



Aptiom (eslicarbazepine acetate)

Disclaimer

Clinical guidelines are developed and adopted to establish evidence-based clinical criteria for utilization management decisions. Clinical guidelines are applicable according to policy and plan type. The Plan may delegate utilization management decisions of certain services to third parties who may develop and adopt their own clinical criteria.

Coverage of services is subject to the terms, conditions, and limitations of a member's policy, as well as applicable state and federal law. Clinical guidelines are also subject to in-force criteria such as the Centers for Medicare & Medicaid Services (CMS) national coverage determination (NCD) or local coverage determination (LCD) for Medicare Advantage plans. Please refer to the member's policy documents (e.g., Certificate/Evidence of Coverage, Schedule of Benefits, Plan Formulary) or contact the Plan to confirm coverage.

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Summary

Partial-onset seizures, also known as partial seizures, focal seizures, or focal-onset seizures, start in a specific area or 'focus' in the brain. There are several subtypes of focal seizures including: focal aware seizures, focal impaired awareness seizures, focal motor seizures, focal nonmotor seizures and focal bilateral tonic-clonic seizures. The specific symptoms of a partial-onset seizure can vary widely depending on the area of the brain where the seizure originates. Focal epilepsy may be due to a focal brain pathology (due to a known syndrome or genetic cause), or be due to an unknown cause. Focal seizures can be managed with both narrow spectrum (e.g., carbamazepine, gabapentin, oxcarbazepine, phenytoin, phenobarbital, primidone, tiagabine) and broad spectrum anti-seizure medication (e.g., clobazam, felbamate, lacosamide, lamotrigine, levetiracetam, valproate, zonisamide) including Aptiom (eslicarbazepine acetate).

Aptiom (eslicarbazepine acetate) is a prescription medication used to treat partial-onset seizures in those aged 4 years and older. Eslicarbazepine acetate works by stabilizing the electrical activity in the brain to prevent seizures. It may be used alone or as an adjunctive therapy, meaning it can be used in combination with other anti-seizure medications. While Aptiom (eslicarbazepine acetate) can help to manage the symptoms of partial-onset seizures, it does not cure the underlying condition causing the seizures. The goal of Aptiom (eslicarbazepine acetate) therapy, like that of many anti-seizure medications, is to reduce the frequency and severity of seizures, improving the patient's quality of life.

Definitions

"Antiepileptic Drugs" Medications used to prevent or reduce the severity and frequency of seizures in various types of epilepsy.

"Documentation" refers to written information, including but not limited to:

- Up-to-date chart notes, relevant test results, and/or relevant imaging reports to support diagnoses; or
- Prescription claims records, and/or prescription receipts to support prior trials of formulary alternatives.

"Partial seizures" are an older term that has been used to describe seizures that start in a specific part of the brain. The term "partial" reflects the fact that these seizures are localized to a specific area at the onset.

"Focal seizures" is a term that has been more recently adopted by the International League Against Epilepsy, replacing "partial seizures." This term is more descriptive of the fact that the seizure originates from a specific 'focus' in the brain.

"Focal-onset seizures (partial-onset seizures)" are seizures that begin in a specific region or 'focus' of the brain. They can be further categorized into:

- Focal onset aware seizures: Seizures where the individual remains conscious and aware throughout the event.
- Focal onset impaired awareness seizures: Seizures that impact an individual's consciousness or awareness during the event.

"[s]" indicates state mandates may apply.

Clinical Indications

Medical Necessity Criteria for Clinical Review

General Medical Necessity Criteria

Focal Seizures

The Plan considers Aptiom (eslicarbazepine acetate) medically necessary when ALL of the following criteria are met:

1. The medication is prescribed by or in consultation with a neurologist or epilepsy specialist; *AND*
2. The member is 4 years of age or older; *AND*
3. The member has a diagnosis of focal seizures (i.e., partial-onset seizures, partial seizures); *AND*
4. The member is unable to use, or has tried and failed (e.g., inadequate seizure control), TWO (2) alternate antiepileptic drugs as applicable to the member's age (see [Appendix A](#), Table 1). These may include, but are not limited to, the following^[s]:
 - a. carbamazepine; *and/or*
 - b. divalproex; *and/or*
 - c. fosphenytoin; *and/or*
 - d. lacosamide; *and/or*
 - e. lamotrigine; *and/or*
 - f. levetiracetam; *and/or*
 - g. methsuximide; *and/or*
 - h. oxcarbazepine; *and/or*
 - i. phenobarbital; *and/or*
 - j. phenytoin; *and/or*
 - k. pregabalin; *and/or*
 - l. primidone; *and/or*
 - m. tiagabine; *and/or*
 - n. topiramate; *and/or*
 - o. valproate sodium; *and/or*
 - p. valproic acid; *and/or*
 - q. zonisamide; *AND*
5. IF the request is for brand Aptiom, the member is unable to use, or has tried and failed generic eslicarbazepine acetate from ONE manufacturer^[s]; *AND*

6. Aptiom (eslicarbazepine acetate) is being prescribed at a dose and frequency that is within FDA approved labeling OR is supported by compendia or evidence-based published dosing guidelines for the requested indication.

The requested medication is being used within the Plan's Quantity Limit of: 60 tablets every 30 days.

If the above prior authorization criteria are met, the requested product will be authorized for up to a lifetime.^[5]

Experimental / Investigational, or unproven^[5]

Aptiom (eslicarbazepine acetate) for any other use is experimental, investigational, or unproven.

Non-covered uses include, but are not limited to, the following:

- Aptiom (eslicarbazepine acetate) should not be taken as an adjunctive therapy with oxcarbazepine as noted in the package insert due to their overlapping pharmacology and safety risks.
- Bipolar 1 Disorder: In a 3- week multicentre, double-blind, randomized controlled study (n=160) studying Aptiom (eslicarbazepine acetate) versus placebo (NCT01822678, NCT01824602, NCT01825837), there was not a significant difference between groups in the primary outcome of change from baseline in the Young Mania Rating Scale. While the secondary outcomes trended towards significant, they were not powered to see a difference. There is not enough data to support the efficacy and safety of Aptiom (eslicarbazepine acetate) for this indication.
- Fibromyalgia: In an unpublished randomized double-blind controlled study (NCT01820585) in those with fibromyalgia, Aptiom (eslicarbazepine acetate) did not appear to significantly improve pain management compared to placebo. A meta-analysis assessing the safety and tolerability of Aptiom (eslicarbazepine acetate) for neurological disorders only found one randomized controlled study (described above) for this indication, which did not provide more evidence.
- Migraine: In an unpublished randomized double-blind controlled study (NCT01820559) in those with migraines, Aptiom (eslicarbazepine acetate) did not appear to significantly improve migraine frequency compared to placebo. A literature review of Aptiom (eslicarbazepine acetate) for the management of neuropathic pain, headache and cranial neuralgia did not find sufficient evidence to recommend Aptiom (eslicarbazepine acetate) for any of these indications, including headaches.
- Neuropathic Pain including Painful Diabetic Neuropathy (PDN) and postherpetic neuralgia: In two unpublished randomized double-blind controlled study (NCT00980746, NCT01129960) in those with PDN, Aptiom (eslicarbazepine acetate) did not appear to significantly improve mean daily pain scores compared to placebo. One case study (n=1) found that one individual's PDN was managed by a combination of medication neuropathic pain including gabapentin, tramadol, and Aptiom (eslicarbazepine acetate). In two unpublished randomized double-blind controlled study (NCT01124097, NCT00981227) in those with postherpetic neuralgia, Aptiom (eslicarbazepine acetate) potentially trended toward improved pain management compared to

placebo, however statistical point estimates were not published. There is not enough data to support the efficacy and safety of Aptiom (eslicarbazepine acetate) for this indication. Other forms of epilepsies, not included in this policy.

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Appendix A

Table 1: Antiepileptic Age-Specific Dosing and Formulation Guidance

Anti-epileptic Agent	FDA Approved Age-Specific Guidance (Seizure Specific Indications)	Dosage Formulations
eslicarbazepine acetate (Aptiom)	4 years of age and older	Tablets
carbamazepine (Tegretol)	1 year of age and older (immediate release) 6 years of age and older (extended-release tablets) 1 year of age and older (extended-release capsules)	Tablet; chewable tablet; oral suspension; extended-release tablet; extended-release capsule
divalproex (Depakote, Depakote ER, Depakote Sprinkle)	10 years of age and older	Delayed-release tablet; delayed-release sprinkle capsule; extended-release tablet

Anti-epileptic Agent	FDA Approved Age-Specific Guidance (Seizure Specific Indications)	Dosage Formulations
fosphenytoin (Cerebyx)	All ages	IV/intramuscular (IM) injection
lacosamide (Vimpat)	1 month of age and older (partial-onset seizures) 4 years of age and older (primary generalized tonic-clonic seizures)	Tablet; oral solution; IV injection
lamotrigine (Lamictal)	2 years of age and older (as adjunct: partial-onset, primary generalized tonic-clonic and generalized seizures of Lennox-Gastaut syndrome) 16 years of age and older (as monotherapy)	Tablet; chewable/dispersible tablet; orally disintegrating tablet; extended-release tablet
levetiracetam (Keppra)	12 years of age and older (juvenile myoclonic epilepsy) 6 years of age and older (primary generalized tonic-clonic seizures)	Tablet; oral solution; IV injection; extended-release tablet; tablet for oral suspension
methsuximide (Celontin)	All ages	Capsule
oxcarbazepine (Trileptal)	4 years of age and older (monotherapy: partial-onset seizures) 2 years of age and older (adjunct therapy: partial-onset seizures)	Tablet; oral suspension
phenobarbital	All ages	Tablet; oral elixir/solution; injection
phenytoin (Dilantin, Dilantin Infatabs, Phenytek, Phenytoin Infatabs)	All ages	Extended-release capsule; chewable tablet; oral suspension; injection
pregabalin (Lyrica)	1 month of age and older (adjunct therapy: partial onset seizures)	Capsule; oral solution
primidone (Mysoline)	1 month of age and older (generalized tonic-clonic seizures or complex partial seizures without prior treatment)	Tablet

Anti-epileptic Agent	FDA Approved Age-Specific Guidance (Seizure Specific Indications)	Dosage Formulations
	8 years of age and older (generalized tonic-clonic seizures or complex partial seizures already receiving other anticonvulsant therapy)	
tiagabine (Gabitril)	12 years of age and older	Tablet
topiramate (Eprontia, Qudexy XR, Trokendi XR, Topamax, Topamax Sprinkle)	2 years of age and older	Tablet; sprinkle capsule; extended-release capsule; oral solution
valproate sodium	10 years of age and older	Oral solution; IV injection
valproic acid	10 years of age and older	Capsule
zonisamide (Zonegran, Zonisade)	16 years of age and older	Capsule; oral suspension

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