



Prior Authorization Approval Criteria
Department of Pharmacy Services

Generic Name: Oxandrolone

Brand Name: Oxandrin

Medication Class: Anabolic Steroid

FDA Approved Uses: Adjunctive therapy to promote weight gain after weight loss following extensive surgery, chronic infections, or severe trauma, and in some patients who, without definite pathophysiologic reasons, fail to gain or to maintain normal weight; to offset protein catabolism with prolonged corticosteroid administration; relief of bone pain associated with osteoporosis

Usual Dose: Adult: 2.5-20 mg daily in divided doses 2-4 times/day
Geriatric: 5mg twice a day.

Duration of Therapy: a course of therapy of 2-4 weeks is usually adequate. This may be repeated intermittently as indicated. (The duration will depend on the response of the patient and the possible appearance of adverse reactions. Therapy should be intermittent.)

Criteria for Use: *(bullet points below are all inclusive unless otherwise noted)*

- Must have one of the following diagnosis:
 - Used as an adjunctive therapy to promote weight gain following:
 - Extensive Surgery
 - Chronic Infection
 - Severe Trauma
- Or
- Therapy to offset protein catabolism associated with long-term use of corticosteroids
- Or
- Treatment of bone pain associated with osteoporosis

Contraindications:

- Known or suspected carcinoma of the prostate or the male breast.
- Carcinoma of the breast in females with hypercalcemia (anabolic steroids stimulate osteolytic bone resorption).
- Pregnancy (Pregnancy Category X)
- Hypersensitivity to the drug
- Nephrosis
- Hypercalcemia



Not Approved if:

- Patient has any contraindications to Oxandrin
- Patient does not meet above criteria
- Being used to enhance athletic performance. Being used to enhance athletic performance. Anabolic steroids are considered **not medically necessary** to increase muscle strength or muscle size to enhance performance. Performance enhancement is not considered to be the treatment of a disease or injury.

Notes:

- May cause peliosis hepatitis, liver cell tumors, and blood lipid changes
- May stunt bone growth in children
- Oxandrolone may increase half-life of S-warfarin from 26 hours to 48 hours. Bioavailability is also increased. Warfarin dose may need decreased significantly (80% to 85%). Monitoring is necessary for oral anticoagulants.
- Oxandrolone may inhibit metabolism of oral hypoglycemic agents; in patients with edema, concomitant administration with adrenal cortical steroids or ACTH may increase edema.
- Monitoring: Liver function tests, cholesterol profile, hemoglobin/hematocrit; in children: radiographs of left wrist every 6 months; adult females: signs of virilization, and urine and serum calcium in women with breast cancer.

P&T Approval: _____ Date: _____