

**Medication Policy Manual**

**Policy No:** dru073

**Topic:** Actiq<sup>®</sup>, fentanyl citrate oral transmucosal lozenges

**Date of Origin:** July 12, 2002

Fentora<sup>®</sup>, fentanyl buccal tablet

Onsolis<sup>™</sup> fentanyl buccal soluble film

**Revised/Effective Date:** September 11, 2009

**Next Review Date:** November 2010

**IMPORTANT REMINDER**

This Medical Policy has been developed through consideration of medical necessity, generally accepted standards of medical practice, and review of medical literature and government approval status.

Benefit determinations should be based in all cases on the applicable contract language. To the extent there are any conflicts between these guidelines and the contract language, the contract language will control.

The purpose of medical policy is to provide a guide to coverage. Medical Policy is not intended to dictate to providers how to practice medicine. Providers are expected to exercise their medical judgment in providing the most appropriate care.

**Description**

The fentanyl transmucosal products Actiq<sup>®</sup> (the lozenge), Fentora<sup>®</sup> (the buccal tablet), and Onsolis (the buccal film) contain the same potent opioid medication used to manage breakthrough cancer pain. Treatment of acute non cancer pain (such as migraine headaches), is contraindicated because of breathing problems which can lead to death if it is used by anyone who is not already taking other opioid pain medicines and their body is not used to these medicines (not opioid tolerant).

## **Policy/Criteria**

- I.** Most contracts require prior authorization approval of fentanyl transmucosal products Actiq (the lozenge), Fentora (the buccal tablet) and Onsolis (the buccal film) prior to coverage. The fentanyl transmucosal products may be considered medically necessary in patients with breakthrough cancer pain who are receiving and are tolerant to opioid therapy when criteria A, B and C below are met.

- A.** Use is for breakthrough cancer pain.

### **AND**

- B.** Other formulary short-acting strong narcotic analgesic alternatives (other than fentanyl) have been ineffective, not tolerated, or contraindicated. Examples include, but are not limited to, concentrated morphine oral solution, oxycodone or hydromorphone.

### **AND**

- C.** Patient is opioid tolerant and taking at least the equivalent of 60 mg of oral morphine daily (see Appendix 1).

## **II.** Administration, Quantity Limitations, and Authorization Period

- A.** Regence considers all of the fentanyl oral transmucosal products to be self-administered medications.

- B.** When prior authorization is approved, fentanyl citrate oral transmucosal lozenges, fentanyl buccal tablets, and fentanyl buccal film, whether alone or in combination, may be authorized in quantities of 90 total doses per month. Quantities exceeding 90 per month are considered not medically necessary.

- C.** Authorization shall be reviewed at least every 6 months to confirm that current medical necessity criteria are met and that the medication is effective.

- III.** Fentanyl transmucosal products are considered investigational when used for any condition other than breakthrough cancer pain, including, but not limited to, the treatment of pain associated with migraine headaches.

## Position Statement

- Fentanyl transmucosal products are potent opioid medications used for the management of breakthrough cancer pain in patients who are receiving and are tolerant to opioid therapy for their underlying chronic pain.<sup>[1, 13, 16]</sup>
- Fentanyl transmucosal products are contraindicated in the management of acute or postoperative pain because of life threatening respiratory depression.<sup>[1, 13, 16]</sup>
- The prescribing information for oral transmucosal fentanyl products include a box warning that the products are to be used only in patients with cancer pain who are tolerant to opioids.<sup>[1, 13, 16]</sup>

The prescribing information for the fentanyl transmucosal products includes a box warning due to differing bioavailability. The dosage strength of the fentanyl is NOT equal to the same dosage strength of fentanyl in other fentanyl-containing products. (So the transmucosal fentanyl products cannot be substituted on a mcg per mcg basis. .<sup>[13, 16]</sup>

- Breakthrough pain is defined as intermittent exacerbations of pain that can occur spontaneously or in relation to specific activity.<sup>[2]</sup>
- Most patients experience fewer than three episodes of breakthrough pain daily<sup>[3]</sup>, so most patients do not need more than 90 doses per month. More frequent use of rescue medication may indicate the need for re-evaluation of the around-the-clock medication.

## *Clinical Efficacy*

- Morphine is considered the gold standard for the treatment of cancer pain.
- There is no reliable evidence that oral transmucosal fentanyl is superior to oral morphine in treating breakthrough pain.
  - \* There is one unreliable trial comparing the efficacy of oral transmucosal fentanyl citrate with morphine in the treatment of breakthrough cancer pain.<sup>[4]</sup> The study is unreliable because of significant flaws including different definitions of pain relief between treatment groups.
- There is no useful evidence supporting the efficacy of fentanyl buccal tablet (Fentora) in the treatment of breakthrough pain. Selection bias, large numbers of drop-outs and a lack of intent to treat analysis (ITT) were the threats to these studies' reliability.

There are no trials comparing fentanyl buccal tablet (Fentora) or film (Onsolis) to other short acting strong narcotic analgesics in the treatment in breakthrough pain.

## *Safety*

- The long-term safety of any of the fentanyl oral transmucosal products in chronic non-cancer pain conditions have not been established.
- Fentanyl transmucosal products must be used in patients who are taking around-the-clock narcotics. Patients they may stop breathing if they are not opioid tolerant. Respiratory depression may occur at any dose of fentanyl transmucosal products.<sup>[1, 13, 16]</sup>
- Fentanyl transmucosal products are contraindicated in management of acute or postoperative pain.<sup>[1, 13 16]</sup>
- Fentanyl transmucosal products should be limited to four or fewer per day once successful dose is found.<sup>[1, 13 16]</sup>

In September 2007 the FDA issued a Public Health Advisory<sup>[15]</sup> warning patients and health care providers about serious safety concerns regarding the use of fentanyl buccal tablet (Fentora). The FDA has received reports regarding the following:

- \* Deaths occurred in patients who did not have cancer and/or were not opioid tolerant.
- \* Patients were prescribed the wrong dose.
- \* Patients took too many fentanyl buccal tablet doses.
- \* Healthcare professionals substituted fentanyl buccal tablet for another fentanyl-containing product that is not equivalent in terms of dosing.

Because fentanyl buccal tablet delivers more fentanyl to the blood than Actiq, substituting Fentora for Actiq using the same dose can result in a fatal overdose.

The manufacturer's label for both fentanyl buccal tablet (Fentora) and film (Onsolis) includes:<sup>[13]</sup>

- \* Fentanyl buccal products are not to be prescribed for the management of acute or postoperative pain including headaches, migraines, and pain due to injury. Life-threatening respiratory depression can occur at any dose of fentanyl in opioid non-tolerant patients.
- \* Deaths have occurred in opioid non-tolerant patients including patients who were given fentanyl buccal tablet for headaches.

- \* The initial dose of fentanyl buccal tablet is 100 mcg for opioid-tolerant patients on around-the-clock opioids being treated with any other pain medication for their breakthrough cancer pain.
- \* Patients should never use more than 2 doses of fentanyl buccal tablet to treat an episode of breakthrough cancer pain. After the second dose of fentanyl buccal tablet, patients must wait a minimum of 4 hours before administering another dose to treat an episode of breakthrough cancer pain.

<b>Appendix 1: Oral morphine equivalents, chronic dosing:<sup>[6]</sup></b>	
<b>Opioid</b>	<b>Equianalgesic Dose</b>
morphine	60 mg per 24 hours
fentanyl	25 mcg per hour (transdermal)
hydrocodone	60 mg per 24 hours
hydromorphone	15 mg per 24 hours
levorphanol	2 mg per 24 hours
meperidine	600 mg per 24 hours
methadone	4 to 8 mg per 24 hours
oxycodone	30 to 40 mg per 24 hours
codeine	360 to 400 mg per 24 hours

## References

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2. Management of Cancer Pain. *AHCPR Publication* No. 94-0592 March 1994
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13. Fentora<sup>®</sup> (fentanyl buccal tablets) Prescribing Information. February 2008. Cephalon, Inc.; West Chester, PA.
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15. FDA Public Health Advisory: Information for Healthcare Professionals Fentanyl Buccal Tablets (marketed as Fentora). Available at: [http://www.fda.gov/cder/drug/InfoSheets/HCP/fentanyl\\_buccal.htm](http://www.fda.gov/cder/drug/InfoSheets/HCP/fentanyl_buccal.htm) accessed October 12, 2007.
16. Onsolis<sup>™</sup> (fentanyl buccal soluble film) prescribing information. July 2009. Meda Pharmaceuticals Inc., Somerset, NJ.

Cross References
<b>Opana ER<sup>®</sup>, oxymorphone, Extended Release dru142</b>
<b>Opioids for Chronic Non-Cancer Pain dru084</b>
<b>OxyContin<sup>®</sup>, oxycodone, Controlled Release dru042</b>

Codes	Number	Description
N/A		