

# PharmNOTES

Summary about new FDA-approved products, new indications, first-time generics, and WHAT IS IN THE PIPELINE. From: OCTOBER 2020

ACCREDITED Pharmacy Benefit Management Expires 12/01/2022

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NEWS .....

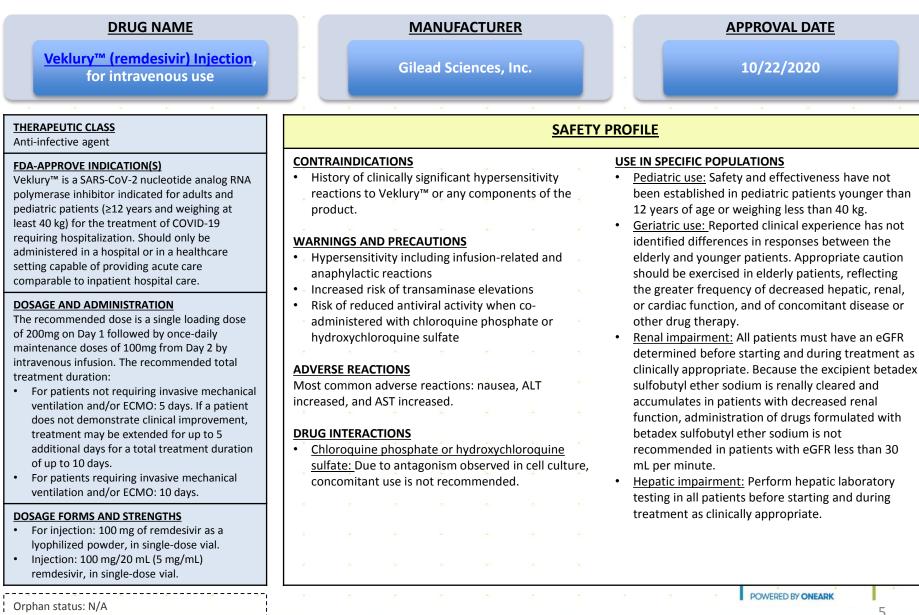
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Drug is	ssue	 Date		F D	Details	11				14	22	14		-		14.1		4
	se of NSA acy at 20 N	10/15/20	020	la a	he FDA is ater. The mniotic f	use of NS luids, and	SAIDs aro	und 20 w omplicatio	eeks or l ons. Prev	ater in pr iously NS	regnancy SAIDs lab	may_caus els_warne	se serious ed to avo	s kidney bid use d	problems luring the	in the fe last thr	etus, low ee (3) me	levels of onths of
					regnancy nformatio								sus. The	FDA <mark>now</mark>	requires	changes	in the pro	escribing
				•		pregnant	women te	o avoid th	e use of N									
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### New FDA Approved Products

DRUG NAME		N	/ANUFA	CTURE	R				<u>A</u>	PPROVA	AL DATE		
Inmazeb™ (atoltivimab, maftivimab, and odesivimab ebgn) Injection, for intravenou use		Regenero	on Phari	maceut	icals, Ind	с.				10/14/	2020		
THERAPEUTIC CLASS					<u>SAFI</u>	ETY F	PROFILE						
Anti-infective agent	CONTRAINDI	CATIONS			2	5		ancy: Za	aire ebolo	<i>avirus</i> inf	ection is li		-
FDA-APPROVE INDICATION(S) Inmazeb™ is a combination of Zaire		AND PRECAUTI					not be	e withhe	eld due to	o pregna			
ebolavirus glycoprotein-directed human monoclonal antibodies indicated for the	Hypersen: Associate	sitivity Reaction d Events	ns Includi	ng Infusio	on-						h <i>Zaire el</i> astfeed d		
treatment of infection caused by <i>Zaire</i> ebolavirus in adult and pediatric patients,	ADVERSE REA	ACTIONS					poten	tial for Z	Zaire ebc	olavirus ti	ansmissio	)n.•	
including neonates born to a mother who is RT-PCR positive for <i>Zaire ebolavirus</i> infection.		on adverse reac tachypnea, and		-	ls, 🖻								
	DRUG INTER	ACTIONS											
The recommended dose is 50 mg of atoltivimab, 50 mg of maftivimab, and 50	<u>live vaccir</u>	ne indicated for s Infection: No											
mg of odesivimab per kg diluted and administered as a single intravenous	have beer	n performed. H e efficacy of th	owever, l	nmazeb™	⁴ may								
infusion.	between	live vaccination	n following	g initiatio	n of								
DOSAGE FORMS AND STRENGTHS		therapy shoul accination guid		cordance	e with								
Injection: 241.7 mg of atoltivimab, 241.7 mg of maftivimab, and 241.7 mg of													
odesivimab per 14.5 mL (16.67 mg/16.67 mg/16.67 mg/16.67 mg per mL) in a single-dose vial.													
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Orphan status: Orphan										ph	ari	m	SIX
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#### **New FDA Approved Products**



## New FDA Approved Formulations, Dosage Forms, Combination Products and Other Differences

•	Drug name / ManufacturerTherapeur classEysuvis™ (loteprednolOphthalmic a					Indicati	ion(s)		Date	te	Со	mment	S 🔸						
<u>etabona</u> Suspensi	<mark>te) Ophth</mark> ion / Kala	<u>almic</u>	Ophtha Cortico	lmic agent; steroid		treatment	Short-term (up to two weeks) treatment of the signs and symptoms of dry eye disease		10/2	26/2020	• whi	ch comes	to be the t	first pres	cription t	n of lotepro therapy sp of people	ecifically	develope	d to 💡
Pharmad	ceuticals, I	nc.									(bra use:	anded and s such as s	generic) v teroid-res	vere alre ponsive	eady avail conjunct	s containir lable in the ivitis, post conjuncti	e market, -operativ	they hav	e other
											Orp	han status	s: N/A						
	tol™ (man		Respira	tory agent;				ce therapy	10/3	30/2020						of mannit		ised only	in adults
	Inhalation Powder, for oral inhalation use /				to improve pulmonary function in adult patients 18				who	o have pas	sed the Bl	RONCHI	OL Toler	ance Test.					
	Chiesi USA, Inc.					years of a with cysti	ge and ol					Although other mannitol-containing drug products were already as the market, they are injection/intravenous solutions (branded and							
																hallenge te I raised int			urinary
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New FDA Approved Indications

Drug name / Manufacturer	Therapeutic class	Previous indication(s)	New indication(s)	Date	÷
Opdivo™ (nivolumab) Injection / Bristol- Myers Squibb Company	Antineoplastic agent; Programmed death receptor-1 (PD-1) blocking antibody	Treatment of melanoma, non-small cell lung cancer, small cell lung cancer, renal cell carcinoma, classical Hodgkin lymphoma, squamous cell carcinoma of the head and neck, urothelial carcinoma, MSI-H or dMMR metastatic colorectal cancer, hepatocellular carcinoma, and esophageal squamous cell carcinoma	In combination with Yervoy™ (ipilimumab), for the first-line treatment of adult patients with unresectable malignant pleural mesothelioma (MPM)	10/02/2020	
Wakix™ (pitolisant) Tablets / Harmony Biosciences, LLC	Central nervous system agent	Treatment of excessive daytime sleepiness (EDS) in adult patients with narcolepsy	Treatment of cataplexy in adult patients with narcolepsy	10/13/2020	
Keytruda™ (pembrolizumab) for Injection / Merck	Antineoplastic agent; Programmed death receptor-1 (PD-1) blocking antibody	Treatment of melanoma, non-small cell lung cancer, small cell lung cancer, head and neck squamous cell carcinoma, classical Hodgkin lymphoma, primary mediastinal large B-cell lymphoma, urothelial carcinoma, microsatellite instability-high cancer, gastric cancer, esophageal cancer, cervical cancer, hepatocellular carcinoma, Merkel cell carcinoma, renal cell carcinoma, endometrial carcinoma, tumor mutational burden-high (TMB-H) cancer, and cutaneous squamous cell carcinoma	As monotherapy for the treatment of adult patients with relapsed or refractory classical Hodgkin lymphoma	10/14/2020	
Venclexta™ (venetoclax) Tablets / AbbVie Inc.	Antineoplastic agent; B- cell lymphoma-2 (BCL-2) inhibitor	Treatment of adult patients with chronic lymphocytic leukemia (CLL) or small lymphocytic lymphoma (SLL)	<ul> <li>In combination with azacitidine, or decitabine, or low-dose cytarabine (LDAC) for the treatment of newly diagnosed acute myeloid leukemia (AML) in adults 75 years or older, or who have comorbidities that preclude use of intensive induction chemotherapy</li> <li>Full approval granted; Venclexta was previously granted provisional approval in this setting under the FDA's accelerated approval program in November 2018</li> </ul>	10/16/2020	

### New First Time Generic Drug Approval

Drug	name /	Manuf	acturer		Thera	apeutic	Class	. Ir	ndicatio	n(s)		2			Generi for:	с	Date:		÷
Oral Sol	ution 3 gr	ams (base	Granules e)/single-d España, S.I	ose .	Anti-in	fective ag	gent	U	ncomplica	ted urinar	y tract inf	ection in	women		Monurol	*1	10/06/2	2020	
	Acid Topic ceuticals		15% / Teva	1	Derma	tological	agent	R	osacea	1		5	i.	Ť.	Finacea		10/07/2	2020	
	Internatio		n 5% / Per Encube Et		Antifur	ngal		0	nychomyc	osis of the	toenails				Kerydin		10/13/2	2020	
Pomalid and 4 m	lomide Ca	enridge Pl	mg, 2 mg, 1 harmaceut ties Ltd.		Antine	oplastic a	gent	•	after fail	sarcoma, ure of HA myeloma	ART	tive or Al	DS-relate	d disease	Pomalyst		10/30/2	2020	
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### PIPELINE .....

Drug r	name /	Manuf	acturer	Da	te 🚬	4	Indicatio	n(s)		Con	ments								
Pacritini	b / CTI Bio	oPharma	Corp.	10/	13/2020		Treatment	for: Myeld	ofibrosis	devel		or the tre				tinase inhib ients with s			•
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	• 💿 P	harm	nacist	Lette	r ( <u>wv</u>	vw.ph	arma	acistle	etter.co	<mark>om</mark> )		1	1				
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