Eculizumab (SOLIRIS) for Neuromyelitis Optica Spectrum Disorders (NMOSD)
Criteria for Use
June 2023

VA Pharmacy Benefits Management Services, Medical Advisory Panel, and VISN Pharmacist Executives

The following recommendations are based on medical evidence, clinician input, and expert opinion. The content of the document is dynamic and will be revised as new information becomes available. The purpose of this document is to assist practitioners in clinical decision-making, to standardize and improve the quality of patient care, and to promote cost-effective drug prescribing. THE CLINICIAN SHOULD USE THIS GUIDANCE AND INTERPRET IT IN THE CLINICAL CONTEXT OF THE INDIVIDUAL PATIENT. INDIVIDUAL CASES THAT ARE EXCEPTIONS TO THE EXCLUSION AND INCLUSION CRITERIA SHOULD BE ADJUDICATED AT THE LOCAL FACILITY ACCORDING TO THE POLICY AND PROCEDURES OF ITS P&T COMMITTEE AND PHARMACY SERVICES.

The Product Information should be consulted for detailed prescribing information.

Exclusion Criteria

If the answer to ANY item below is met, then the patient should NOT receive eculizumab.

☐ *Neisseria meningitidis, Neisseria gonorrhoeae, Haemophilus influenzae,* or *Streptococcus pneumoniae* active infection

☐ Concomitant therapy with rituximab or any other complement inhibitor such as ravulizumab

☐ Concomitant chronic therapy with intravenous immunoglobulin or plasma exchange (use of these treatments in exacerbations is reasonable while on eculizumab)

Inclusion Criteria

All of the following must be met.

☐ Care provided by VA or VA Community Care neurology provider.

☐ Patient is vaccinated against pneumococcal disease and *Haemophilus influenzae type B*

☐ Patient is vaccinated with BOTH the protein conjugate ACWY meningococcal vaccine and the type B meningococcal vaccine (in emergent cases begin vaccination series at initial dosing and provide antibiotic prophylaxis until 2 weeks after vaccination)

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