

# Avapritinib (AYVAKIT) in Gastrointestinal Stromal Tumors

## Criteria for Use

### November 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 ANY of the following are selected, the patient will NOT meet criteria for avapritinib.

- Unmanageable drug-drug interaction
- Pregnancy
- Lactating

## Inclusion Criteria

ALL of the following must be selected to meet criteria:

- Histologically confirmed gastrointestinal stromal tumor (GIST)
- GIST is unresectable or metastatic
- Prescribed and monitored by a VA / VA Community Care oncologist
- Goals of care and role of Palliative Care consult have been discussed and documented.
- Eastern Cooperative Oncology Group (ECOG) performance status of 0 or 2

## Additional Inclusion Criteria

At least ONE of the following must be selected to meet criteria:

- Mutational testing shows platelet-derived growth factor receptor alpha (PDGFRA) exon 18 mutation insensitive to imatinib including PDGFRA D842V
- Progressive disease on prior trials of imatinib, sunitinib, regorafenib AND dose-escalated ripretinib

## Additional Inclusion Criteria

Select if appropriate.

- For patients who can become pregnant and patients with partners who can become pregnant: Counseling provided on potential risks vs benefits of treatment and the use of effective contraception.
- For patients who are breastfeeding/lactating: Advised to avoid providing breastmilk during therapy and for 2 weeks after the final dose.

## Other Justification

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