Antibiotics – Inhaled aztreonam

Medical policy no. 16.14.00-1

Effective Date: July 1, 2018

Related medical policies:
- Antibiotics – Inhaled aminoglycosides

Medical necessity

<table>
<thead>
<tr>
<th>Drug</th>
<th>Medical Necessity</th>
</tr>
</thead>
<tbody>
<tr>
<td>aztreonam (CAYSTON®)</td>
<td>Cayston® may be considered medically necessary when: Used to treat patients with cystic fibrosis (CF) known to have <em>Pseudomonas aeruginosa</em> in the lungs</td>
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<td></td>
<td>• Non-preferred product requires trial of a preferred inhaled aminoglycoside</td>
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Clinical policy:

<table>
<thead>
<tr>
<th>Drug</th>
<th>Clinical Criteria (Initial Approval)</th>
</tr>
</thead>
</table>
| aztreonam (CAYSTON®)    | Cayston® may be covered when ALL of the following are met:  
1. Diagnosis of cystic fibrosis (CF)  
2. Positive culture for *Pseudomonas aeruginosa* infection in the lungs  
3. NONE of the following:  
   a. Less than (<) 7 years of age  
   b. FEV₁ less than (<) 25% or greater than (>) 75% predicted  
   c. Positive colonization with *Burkholderia cepacia* |

Approve for 12 months

Criteria (Reauthorization)

Documentation of positive clinical response

Approve for 12 months

Dosage and quantity limits

<table>
<thead>
<tr>
<th>Drug Name</th>
<th>Dose and Quantity Limits</th>
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<tbody>
<tr>
<td>Aztreonam (CAYSTON®)</td>
<td>84mL (56 ampules) per 28-days</td>
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</table>

References
