

# Daurismo (glasdegib)

Override(s)	Approval Duration
Prior Authorization Quantity Limit	1 year

  

Medications	Quantity Limit
Daurismo (glasdegib)	May be subject to quantity limit

## **APPROVAL CRITERIA**

Requests for Daurismo (glasdegib) may be approved if the following criteria are met:

- I. Individual has newly-diagnosed acute myeloid leukemia (AML); **AND**
- II. Individual is 75 years of age or older, or has comorbidities that preclude use of intensive induction chemotherapy; **AND**
- III. Individual is using in combination with low-dose cytarabine.

Daurismo (glasdegib) may **not** be approved for the following:

- I. Individual has severe renal impairment; **OR**
- II. Individual has moderate to severe hepatic impairment.

**Note:** Daurismo carries a black box warning for the cause of embryo-fetal death or severe birth defects when administered to a pregnant woman.

State Specific Mandates		
State name N/A	Date effective N/A	Mandate details (including specific bill if applicable) N/A

## **Key References:**

- Clinical Pharmacology [database online]. Tampa, FL: Gold Standard, Inc.: 2018. URL: <http://www.clinicalpharmacology.com>. Updated periodically.
- DailyMed. Package inserts. U.S. National Library of Medicine, National Institutes of Health website. <http://dailymed.nlm.nih.gov/dailymed/about.cfm>. Accessed: November 2018.
- DrugPoints® System [electronic version]. Truven Health Analytics, Greenwood Village, CO. Updated periodically.
- Lexi-Comp ONLINE™ with AHFS™, Hudson, Ohio: Lexi-Comp, Inc.; 2018; Updated periodically.
- The NCCN Drugs & Biologics Compendium (NCCN Compendium™) © 2018 National Comprehensive Cancer Network, Inc. Available at: NCCN.org. Updated periodically.