

Creon, Viokace, Zenpep (pancrelipase)

Disclaimer

Clinical guidelines are developed and adopted to establish evidence-based clinical criteria for utilization management decisions. Oscar may delegate utilization management decisions of certain services to third-party delegates who may develop and adopt their own clinical criteria.

The clinical guidelines are applicable to all commercial plans. Services are subject to the terms, conditions, limitations of a member's plan contracts, state laws, and federal laws. Please reference the member's plan contracts (e.g., Certificate/Evidence of Coverage, Summary/Schedule of Benefits) or contact Oscar at 855-672-2755 to confirm coverage and benefit conditions.

Summary

The pancreas is an organ located in the abdomen. It has two main functions: it releases hormones (insulin and glucagon) to help regulate blood sugar. It also produces enzymes that help digest and convert the food we eat into energy for the body's functions.

Digestive enzymes produced by the pancreas enter the small intestine and breakdown fats, starch, and protein from food. Exocrine pancreatic insufficiency (EPI) occurs when pancreatic enzymes are not produced, resulting in maldigestion or the ability to digest food properly. Patients with EPI experience broad symptoms such as abdominal discomfort, bloating, cramping, increased flatulence, nutritional and vitamin deficiency, weight loss, and diarrhea or steatorrhea. Edema (swelling), anemia (low red blood cell count), osteopenia (loss of bone mass) or osteomalacia (softening of bones), and certain neurologic disorders may result from severe nutritional deficiencies.

EPI can be caused by chronic pancreatitis, cystic fibrosis, previous pancreatic surgery, blockage of pancreatic duct, Shwachman-Diamond syndrome (a rare genetic condition), and other disorders of the digestive tract. EPI is treated with dietary adjustments, vitamin supplementation (primarily the fat-soluble vitamins A, D, E, and K), and pancreatic enzyme replacement therapy (PERT) which is the mainstay of

treatment for EPI. If abdominal symptoms do not improve with PERT, alternate causes of symptoms should be evaluated and treated.

PERT products all contain porcine-derived amylases, lipases, and proteases. The formulations available in the US are categorized as enteric-coated (Creon, Pancreaze, Pertzye, and Zenpep) and non-enteric coated (Viokace). Enteric coating prevents the enzymes from being denatured by gastric acid as the coating dissolves in the duodenum. The PERT products are not interchangeable due to their different enzyme contents and release mechanisms. New prescriptions will be needed when switching between products.

The choice of PERT products will depend on indications. The prescribed dose should be individualized and adjusted based on the patient's weight, fat content of the diet, severity of steatorrhea, and clinical symptoms. The total daily PERT dose should reflect food consumption of approximately three meals plus two or three snacks per day. Half of the prescribed dose is usually for snacks. The initial dose is generally 500 lipase units/kg/meal orally. Dosing is increased to a maximum of 2500 lipase units/kg/meal, 4000 lipase units/g fat ingested/day, or 10,000 lipase units/kg/day. Higher doses should be used with caution and only if they are documented to be effective by 3-day fecal fat measures that indicate a significantly improved fat absorption.

Adverse effects of PERT which have been reported include fibrosing colonopathy at high doses, abdominal discomfort, flatulence, biliary tract stones, pruritus, and allergic reactions.

The efficacy of PERT is determined by the timing of doses. Pancrelipase should be taken with meals and snacks. Improvement in symptoms is reflected by stool consistency and weight gain. The most common reasons for treatment failure include inadequate dosage or inadequate amount of enzymes that reach the duodenum. Changing to another formulation may improve symptoms if the patient is still having inadequate responses after increasing dose, timing PERT with food intake, acid suppression, and lifestyle changes that avoid risk factors for the underlying causes of EPI.

Pertzye is the only product that has G-tube administration information in the package insert; however instructions are available for G-tube administration with other products.

PERT products and FDA-approved indications are listed below:

Creon

Creon (pancrelipase) is indicated for the treatment of exocrine pancreatic insufficiency due to cystic fibrosis, chronic pancreatitis, pancreatectomy, or other conditions in both adults and children.

Pancreaze, Pertzye, Zenpep

Pancreaze, Pertzye, and Zenpep (pancrelipase) are indicated for the treatment of exocrine pancreatic insufficiency due to cystic fibrosis or other conditions in both adults and children.

Viokace

Viokace (pancrelipase) tablets, in combination with a proton pump inhibitor (PPI), are indicated in adults for the treatment of exocrine pancreatic insufficiency due to chronic pancreatitis or pancreatectomy. It is used with a PPI to prevent it from breaking down in the stomach before reaching the duodenum. Viokace may be useful in patients who have dissolution issues with the enteric coated formulations. Viokace is indicated in adults only.

Definitions

"Chronic pancreatitis" is inflammation of the pancreas that does not heal or improve. It may get worse over time and lead to permanent damage. Chronic pancreatitis eventually impairs a patient's ability to digest food and make pancreatic hormones.

"Exocrine pancreatic insufficiency" is a condition which occurs when the pancreas does not make enough of a specific enzyme the body uses to digest food in the small intestine.

"Fibrosing colonopathy" is a disease that arises in people with cystic fibrosis treated with high doses of pancreatic enzyme supplements. Signs and symptoms include thickening of the bowel wall, abdominal pain, abdominal swelling, vomiting, and constipation.

"Hyperuricemia" is an excess of uric acid in the blood.

"Pruritus" is an uncomfortable, irritating, or itchy sensation.

"Steatorrhea" is the result of fat malabsorption and is characterized by pale, bulky, and malodorous stools. These stools often float on top of the toilet water with oily droplets and are difficult to flush.

Medical Necessity Criteria for Initial Authorization

Oscar covers Creon, Viokace, and Zenpep when ALL of the following criteria are met:

1. The member has exocrine pancreatic insufficiency due to one of the diagnoses below; **and**
 - a. Cystic fibrosis
 - b. Chronic pancreatitis
 - c. Pancreatectomy

2. Chart documentation and laboratory test results (such as fecal elastase measurement, ultrasound, secretin pancreatic function test) indicative exocrine pancreatic insufficiency due to one of the diagnoses listed above; **and**
3. Prescriber provides medical justification for pancreatic enzyme replacement therapy; **and**
4. If the request is for Viokace, documentation is provided that Viokace will be used with a proton pump inhibitor.

Oscar may consider approval of Pancreaze and Pertzye when ALL of the following criteria are met:

1. The member has met ALL of the criteria for Creon, Viokace, and Zenpep; **and**
2. The member has tried and failed Creon, Viokace, **and** Zenpep after an adequate period of time at the maximally tolerated dose for each medication; **and**
3. Prescriber provides medical justification as to why Creon, Viokace, **and** Zenpep cannot be tried first.

If the member meets medical criteria above, then the requested medication will be approved for 12 months.

Medical Necessity Criteria for Reauthorization:

All prior authorization reauthorizations will be reviewed on an annual basis to determine the Medical Necessity for continuation of therapy. Authorization may be extended for 12 months if the following criterion is met:

1. Chart documentation of clinical improvement in member's symptoms.

Experimental or Investigational / Not Medically Necessary

The safety and efficacy of Viokace in patients younger than 18 years of age has not been established. Therefore, Viokace is not a covered medication for those under the age of 18 years old. Creon, Viokace, and Zenpep for any other indication is *not covered* by Oscar, as it is considered experimental, investigational, or unproven.

References

1. Zenpep [package insert]. Madison, NJ: Allergan; 2020.
2. Pertzye [package insert]. Bethlehem, PA: Digestive Care, Inc.; 2020.
3. Creon [package insert]. North Chicago, IL: AbbVie; 2020.
4. Viokace [package insert]. Madison, NJ: Allergan; 2020.
5. Pancreaze [package insert]. Campbell, CA: Vivus; 2016.

6. National Pancreas Foundation Patient Information. <https://pancreasfoundation.org/patient-information/ailments-pancreas/exocrine-pancreatic-insufficiency-epi/> (Accessed 6/2020).
7. Borowitz DS, Grand RJ, Durie PR, et al. Use of pancreatic enzyme supplements for patients with cystic fibrosis in the context of fibrosing colonopathy. *Journal of Pediatrics*. 1995; 127: 681-684.
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10. Smyth RL, Ashby D, O’Hea U, et al. Fibrosing colonopathy in cystic fibrosis: results of a case-control study. *Lancet*. 1995; 346: 1247-1251.
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Clinical Guideline Revision / History Information

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