



Prior Authorization Approval Criteria

Sancuso (granisetron)

Generic name:	Granisetron
Brand name:	Sancuso
Medication class:	5-HT3 receptor antagonist
FDA-approved uses:	Prevention of nausea and vomiting in patients receiving moderately and/or highly emetogenic chemotherapy for up to 5 consecutive days.
Available dosage forms:	Transdermal patch containing 34.3 mg of granisetron.
Usual dose:	One patch applied to the upper outer arm 24 hours before chemotherapy. The patch can be worn for up to 7 days. Remove the patch 24 hours after chemo is completed.
Approximate cost: (based on AWP 2009)	\$356.25/patch
Duration of therapy:	For duration of chemotherapy regimen

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

- Patient must be receiving chemotherapy.
- Tried and failed or intolerant to at least one oral 5-HT3 antagonists: generic granisetron, generic ondansetron, Aloxi, Anzemet.
- Tried and failed or intolerant to Emend.

Or

- Patient unable to tolerate oral dosage forms.

Contraindication:

- Patients with a known hypersensitivity to the drug or to any of its components.

Not approved if:

- Patient does not meet the above-stated criteria.
- Patient has any contraindications to the use of Sancuso.

FCHP Pharmacy and Therapeutics Committee approval: _____

Date: _____

Adopted: 03/11/09