

Mirvetuximab soravtansine-gynx (ELAHERE)

Criteria for Use

March 2025

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 mirvetuximab.

- Moderate to severe hepatic impairment defined total bilirubin > 1.5x Upper Limit of Normal (unless Gilbert syndrome with total bilirubin \geq 3x Upper Limit of Normal)
- Severe renal impairment (estimated CrCl 15-30 ml/min)
- Active or chronic corneal or ocular conditions requiring ongoing treatment
- Peripheral neuropathy > Grade 1
- Non-infectious interstitial lung disease, including pneumonitis
- Active or uncontrolled infection
- Unmanageable drug interaction identified
- Known pregnancy
- Lactating

Inclusion Criteria

All of the following criteria must be met.

- Diagnosis of epithelial ovarian, fallopian tube or primary peritoneal cancer
- Received at least one prior systemic therapy
- Disease considered platinum-resistant
- Tumor is folate receptor-alpha (FR α) positive (\geq 75% viable tumor cells with mod (2+) or strong (3+) staining intensity)
- Use of mirvetuximab is as monotherapy or in combination with bevacizumab (or biosimilar)
- Care is provided by a VA/VA Community Care gynecologic oncology or medical oncology provider
- Goals of care and role of Palliative Care consult have been discussed and documented
- Eastern Cooperative Oncology Group (ECOG) Performance Status 0 – 1
- Baseline ophthalmology exam including visual acuity and slit lamp exam

Additional Inclusion Criteria *select if applicable*

- For females who can become pregnant: Counseling provided on potential risks vs benefits of treatment and the use of effective contraception during therapy and for 7 months after stopping treatment.
- For females who are lactating: breastfeeding/providing breastmilk to an infant is not recommended during therapy and for 1 month after the last dose.

Other Justification

Prepared Jan 2025: Kelly Echevarria, Pharm.D., BCIDP. Contact: Berni Heron, Pharm.D., BCOP, National Clinical Pharmacy Program Manager, VA Pharmacy Benefits Management Services (12PBM)