

## Commercial/Healthcare Exchange PA Criteria *Effective: November 7<sup>th</sup>, 2018*

**Prior Authorization:** Doptelet

**Products Affected:** Doptelet (avatrombopag) oral tablets

**Medication Description:**

Doptelet is avatrombopag maleate, a thrombopoietin receptor agonist indicated for the treatment of thrombocytopenia in adult patients with chronic liver disease who are scheduled to undergo a procedure.

Doptelet is provided as an immediate-release tablet. Each Doptelet tablet contains 20 mg avatrombopag (equivalent to 23.6 mg of avatrombopag maleate).

Avatrombopag is an orally bioavailable, small molecule TPO receptor agonist that stimulates proliferation and differentiation of megakaryocytes from bone marrow progenitor cells resulting in an increased production of platelets. Avatrombopag does not compete with TPO for binding to the TPO receptor and has an additive effect with TPO on platelet production.

**Covered Uses:**

1. Treatment of thrombocytopenia in adult patients with chronic liver disease who are scheduled to undergo a procedure.
2. Treatment of thrombocytopenia in adult patients with chronic immune thrombocytopenia who have had an insufficient response to a previous treatment.

**Exclusion Criteria:** N/A

**Required Medical Information:**

- Diagnosis
- Laboratory test indicating thrombocytopenia
- Medication history

**Age Restrictions:** 18 years of age or older

**Prescriber Restrictions:** Prescribed by, or in consultation with, a hematologist.

**Coverage Duration:**

A) Initial Approval: 14 days for thrombocytopenia in chronic liver disease  
30 days for chronic immune thrombocytopenia

B) Extended Approval: Not recommended for thrombocytopenia in chronic liver disease  
6 months for chronic immune thrombocytopenia

**Other Criteria:**

**Chronic Liver Disease:**

Approve if all of the following criteria are met:

- A. Patient is at least 18 years of age; AND
- B. Patient has a diagnosis of chronic liver disease (CLD); AND
- C. Patient has a documented diagnosis of thrombocytopenia; AND



- D. Patient has platelet count of  $< 50 \times 10^9/L$ ; AND
- E. Patient has an invasive procedure scheduled; AND
- F. Patient is scheduled to begin Doptelet 10 to 13 days prior to the procedure, with the procedure occurring 5 to 8 days following the last dose of Doptelet; AND
- G. Patient has had a trial and failure of therapy with, or contraindication to, Mulpleta.

***Chronic Immune Thrombocytopenia:***

Approve if all of the following criteria are met:

- A. The patient is 18 years of age or older; AND
- B. The patient has been diagnosed with chronic immune thrombocytopenia for at least 12 months; AND
- C. The patient has previously received at least 1 therapy for chronic immune thrombocytopenia (i.e. IVIG, Promacta, NPlate); AND
- D. The patient's platelet count is  $< 35,000/mcL$ ; AND
- E. The patient has NOT used IVIG within 1 week of Doptelet initiation; AND
- F. Doptelet will NOT be used in combination with another therapy for chronic immune thrombocytopenia (for example: Promacta, NPlate).

**References:**

1. Doptelet [package insert]. Durham, NC; Dova; May 2018.
2. Mitchell O, Feldman DM, Diakow M, et al. The pathophysiology of thrombocytopenia in chronic liver disease. *Hepat Med.* 2016; 8:39-50. DOI: 10.2147/HMER.S74612.
3. Hayashi H, Beppu T, Shirabe K, et al. Management of thrombocytopenia due to liver cirrhosis: a review. *World J Gastroenterol.* 2014; 20(10): 2595-2605. DOI: 10.3479/wjg.v20.i10.2595.
4. Kaufman RM, Djulbegoric R, Gernsheimer T, et al. Platelet transfusion: A clinical practice guideline from the AABB. *Ann Intern Med.* 2015; 162(3):205-213. DOI: 10.7326/M14-1589

**Policy Revision history**

<b>Rev #</b>	<b>Type of Change</b>	<b>Summary of Change</b>	<b>Sections Affected</b>	<b>Date</b>
1	New Policy	New Policy	All	11/7/2018
2	Update	Added indication for chronic immune Thrombocytopenia and criteria	Covered Uses; Other Criteria	7/31/2019