



Apokyn® (apomorphine)

When requesting Apokyn® (apomorphine), the individual requiring treatment must be diagnosed with an FDA-approved indication and meet the specific coverage guidelines and applicable safety criteria for the covered indication.

FDA-Approved Indication

Apokyn® (apomorphine) is indicated for the acute, intermittent treatment of hypomobility “off” episodes (“end-of-dose wearing off” and unpredictable “on/off” episodes) with advanced Parkinson’s disease.

Coverage Guidelines

The individual must meet **all** of the following criteria for approval:

- Is diagnosed with advanced Parkinson’s disease
- Is experiencing “off” episodes such as muscle stiffness, slow movements, or difficulty starting movements
- Is currently receiving carbidopa/levodopa therapy
- Has previously tried 2 other treatments for “off” episodes (e.g., entacapone, rasagiline, pramipexole, ropinirole, tolcapone, Xadago)
- Apokyn is prescribed by or in consultation with a neurologist

Approval duration: 12 months

Dosing Recommendation

Apokyn is indicated for subcutaneous administered only.

The recommended starting dose is 0.2 mL (2 mg). Dose should be titrated on the basis of effectiveness and tolerance, up to a maximum recommended dose of 0.6 mL (6 mg).

References

1. Apokyn® subcutaneous injection [prescribing information] Louisville, KY: US WorldMeds; April 2020.
2. Data on file. Apokyn® (apomorphine hydrochloride injection) AMCP Dossier prepared by Formulary Resources, LLC. Received on April 18, 2019.
3. Connolly BS, Lang AE. Pharmacological treatment of Parkinson disease. A review. *JAMA*. 2014;311(16):1670-1683.
4. National Institute of Neurological Disorders and Stroke (NINDS) Parkinson’s disease information page. Page last updated: March 27, 2019. Available at: <https://www.ninds.nih.gov/Disorders/All-Disorders/Parkinsons-Disease-Information-Page>. Accessed on June 12, 2019.
5. Pahwa R, Factor SA, Lyons KE, et al. Practice parameter: Treatment of Parkinson disease with motor fluctuations and dyskinesia (an evidence-based review). Report of the quality standards subcommittee of the American Academy of Neurology. *Neurology*. 2006;66:983-995.