



DRUG (S)	Prialt (ziconotide intrathecal infusion)
Policy #	14134, J-2278
Indications	Prialt is indicated for the management of severe chronic pain in adult patients for whom intrathecal (IT) therapy is warranted, and who are intolerant of or refractory to other treatment, such as systemic analgesics, adjunctive therapies, or IT morphine.
CRITERIA	 ConnectiCare considers Prialt medically necessary for those who meet all of the following criteria: Member is 18 years of age or older Member has severe chronic pain for whom intrathecal (IT) therapy is warranted Member is intolerant to, or had treatment failure of all the following: systemic analgesics, adjunctive therapies, and intrathecal morphine The ordering physician has expertise in pain management
LIMITATIONS	 If the above criteria are met initial authorization will be given for 3 months. Subsequent authorization (up to 6 months) will be based on documentation provided by the physician on pain control and effectiveness. Doses above 19.2 μg/day (0.8 μg/hr.) will not be approved. Prialt is contraindicated in members with any other concomitant treatment or medical condition that would render intrathecal administration hazardous. Contraindications to the use of intrathecal analgesia include the presence of infection at the microinfusion injection site, uncontrolled bleeding diathesis, and spinal canal obstruction that impairs circulation of CSF. Prialt is contraindicated in members with a pre-existing history of psychosis.
REFERENCES	Prialt full prescribing information Elan Pharmaceuticals, Inc. San Diego <u>Prialt Prescribing Information</u>
P&T REVIEW HISTORY	6/07, 6/08, 9/09, 9/10, 12/11, 10/12, 10/13, 10/14, 11/15, 11/16, 11/17, 11/18
REVISION RECORD	11/12, 4/20 (Age Restrictions (≥ 18 y/o), Limitations added #3,4 per FDA Label)