

# Denosumab (XGEVA)

## Criteria for Use in Cancer-Related Indications

### June 2024

VA Pharmacy Benefits Management Services and National Formulary Committee

*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.

See the VA National Formulary Committee Monograph on this drug at the [PBM INTRAnet](#) site for further information.

### Exclusion Criteria

If the answer to **ANY** item below is met, then the patient should NOT receive denosumab (XGEVA):

- Hypocalcemia (corrected calcium at or below lower limit of normal) that has not been effectively corrected.
- Documentation of the need for an invasive dental procedure (e.g., tooth extraction, dental implant, and/or dental infection treatment) or recent procedure that has not fully healed
- Acute dental issue identified by history or clinician mouth examination
- Receiving denosumab (PROLIA), zoledronic acid, or pamidronate
- Pregnancy

### Inclusion Criteria<sup>1</sup>

**One** of the following criteria must be met:

- Prevention of skeletal-related events in patients with multiple myeloma refractory or intolerant to zoledronic acid (or if zoledronic acid contraindicated based on renal function)
- Prevention of skeletal-related events in patients with bone metastases from solid tumors refractory or intolerant to zoledronic acid (or if zoledronic acid contraindicated based on renal function)
- Treatment of unresectable giant cell tumor of the bone
- Treatment of hypercalcemia of malignancy refractory to zoledronic acid therapy (or if zoledronic acid contraindicated based on renal function)

1. Patients with an eGFR <30 ml/minute are at increased risk of hypocalcemia

### Additional Inclusion Criteria<sup>2</sup>

The following criterion must be met:

- Prescriber is a VA/VA Community Care hematologist, oncologist, urologist, hospitalist, or endocrinologist

2. Note denosumab (XGEVA) dosed 120 mg subcutaneous every 4 weeks. Do not confuse with denosumab (Prolia).

### Additional Inclusion Criteria (Select if applicable)

- 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 during therapy and for 5 months after stopping treatment.

Updated version may be found at [PBM INTRAnet](#)

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**Other Justification**

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