Carbaglu (carglumic acid)
Effective June 19, 2019

Plan	☒ MassHealth ☒Commercial/Exchange	**Program Type**	☒ Prior Authorization ☐ Quantity Limit ☐ Step Therapy
Benefit	☒ Pharmacy Benefit ☐ Medical Benefit (NLX)		
Specialty Limitations	This medication has been designated specialty and must be filled at a contracted specialty pharmacy.		
Contact Information	**Specialty Medications**		
	All Plans	Phone: 866-814-5506	Fax: 866-249-6155
	Non-Specialty Medications		
	MassHealth	Phone: 877-433-7643	Fax: 866-255-7569
	Commercial	Phone: 800-294-5979	Fax: 888-836-0730
	Exchange	Phone: 855-582-2022	Fax: 855-245-2134
	Medical Specialty Medications (NLX)		
	All Plans	Phone: 844-345-2803	Fax: 844-851-0882
Exceptions	N/A		

Overview
Carbaglu is used for the adjunctive treatment of acute hyperammonemia and maintenance therapy of chronic hyperammonemia due to the deficiency of the hepatic enzyme N-acetylglutamate synthase (NAGS) in adult and pediatric patients

Coverage Guidelines
Authorization may be granted when the following criteria are met:
- Diagnosis is hyperammonemia due to the N-acetylglutamate synthetase (NAGS) deficiency **AND**
- The medication is prescribed by or in consultation with a prescriber who specializes in metabolic disorders

Continuation of Therapy
Reauthorization may be granted when improvement per physician assessment/evaluation and documentation of improved and/or normalized blood ammonia levels for age is received.

Limitations
1. Initial approvals will be granted for 12 months.
2. Reauthorizations will be granted for 36 months.

Appendix

Recommended Dosing:
Acute hyperammonemia (adult & pediatric)
Initial: 100 to 250 mg/kg/day.

Chronic hyperammonemia (adult & pediatric)
Initial: ≤ 100mg/kg/day
Note: tablets should not be swallowed whole or crushed. Please refer to the prescribing information for adult and pediatric oral administration recommendations as well as nasogastric tube administration directions.
Maintenance: dose titrated to the normal plasma ammonia level for age (generally less than 100 mg/kg/day); total daily dose should be divided into 2 to 4 doses and rounded to the nearest 100 mg.

Pharmacist's Notes:

1. Any episode of acute symptomatic hyperammonemia should be treated as a life-threatening emergency & treatment may require hemodialysis in some instances.
2. The management of hyperammonemia due to NAGS deficiency should be done in coordination with medical personnel experienced in metabolic disorders.
3. Plasma ammonia levels should also be maintained within normal range for age through individual dose adjustment.
4. During acute hyperammonemia episodes, protein restrictions and hyper-caloric intake is recommended to block ammonia-generating catabolic pathways. Protein intake can subsequently be increased when ammonia levels have normalized.

References

1. Carbaglu. Package Insert. Revised by manufacturer November 2017. Available on UpToDate
2. Lee B. Clinical features and diagnosis of urea cycle disorders. In: Firth HV (Ed). UpToDate [database on the Internet]. Waltham (MA): UpToDate; 2014. Available from: http://www.utdol.com/utd/index.do.
3. NAGS deficiency [press release on the Internet]. Paris (France): Orphan Europe SARL; 2007 Mar 22. Available from: http://www.orphan-europe.com/Data/ModuleGestionDeContenu/03-Diseases/Hyperammonaemia/16.asp.
4. Carglumic acid. Cross-Discipline Team Leader Review [monograph on the Internet]. Rockville (MD): Center for Drug Evaluation and Research; 2010. Available frfentanom: http://www.accessdata.fda.gov/drugsatfda_docs/nda/2010/022562s000crossr.pdf.
5. Carglumic acid. FDA's Endocrinologic and Metabolic Drugs Advisory Committee Briefing Document: NDA 22-562 [monograph on the Internet]. Rockville (MD): Agency for Healthcare Research and Quality; 2010 Jan. Available from: www.fda.gov/downloads/AdvisoryCommittees/CommitteesMeetingMaterials/Drugs/EndocrinologicandMetabolicDrugsAdvisoryCommittee/UCM196838.pdf.
6. Gessler P, Buchal P, Schwenk HU, Wermuth B. Favourable long-term outcome after immediate treatment of neonatal hyperammonemia due to N-acetylglutamate synthase deficiency. Eur J Pediatr. 2010;169:197-199.
7. N-acetylglutamate synthetase deficiency. National Organization of Rare Diseases (NORD). 2014. Available at: http://www.rarediseases.org/rare-disease-information/rare-diseases/byID/313/viewFullReport

Review History

06/25/12 – Reviewed
06/24/13 – Reviewed
06/23/14 – Reviewed
06/22/15 – Reviewed
06/27/16 – Reviewed

06/26/17 – Reviewed
06/25/18 – Reviewed
06/19/19 – Reviewed

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