BlueCross BlueShield of Arizona
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MEDICAL COVERAGE GUIDELINES
SECTION: DRUGS

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ZOMETA® (zoledronic acid) INJECTION

Coverage for services, procedures, medical devices and drugs are dependent upon benefit eligibility as outlined in the member's specific benefit plan. This Medical Coverage Guideline must be read in its entirety to determine coverage eligibility, if any.

The section identified as "Description" defines or describes a service, procedure, medical device or drug and is in no way intended as a statement of medical necessity and/or coverage.

The section identified as "Criteria" defines criteria to determine whether a service, procedure, medical device or drug is considered medically necessary or experimental or investigational.

State or federal mandates, e.g., FEP program, may dictate that any drug, device or biological product approved by the U.S. Food and Drug Administration (FDA) may not be considered experimental or investigational and thus the drug, device or biological product may be assessed only on the basis of medical necessity.

Medical Coverage Guidelines are subject to change as new information becomes available.

For purposes of this Medical Coverage Guideline, the terms "experimental" and "investigational" are considered to be interchangeable.

Description:

Zometa® is a bisphosphonate that inhibits osteoclast-mediated bone resorption. It may be used in the treatment of individuals with multiple myeloma and tumor-induced hypercalcemia, and used with chemotherapy for metastatic bone lesions from solid tumors.

ZOMETA (zoledronic acid) INJECTION (cont.)

Criteria:

- FDA-approved dosage of Zometa injection is considered ***medically necessary*** for an individual with documentation of **ANY** of the following:

  1. Cancer diagnosis and tumor related hypercalcemia with albumin-corrected calcium (cCa) level of greater than or equal to 12 mg/dL [3.0 mmol/L]
  2. Multiple myeloma with bone involvement (e.g., bone metastases, osteolytic lesions, osteopenia)
  3. Bone metastases from solid tumors (e.g., breast cancer, kidney cancer, lung cancer, prostate cancer, thyroid cancer, and others) in conjunction with standard antineoplastic therapy. Prostate cancer should have progressed after treatment with at least one hormonal therapy.

- Zometa injection for all other indications not previously listed or if above criteria not met is considered ***experimental or investigational*** based upon:

  1. Lack of final approval from the Food and Drug Administration, and
  2. Insufficient scientific evidence to permit conclusions concerning the effect on health outcomes, and
  3. Insufficient evidence to support improvement of the net health outcome, and
  4. Insufficient evidence to support improvement of the net health outcome as much as, or more than, established alternatives, and
  5. Insufficient evidence to support improvement outside the investigational setting.

ZOMETA (zoledronic acid) INJECTION (cont.)

Resources:

1. Zometa® (zoledronic acid). Package Insert. Accessed 09/23/2013.

FDA Product Approval Information for Zometa Injection:

- FDA-approved indication: For the treatment of hypercalcemia of malignancy, multiple myeloma and bone metastases of solid tumors, in conjunction with standard antineoplastic therapy. Prostate cancer should have progressed after treatment with at least one hormonal therapy.

- FDA-approved dosage: The maximum recommended dose of Zometa in hypercalcemia of malignancy (albumin-corrected serum calcium ≥12 mg/dL [3.0 mmol/L]) is 4 mg. The 4-mg dose must be given as a single-dose intravenous infusion over no less than 15 minutes. Patients who receive Zometa should have serum creatinine assessed prior to each treatment.

  Dose adjustments of Zometa are not necessary in treating patients for hypercalcemia of malignancy presenting with mild-to-moderate renal impairment prior to initiation of therapy (serum creatinine <400 µmol/L or <4.5 mg/dL). Patients should be adequately rehydrated prior to administration of Zometa.

  Retreatment with Zometa 4 mg may be considered if serum calcium does not return to normal or remain normal after initial treatment. It is recommended that a minimum of 7 days elapse before retreatment, to allow for full response to the initial dose. Renal function must be carefully monitored in all patients receiving Zometa and serum creatinine must be assessed prior to retreatment with Zometa.

ZOMETA (zoledronic acid) INJECTION (cont.)

Resources: (cont.)

FDA Product Approval Information for Zometa Injection: (cont.)

- FDA-approved dosage: The recommended dose of Zometa in patients with multiple myeloma and metastatic bone lesions from solid tumors for patients with creatinine clearance >60 mL/min is 4 mg infused over no less than 15 minutes every 3-4 weeks. The optimal duration of therapy is not known.

  Upon treatment initiation, the recommended Zometa doses for patients with reduced renal function (mild and moderate renal impairment) are listed in Table 1. These doses are calculated to achieve the same AUC as that achieved in patients with creatinine clearance of 75 mL/min.

Baseline Creatinine Clearance (mL/min)	Zometa Recommended Dose*
>60	4 mg
50-60	3.5 mg
40-49	3.3 mg
30-39	3 mg
*Doses calculated assuming target AUC of 0.66(mg•hr/L) (CrCl = 75 mL/min)	

  During treatment, serum creatinine should be measured before each Zometa dose and treatment should be withheld for renal deterioration. Treatment should be resumed only when the creatinine returns to within 10% of the baseline value.

  Zometa is not recommended in patients with severe renal impairment (creatinine clearance less than 30 mL/min).

  Patients should receive supplemental oral calcium and vitamin D.