# Reauthorization of XYWAV®



(calcium, magnesium, potassium, and sodium oxybates) oral solution @

This form provides criteria to help facilitate the reauthorization of XYWAV, but does not guarantee it.

1.	Dosage	(4.5g-9g per night): <sup>1</sup>	 	

Bedtime dose: \_\_\_\_\_ 2.5 to 4 hours later: \_\_\_\_\_

2. Patient meets diagnostic criteria (ICSD-3 and DSM-5) for narcolepsy with cataplexy (patients 7 or older), narcolepsy with EDS (patients 7 or older), or idiopathic hypersomnia in adults. Select one and include ESS, SNS or IHSS score if known.

Narcolepsy with cataplexy (ICD: G47.411) <sup>1-3</sup>						
Baseline authorization (ESS score):	Testing Date:					
Baseline authorization (SNS score):	Testing Date:					
Narcolepsy without cataplexy (ICD: G47.419) <sup>2,3</sup> Baseline authorization (ESS score):	Testing Date:					
Idiopathic hypersomnia (ICD: G47.11 or G47.12) <sup>1-4</sup>						
Baseline authorization (ESS score):	Testing Date:					
Baseline authorization (IHSS score):	Testing Date:					

# Indications and Usage

XYWAV<sup>®</sup> (calcium, magnesium, potassium, and sodium oxybates) oral solution, CIII, 0.5 g/mL total salts (equivalent to 0.413 g/mL of oxybate), is indicated for the treatment of cataplexy or EDS in patients 7 years of age and older with narcolepsy and for the treatment of IH in adults.

# **Important Safety Information**

WARNING: CENTRAL NERVOUS SYSTEM DEPRESSION and ABUSE AND MISUSE.

<u>Central Nervous System Depression</u>
 XYWAV is a CNS depressant. Clinically significant respiratory depression and obtundation may occur in patients treated with XYWAV at recommended doses. Many patients who received XYWAV during clinical trials in narcolepsy and idiopathic hypersomnia were receiving CNS stimulants.

<u>Abuse and Misuse</u>

The active moiety of XYWAV is oxybate or gamma-hydroxybutyrate (GHB). Abuse or misuse of illicit GHB, either alone or in combination with other CNS depressants, is associated with CNS adverse reactions, including seizure, respiratory depression, decreases in the level of consciousness, coma, and death.

Because of the risks of CNS depression and abuse and misuse, XYWAV is available only through a restricted program under a Risk Evaluation and Mitigation Strategy (REMS) called the XYWAV and XYREM REMS.

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3.	Is there a proven reduction in the patient's sleepiness? <sup>1</sup> Yes No
	If known, please include patient's ESS score:
	Testing Date:
	For IH patients, if known, please include patient's IHSS score:
	Testing Date:
4.	Patient's cataplexy diary (for type 1 narcolepsy patients with cataplexy):
	Improvement: Yes No Stabilization: Yes No
5.	Select follow-up recommendation (select one):
	3 month follow-up: Next visit date:
	6 month follow-up: Next visit date:
	12 month follow-up: Next visit date:
	Other: Next visit date:

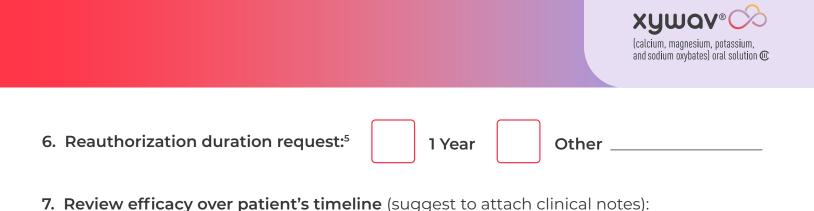
# Important Safety Information (cont.)

#### **Contraindications**

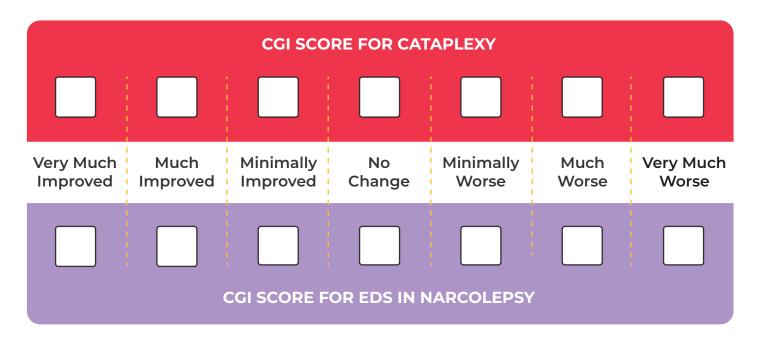
XYWAV is contraindicated in combination with sedative hypnotics or alcohol and in patients with succinic semialdehyde dehydrogenase deficiency.

#### Warnings and Precautions

CNS Depression: Use caution when considering the concurrent use with other CNS depressants. If concurrent use is
required, consider dose reduction or discontinuation of one or more CNS depressants (including XYWAV). Consider
interrupting XYWAV treatment if short-term opioid use is required. After first initiating treatment and until certain
that XYWAV does not affect them adversely, caution patients against hazardous activities requiring complete mental
alertness or motor coordination such as operating hazardous machinery, including automobiles or airplanes. Also
caution patients against these hazardous activities for at least 6 hours after taking XYWAV. Patients should be queried
about CNS depression-related events upon initiation of XYWAV therapy and periodically thereafter.



- 8. Optional for narcolepsy patients: Clinical Global Impression Score (CGI) Has the patient's daytime and nighttime symptoms improved from their baseline levels?<sup>1</sup> (Select one score for cataplexy and one score for EDS in narcolepsy.)



# Important Safety Information (cont.)

#### Warnings and Precautions (cont.)

- Abuse and Misuse: XYWAV is a Schedule III controlled substance. The rapid onset of sedation, coupled with the amnestic features of GHB particularly when combined with alcohol, has proven to be dangerous for the voluntary and involuntary user (eg, assault victim).
- Respiratory Depression and Sleep-Disordered Breathing: XYWAV may impair respiratory drive, especially in patients with compromised respiratory function. In overdoses of oxybate and with illicit use of GHB, life-threatening respiratory depression has been reported. Increased apnea and reduced oxygenation may occur with XYWAV administration in adult and pediatric patients. A significant increase in the number of central apneas and clinically significant oxygen desaturation may occur in patients with obstructive sleep apnea treated with XYWAV. Prescribers should be aware that sleep-related breathing disorders tend to be more prevalent in obese patients, in men, in postmenopausal women not on hormone replacement therapy, and among patients with narcolepsy.

If you require additional assistance or information, please contact your Jazz Access and Reimbursement Manager. You can also call a Reimbursement Specialist with the Certified Pharmacy at 1-866-997-3688.

### Important Safety Information (cont.)

#### Warnings and Precautions (cont.)

- Depression and Suicidality: In clinical trials in adult patients with narcolepsy and IH, depression and depressed mood were reported in patients treated with XYWAV. In most cases, no change in XYWAV treatment was required. Two suicides and two attempted suicides occurred in adult clinical trials with oxybate (same active moiety as XYWAV). One patient experienced suicidal ideation and two patients reported depression in a pediatric clinical trial with oxybate. Monitor patients for the emergence of increased depressive symptoms and/or suicidality while taking XYWAV, which require careful and immediate evaluation.
- Other Behavioral or Psychiatric Adverse Reactions: Monitor patients for impaired motor/cognitive function or the emergence of or increase in anxiety and/or confusion. The emergence or increase in the occurrence of behavioral or psychiatric events in patients taking XYWAV should be carefully monitored.
- Parasomnias: In clinical trials, parasomnias including sleepwalking were reported in adult patients treated with XYWAV. Parasomnias, including sleepwalking, also have been reported in a pediatric clinical trial with sodium oxybate (same active moiety as XYWAV) and in postmarketing experience with sodium oxybate. Episodes of sleepwalking should be fully evaluated and appropriate interventions considered.

#### Most Common Adverse Reactions

The most common adverse reactions (occurring in ≥5% of XYWAV-treated patients in adult clinical trials in either narcolepsy or IH) were nausea, headache, dizziness, anxiety, insomnia, decreased appetite, hyperhidrosis, vomiting, diarrhea, dry mouth, parasomnia, somnolence, fatigue, and tremor.

In the pediatric clinical trial with XYREM (same active moiety as XYWAV) in patients 7 years of age and older with narcolepsy, the most common adverse reactions ( $\geq$ 5%) were nausea (20%), enuresis (19%), vomiting (18%), headache (17%), weight decreased (13%), decreased appetite (9%), dizziness (8%), and sleepwalking (6%). The safety profile in pediatric patients with XYWAV is expected to be similar to that of adult patients treated with XYWAV and to that of pediatric patients treated with XYREM.

#### Please click here to see the full Prescribing Information.

#### For more information on XYWAV, visit www.xywavhcp.com.

#### Abbreviations:

ESS=Epworth Sleepiness Scale; SNS=Swiss Narcolepsy Scale, CGI=Clinical Global Impression Score, EDS=Excessive Daytime Sleepiness

#### **References:**

1. XYWAV<sup>™</sup> (calcium, magnesium, potassium, and sodium oxybates) [package insert]. Palo Alto, CA: Jazz Pharmaceuticals, Inc.; 2021. 2. Khan Z, Trotti LM. Central disorders of hypersomnolence. CHEST. 2015;148(1):262-273. 3. AASM. The international classification of sleep disorders. 3rd ed. Darien, IL: American Academy of Sleep Medicine. 2014. 4. American Psychiatric Association. Diagnostic and statistical manual of mental disorders. 5th ed. Arlington, VA: American Psychiatric Publishing. 2013. 5. U.S. Xyrem Multicenter Study Group. Sodium oxybate demonstrates long-term efficacy for the treatment of cataplexy in patients with narcolepsy. Sleep Med. 2004;5(20):119-23.

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