1. Initial approvals will be granted for 10 days.
2. The following quantity limits apply:

Relenza (zanamivir) 5 mg blister per inhalation	40 blisters
oseltamivir 6 mg/mL suspension	360 mL



oseltamivir 30 mg per capsule	40 capsules
oseltamivir 45 mg per capsule	20 capsules
oseltamivir 75 mg per capsule	20 capsules
Xofluza (baloxavir marboxil) 20 mg per tablet	4 tablets
Xofluza (baloxavir marboxil) 40 mg per tablet	4 tablets

References

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2. Tamiflu [package insert]. South San Francisco, CA: Genentech, Inc.; April 2018.
3. Xofluza [package insert]. South San Francisco, CA: Genentech USA, Inc. October 2018.
4. AHFS DI (Adult and Pediatric) [database online]. Hudson, OH: Lexi-Comp, Inc.; http://online.lexi.com/lco/action/index/dataset/complete_ashp [available with subscription]. Accessed December 2016.
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6. Seasonal Influenza (Flu) Influenza - Flu Basics. Centers for Disease Control and Prevention; 2016-2017. Available at: <http://www.cdc.gov/flu/professionals/antivirals/index.htm>. Accessed December 2017.
7. Seasonal Influenza (Flu) Treatment - Antiviral Drugs. Centers for Disease Control and Prevention; 2016-2017. Available at: <http://www.cdc.gov/flu/antivirals/index.htm>. Accessed December 2017.
8. AAP Committee on Infectious Diseases. Recommendations for Prevention and Control of Influenza in Children, 2016–2017. *Pediatrics*. 2016;138(4):e20162527. Available at: <http://pediatrics.aappublications.org/content/138/4/e20162527>. Accessed December 2017.
9. Harper S, Bradley J, Englund J, et al., Seasonal Influenza in Adults and Children – Diagnosis, Treatment, Chemoprophylaxis, and Institutional Outbreak Management: Clinical Practice Guidelines of the Infectious Diseases Society of America; *Clinical Infectious Diseases* 2009; 48:1003–32. Available at: http://www.idsociety.org/Guidelines/Patient_Care/IDSA_Practice_Guidelines/Infections_By_Organism-28143/Viruses/Influenza/. Accessed December 2017.
10. Centers for Disease Control and Prevention. Antiviral Agents for the Treatment and Chemoprophylaxis of Influenza. MMWR 2011;60. Available at: <https://www.cdc.gov/mmwr/pdf/rr/rr6001.pdf>. Accessed December 2017.

Review History

12/13/2023: Reviewed at Dec P&T, switched from SGM to Custom. Effective 1/1/2024

