

# Fecal Microbiota Spores, Live - brpk (VOWST)

## Criteria for Use

Updated Feb 2025

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 UTILIZE 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. See the VA National PBM-MAP-VPE Monograph on this drug at [www.pbm.va.gov](http://www.pbm.va.gov) or <http://vawww.pbm.va.gov> for further information.*

**Exclusion Criteria** *If the answer to ANY item below is met, then the patient should NOT receive VOWST.*

- History of severe allergic reactions to any component of VOWST
- Asymptomatic *Clostridioides difficile* colonization
- Absolute neutrophil count < 500 cells/mm<sup>3</sup>
- Is likely to require antibiotic therapy for a condition other than *Clostridioides difficile* infection (CDI) OR planned surgery requiring perioperative antibiotics within 8 weeks after treatment
- Inability to use magnesium citrate or polyethylene glycol pretreatment or comply with administration on an empty stomach prior to the first meal of the day

**Inclusion Criteria** *The answers to ALL OF THE FOLLOWING must be fulfilled in order to meet criteria.*

- At least 2<sup>nd</sup> episode of recurrent CDI (3<sup>rd</sup> episode overall) in the previous 12 months (defined as CDI recurring within 8 weeks of completion of standard CDI treatment)
- Successful treatment of current episode of CDI with standard of care CDI antibiotics (fidaxomicin or oral vancomycin)
- Within 2-4 days after completion of standard of care CDI antibiotics (fidaxomicin or oral vancomycin)
- At least one episode of CDI was treated with fidaxomicin, unless not tolerated or contraindicated

### Dosage and Administration

- Patients should be given 296 mL of magnesium citrate on the day before and at least 8 hours prior to the FIRST dose of VOWST (250 mL of polyethylene glycol can be used as an alternative in patients with impaired kidney function)
- Patients should not eat or drink, except small amount of water, for at least 8 hours prior to the FIRST dose
- Dose is 4 capsules orally on an empty stomach prior to the first meal of the day once daily for 3 consecutive days.

### Supplemental Information

- VOWST has not been studied and is not FDA indicated for an initial episode of CDI
- VOWST should be avoided in patients with an absolute neutrophil count < 500 cells/mm<sup>3</sup>. Further data is required before making a recommendation in this population.