



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:	April 12, 2019

## **CINRYZE® (human c1 esterase inhibitor)**

**LENGTH OF AUTHORIZATION:** UP TO ONE YEAR

**REVIEW CRITERIA:**

- Must be  $\geq 6$  years of age.
- Must have a diagnosis of hereditary angioedema.
- Treatment for prophylaxis use against angioedema attacks.

**DOSING AND ADMINISTRATION:**

**Adults and adolescents 12 years and older:**

- 1000 units intravenously every 3 or 4 days. Doses up to 2500 units (not to exceed 100units/kg every) 3 to 4 days for non-responders of 1000 units every 3 to 4 days.

**Pediatric patients ages 6-11 years old:**

- 500 units every 3 or 4 days. May adjust according to individual response up to 1000 units every 3 or 4 days.