



Prior Authorization Approval Criteria
Department of Pharmacy Services

Generic Name: orlistat

Brand Name: Xenical

Medication Class: Weight loss/ metabolic/ blocks fat absorption

FDA Approved Uses: Management of obesity when used in conjunction with a reduced-calorie diet. Approved for people with a BMI of ≥ 30 , or a BMI of ≥ 27 with a co-morbid condition

Usual Doses: 120mg capsules

Duration of Therapy: Review of patient monthly
(Safety and efficacy beyond 4 years has not been determined)

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

- BMI ≥ 30 or a body weight greater than 140% of ideal weight
- BMI ≥ 27 with a co-morbid condition
 - Co-morbid conditions include:
 - CHD
 - Hypertension
 - Obstructive Sleep Apnea
 - Diabetes mellitus
 - Degenerative joint disease
 - CHF, cor pulmonale or other serious CVD
- Institutional nutritional program has been tried for at least 3 months and not found to be effective
- Behavioral program has been tried for at least 3 months and has not found to be effective
- Diet, exercise and behavioral modification programs must be ongoing with other therapies during pharmacological therapy

Criteria for continuation of Therapy:

- Weight loss of 4 lbs over first 4 weeks must be achieved
- Weight loss of 4 pounds per month should continue, with maximum loss of 10 lbs per month



Not Approved if:

- Patients have not tried instructed-weight loss programs
- Patients have not tried behavioral programs
- Or
- Patients with malabsorption syndrome
- Or
- Patients with cholestasis
- Or
- Patient has hyperoxaluria or calcium oxalate nephrolithiasis
- Or
- Patient is deficient in vitamin D, A and K

P&T Approval: _____ Date: _____