

Division: Pharmacy Policy	Subject: State of Florida's Agency for Health Care Administration's Prior Authorization Criteria
Original Development Date: Original Effective Date: Revision Date:	September 22, 2020

# FIRDAPSE® and RUZURGI® (amifampridine)

## **LENGTH OF AUTHORIZATION**: 6 MONTHS

#### **REVIEW CRITERIA:**

- Patient is  $\geq$  18 years old for Firdapse and 6 to  $\leq$  17 years old for Ruzurgi; **AND**
- Patient has a diagnosis of Lambert-Eaton Myasthenic Syndrome (LEMS) confirmed by a positive anti-P/Q type voltage-gated calcium channel antibody test; AND
- Patient does not have a history of seizures; AND
- Patient does not have a hypersensitivity to amifampridine or another aminopyridine (such as dalfampridine [Ampyra®]).

#### **CONTINUATION OF THERAPY:**

- Patient met initial review criteria; AND
- Patient must demonstrate disease improvement, stabilization, and/or slowing in the rate of decline as a result of the medication; **AND**
- Patient has not experienced any treatment-restricting adverse effects.

### **DOSING AND ADMINISTRATION:**

- Firdapse recommended starting dose: 15 mg to 30 mg daily, taken orally in 3 to 4 divided doses. Every 3 or 4 days, the dose can be increased by 5 mg daily to a recommended maximum daily dose of 80 mg (20 mg maximum per dose).
- Ruzurgi recommended dose:
  - Patients ≥ 45 kg: 15 mg to 30 mg daily, taken orally in divided doses. Increase daily in 5 to 10 mg increments, divided in up to 5 doses daily to a recommended maximum daily dose of 100 mg (30 mg maximum per dose).
  - Patients < 45 kg: 7.5 mg to 15 mg daily, taken orally in divided doses. Increase daily in 2.5 to 5 mg increments, divided in up to 5 doses daily to a recommended maximum daily dose of 50 mg (15 mg maximum per dose).</li>