

INTEGRATED DRUG QUANTITY MANAGEMENT POLICY – STANDARD PER RX

POLICY: zanamivir for oral inhalation (Relenza® – GlaxoSmithKline) Dispensing Limit

DATE REVIEWED: 02/23/2020

DESCRIPTION

Note: Throughout this document the term influenza refers specifically to seasonal influenza.

According to Centers for Disease Control (CDC), four FDA-approved influenza antiviral medications, oral Tamiflu (oseltamivir) and inhaled Relenza (zanamivir), Xofluza (baloxavir) and intravenous Rapivab (peramivir) are recommended for use.¹ These medications have activity against both influenza A and B viruses. Tamiflu and Relenza can be used to treat or prevent influenza. Xofluza and Rapivab are indicated for the treatment of influenza.

Relenza, an antiviral agent that inhibits the influenza (flu) virus (types A and B), is Food and Drug Administration (FDA)-approved for the prophylaxis and treatment of uncomplicated acute illness due to influenza infection in patients who have been symptomatic for 2 days or less.¹ Relenza is FDA-approved for the treatment of influenza in adults and children ≥ 7 years of age, and for use as prophylaxis in patients ≥ 5 years of age.⁴ When administered within 2 days of the onset of symptoms, Relenza has been shown to reduce the duration of uncomplicated influenza A and B illness by approximately 1 day compared to placebo.³

For antivirals to be effective for this use, they should be taken daily for the duration of exposure to the person with influenza or until immunity develops from vaccination.³ Chemoprophylaxis is generally not recommended if more than 48 hours have elapsed since the last exposure to an infectious person. The CDC does not recommend widespread or routine use of antivirals for chemoprophylaxis as this could promote resistance to antiviral medications or reduce the availability of medication for treatment of persons at higher risk for complications or those who are severely ill. For some persons, early treatment and monitoring are an alternate to chemoprophylaxis after a suspected influenza exposure.

Relenza for oral inhalation

Maximum Quantity per RX = 20 inhalations

Treatment: The recommended dose for the treatment of influenza (flu) in adults and children ≥ 7 years of age is 2 inhalations (10mg) twice daily (BID) for 5 days.^{1,3} **Prophylaxis:** The recommended dose of Relenza for the prophylaxis of influenza in the household setting in patients ≥ 5 years is 2 inhalations (10mg) once daily (QD) for 10 days. The recommended dose of Relenza for prophylaxis of influenza in a community setting in adults and adolescents is 2 inhalations (10mg) once daily (QD) for 28 days.³ One inhalation of Relenza delivers 5 mg. Relenza also has data showing it to be effective as prophylaxis after a community outbreak in a nursing home setting dosed both 10 mg QD and 10 mg BID.^{4,5}

Twenty inhalations are adequate to supply one treatment course or 10 days of prophylaxis. Exceptions can be made for patients who require more than 10 days of prophylaxis during a flu season.

CRITERIA

1. For patients who require more than 10 days of *prophylaxis* for influenza, overrides for up to a one month supply (i.e., 60 inhalations = 3 boxes) may be given between the dates of November 1st and March 31st

if there has been a CDC-confirmed outbreak in their community. (A weekly influenza surveillance report by the CDC is available at <http://www.cdc.gov/flu/weekly/index.htm>)

2. Exceptions are not recommended for the *treatment* of influenza as the initial quantity allowed is adequate to supply one standard treatment course.
3. For patients who reside in long-term care facilities and require more than 10 days of prophylaxis, overrides for up to a one month supply (i.e., 60 inhalations = 3 boxes) may be given between the dates of November 1st and March 31st. For control of outbreaks in long-term care facilities, CDC guidelines recommend antiviral chemoprophylaxis for a minimum of two weeks, including vaccinated persons, and continuing up to one week after the last known case was identified.¹

REFERENCES

1. Centers for Disease Control and Prevention. 2019-2020 Influenza Antiviral Medications: Summary for Clinicians. Accessed February 23, 2020. Available at: <http://www.cdc.gov/flu/professionals/antivirals/summary-clinicians.htm>.
2. Uyeki TM, Bernstein HH, Bradley, et al. Clinical Practice Guidelines by the Infectious Diseases Society of America: 2018 Update on Diagnosis, Treatment, Chemoprophylaxis, and Institutional Outbreak Management of Seasonal Influenza. *Clinical Infectious Diseases*, ciy866, <https://doi.org/10.1093/cid/ciy866>. Accessed February 23, 2020.
3. Relenza[®] for oral inhalation [prescribing information]. Research Triangle Park, NC: GlaxoSmithKline; June 2018.
4. Schilling M, Povinelli L, Krause P, et al. Efficacy of zanamivir for chemoprophylaxis of nursing home influenza outbreaks. *Vaccine*. 1998;16:1771-4.
5. Lee C, Loeb M, Phillips A, et al. Zanamivir use during transmission of amantadine-resistant influenza A in a nursing home. *Infect Control Hosp Epidemiol*. 2000;21(11):700-4.