Oscar Clinical Guideline: Emverm (mebendazole) (PG001, Ver. 7)

Emverm (mebendazole)

Summary

Emverm (mebendazole) is an antihelminthic medication used to treat various types of parasitic worm infections such as ascariasis, enterobiasis, hookworm infections, trichuriasis, angiostrongyliasis, baylisascariasis, capillariasis, toxocariasis, trichinellosis, and trichostrongyliasis. It functions by selectively and irreversibly blocking glucose uptake and other nutrients in susceptible adult intestine-dwelling helminths, leading to their eventual death and expulsion from the body. The medication is consumed as an oral chewable tablet, with dosage and duration varying based on the specific parasitic infection being treated.

Definitions

"Antihelminthic" refers to a class of medications that work against parasitic worms (helminths), expelling them from the body.

"Ascariasis," "Enterobiasis," "Hookworm Infections," "Trichuriasis," "Angiostrongyliasis," "Baylisascariasis," "Capillariasis," "Toxocariasis," "Trichinellosis," and "Trichostrongyliasis" are all different types of parasitic worm infections for which mebendazole is a recommended treatment.

"Helminths" are parasitic worms, which can infest various parts of the body, causing a range of health problems.

"Microtubules" are components of a cell's structure that help maintain its shape and integrity. In helminths, these microtubules are disrupted by mebendazole, leading to the parasites' death.

"Nematodes" refer to a type of helminth, commonly known as roundworms, that mebendazole can effectively treat.

Medical Necessity Criteria for Initial Authorization

The Plan considers Emverm (mebendazole) medically necessary when ONE (1) of the following criteria is met:

1. The member has a documented diagnosis of ONE (1) of the following:
    a. Alveolar echinococcosis*; or*
    b. Ascariasis caused by Ascaris lumbricoides (roundworm)*; or*
    c. Baylisascariasis caused by Baylisascaris procyonis (raccoon roundworm)*; or*
    d. Capillariasis caused by Capillaria philippinensis (Philippine threadworm)*; or*
    e. Cystic echinococcosis (hydatid cyst disease)*; or*
    f. Eosinophilic enterocolitis caused by Ancylostoma caninum (dog hookworm)*; or*
    g. Eosinophilic meningitis caused by Angiostrongylus cantonensis*; or*
    h. Toxocariasis (visceral larva migrans) caused by Toxocara canis or T. cati (dog or cat roundworm)*; or*
    i. Trichinellosis (trichinosis) caused by Trichinella spiralis (pork worm)*; or*
    j. Trichuriasis caused by Trichuris trichiura (whipworm)*; OR*
2. The member has BOTH of the following:
    a. A documented diagnosis of:
        i. Enterobiasis caused by Enterobius vermicularis (pinworm)*; or*
        ii. Intestinal hookworm infections caused by Ancylostoma duodenale or Necator americanus in single or mixed infections*; or*
        iii. Trichostrongyliasis caused by Trichostrongylus*; AND*
    b. The member is unable to use, or has tried and failed over-the-counter (OTC) pyrantel pamoate.

If the above prior authorization criteria are met, Emverm (mebendazole) will be approved for up to 1 month. Prior Authorization may be extended based on the documentation provided, current treatment guidelines, and individual member needs (see Appendix A).

Medical Necessity Criteria for Reauthorization

All prior authorization renewals will be reviewed on a case-by-case basis to determine if continuation of therapy is medically necessary. The following should be provided for reauthorization:

1. Current clinical documentation supporting the need for continued therapy; *AND*
2. Response to the previous course of treatment; *AND*
3. Plan for the duration of continued treatment.

Prior Authorization may be extended based on the documentation provided, current treatment guidelines, and individual member needs (see Appendix A).

Experimental or Investigational / Not Medically Necessary

Emverm (mebendazole) for any other indication is considered not medically necessary by the Plan, as it is deemed to be experimental, investigational, or unproven.

References

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5. Emverm (mebendazole) [prescribing information]. Bridgewater, NJ: Amneal Specialty; January 2019.
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9. Vermox (mebendazole) [prescribing information]. Titusville, NJ: Janssen Pharmaceuticals Inc; September 2021.

Appendix A

Table 1: Dosage and Retreatment Information for Emverm (mebendazole) by Indication

Indication	Dosage	Duration and Retreatment
Alveolar echinococcosis	Adults and children (2 to 17 years): 40-50 mg/kg orally daily.	1 to 6 months for cystic disease and for at least 2 years in those being monitored for at least 10 years for alveolar disease.
Ascariasis caused by Ascaris lumbricoides (roundworm)	Adults and children: 500 mg orally	Single dose
	Adults and children: 100 mg orally twice daily	3 days; if not cured 3 weeks after treatment, a second course of therapy is recommended
	Children 1 year: 100 mg orally twice daily	3 days
Baylisascariasis caused by Baylisascaris procyonis (raccoon roundworm)		
Capillariasis caused by Capillaria philippinensis (Philippine threadworm)	Adults and children (2 to 17 years): 200 mg orally twice daily	20 days
Cystic echinococcosis (hydatid cyst disease)	Adults and children (2 to 17 years): 40-50 mg/kg orally daily.	1 to 6 months for cystic disease and for at least 2 years in those being monitored for at least 10 years for alveolar disease.
Enterobiasis caused by Enterobius vermicularis (pinworm)	Adults and children (1 to 17 years): 100 mg orally	Single dose; repeat dose in 2 weeks
Eosinophilic enterocolitis caused by Ancylostoma caninum (dog hookworm)	Adults: 100 mg orally twice daily	3 days
	Alternative dosing: 500 mg	Single-dose
Eosinophilic meningitis caused by Angiostrongylus cantonensis	Adults: 10 mg/kg orally daily	14 days

Intestinal hookworm infections caused by Ancylostoma duodenale or Necator americanus in single or mixed infections	Adults and children: 500 mg orally	Single-dose
	Adults and children (1 to 17 years): 100 mg orally twice daily	3 days; if not cured 3 weeks after treatment, a second course of therapy is recommended
Toxocariasis (visceral larva migrans) caused by Toxocara canis or T. cati (dog or cat roundworm)	Adults and children (2 to 17 years): 100-200 mg orally twice daily	5 days
Trichinellosis (trichinosis) caused by Trichinella spiralis (pork worm)	Adults and children (2 to 17 years): 200-400 mg orally three times daily for 3 days, then 400-500 mg three times daily for 10 days	Total duration of 13 days
Trichuriasis caused by Trichuris trichiura (whipworm)	Adults and children: 500 mg orally	Single-dose
	Adults and children (2 to 17 years): 100 mg orally twice daily	3 days; if not cured 3 weeks after treatment, a second course of therapy is recommended
	Children 1 year: 100 mg orally twice daily	3 days
Trichostrongyliasis caused by Trichostrongylus	Adults: 100 mg orally twice daily	3 days

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