

# Vorasicidenib (VORANIGO)

## 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 vorasicidenib.

- High-risk features (uncontrolled seizures, neurocognitive deficits, contrast-enhancing lesion)
- Unmanageable drug interactions
- Pregnancy
- Lactating

#### Inclusion Criteria

The following criteria must be met:

- Grade 2 astrocytoma or oligodendroglioma (MRI residual non-enhancing disease) with an IDH1 or IDH2 mutation following surgery (biopsy, sub-total resection, or gross total resection)

#### Additional Inclusion Criteria

All of the following criteria must be met:

- Care is provided by a VA/VA Community Care oncology provider
- Eastern Cooperative Oncology Group (ECOG) performance status 0-2

#### Additional Inclusion Criteria (if applicable)

- For females who can become pregnant and males 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 3 months after stopping treatment

#### Other Justification

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

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