Ilaris

Description

Ilaris (canakinumab)

Background
Ilaris is a potent and selective interleukin-1β blocker that works by attaching itself to interleukin-1β for a sustained period, neutralizing it and blocking inflammation and related symptoms. Ilaris is used in the treatment of Cryopyrin Associated Periodic Syndrome (CAPS), a group of rare genetic diseases that include Familial Cold Autoinflammatory Syndrome (FCAS) and Muckle-Wells Syndrome (MWS). Additionally, Ilaris is indicated for the treatment of other periodic fever syndromes including Tumor Necrosis Factor Receptor Associated Periodic Syndrome (TRAPS), Hyperimmunoglobulin D Syndrome (HIDS)/Mevalonate Kinase Deficiency (MKD), and Familial Mediterranean Fever (FMF). Ilaris is also used in the treatment of Systemic Juvenile Idiopathic Arthritis (SJIA) a severe autoimmune disease, driven by innate immunity by means of pro-inflammatory cytokines such as interleukin-1β. This drug is to be injected by a healthcare provider just below the skin (subcutaneous) (1).

Regulatory Status
FDA-approved indication: Ilaris is an interleukin-1β blocker indicated for the treatment of: (1) Periodic Fever Syndromes:

1. Cryopyrin-Associated Periodic Syndromes (CAPS), in adults and children 4 years of age and older including:
   a. Familial Cold Autoinflammatory Syndrome (FCAS)
   b. Muckle-Wells Syndrome (MWS)
2. Tumor Necrosis Factor Receptor Associated Periodic Syndrome (TRAPS) in adult and pediatric patients
3. Hyperimmunoglobulin D Syndrome (HIDS)/Mevalonate Kinase Deficiency (MKD) in adult and pediatric patients

4. Familial Mediterranean fever (FMF) in adult and pediatric patients

5. Active systemic juvenile idiopathic arthritis (SJIA) in patients aged 2 years and older.

Ilaris has been associated with an increased risk of serious infections. Physicians should exercise caution when administering Ilaris to patients with infections, a history of recurring infections or underlying conditions which may predispose them to infections. Discontinue treatment with Ilaris if a patient develops a serious infection. Do not administer Ilaris to patients during an active infection requiring medical intervention (1).

An increased incidence of serious infections and an increased risk of neutropenia (low neutrophils, a type of white blood cells that help fight infections) have been associated with administration of another IL-1 blocker in combination with TNF inhibitors. Co-administration of Ilaris with TNF inhibitors is not recommended because this may increase the risk of serious infections. Drugs that affect the immune system by blocking TNF have been associated with an increased risk of new tuberculosis and reactivation of latent tuberculosis (TB). It is possible that use of IL-1 inhibitors such as Ilaris increases the risk of reactivation of tuberculosis or of opportunistic infections. (1).

Live vaccines should not be given concurrently with Ilaris. Prior to initiation of therapy with Ilaris, patients should receive all recommended vaccinations as IL-1 blockade may interfere with immune response to infections (1).

The safety and efficacy of Ilaris in SJIA, TRAPS, HIDS/MKD, and FMF patients under 2 years of age and in CAPS patients under 4 years of age have not been established (1).

Related policies
Arcahsyst

Policy

This policy statement applies to clinical review performed for pre-service (Prior Approval, Precertification, Advanced Benefit Determination, etc.) and/or post-service claims.

Ilaris may be considered medically necessary in patients 4 years of age or older for the treatment of familial cold auto-inflammatory syndrome form of CAPS or the Muckle-Wells syndrome form of CAPS; in patients 2 years of age or older with active systemic juvenile idiopathic arthritis (SJIA), tumor necrosis factor receptor associated periodic syndrome
(TRAPS), hyperimmunoglobulin D syndrome (HIDS)/mevalonate kinase deficiency (MKD), familial Mediterranean fever (FMF) who do not have evidence of chronic infection, or who are not also receiving a tumor necrosis factor antagonist, an interleukin-1 receptor antagonist.

Ilaris may be considered investigational for all other indications.

Prior-Approval Requirements

Diagnoses

Patient must have ONE of the following:

**Age** 2 years of age or older

1. Active Systemic Juvenile Idiopathic Arthritis (SJIA)
2. Tumor Necrosis Factor Receptor Associated Periodic Syndrome (TRAPS)
3. Hyperimmunoglobulin D Syndrome (HIDS)/Mevalonate Kinase Deficiency (MKD)
4. Familial Mediterranean Fever (FMF)

**Age** 4 years of age or older

1. Familial Cold Auto-inflammatory Syndrome (FCAS) form of CAPS (Cryopyrin-Associated Periodic Syndromes)
2. Muckle-Wells Syndrome (MWS) form of CAPS, also known as Cold-Induced Auto-inflammatory Syndrome-1

AND NONE of the following:

a. Concurrently using a Tumor Necrosis Factor (TNF) antagonist
b. Concurrently using an interleukin-1 receptor antagonist
c. Evidence of an active infection requiring medical intervention

Policy Guidelines

Pre - PA Allowance

None

Prior - Approval Limits

Duration Lifetime
Rationale

Summary

Ilaris is an interleukin-1β blocker indicated for the treatment of active systemic juvenile idiopathic arthritis (SJIA), Tumor Necrosis Factor Receptor Associated Periodic Syndrome (TRAPS), Hyperimmunoglobulin D Syndrome (HIDS)/Mevalonate Kinase Deficiency (MKD), and Familial Mediterranean Fever (FMF) and in patients aged 2 years and older and for the treatment of Cryopyrin-Associated Periodic Syndromes (CAPS) in adults and children 4 years of age and older including Familial Cold Autoinflammatory Syndrome (FCAS) and Muckle-Wells Syndrome (MWS). Ilaris has been associated with an increased risk of serious infections. Do not administer Ilaris to patients during an active infection requiring medical intervention. The safety and efficacy of Ilaris in Active Systemic Juvenile Idiopathic Arthritis (SJIA), Tumor Necrosis Factor Receptor Associated Periodic Syndrome (TRAPS), Hyperimmunoglobulin D Syndrome (HIDS)/Mevalonate Kinase Deficiency (MKD), and Familial Mediterranean Fever (FMF) patients under 2 years of age and in Cryopyrin-Associated Periodic Syndromes (CAPS) patients under 4 years of age have not been established (1).

Prior authorization is required to ensure the safe, clinically appropriate and cost effective use of Ilaris while maintaining optimal therapeutic outcomes.

References


Policy History

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<tr>
<th>Date</th>
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<tbody>
<tr>
<td>September 2011</td>
<td>Annual editorial and reference update</td>
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<tr>
<td>September 2012</td>
<td>Annual editorial and reference update</td>
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<tr>
<td>June 2013</td>
<td>Annual editorial and reference update</td>
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<tr>
<td></td>
<td>A new FDA indication was approved for Active Systemic Juvenile Idiopathic Arthritis (SJIA) and added to criteria.</td>
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<tr>
<td>June 2014</td>
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<td>March 2016</td>
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<td>Removal of the Tumor Necrosis Factor (TNF) antagonist examples and interleukin-1 receptor antagonist examples</td>
</tr>
<tr>
<td>October 2016</td>
<td>Addition of new FDA indications for TRAPS, HIDS/MKD, and FMF</td>
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**Effective Date:** April 1, 2018  
**Subsection:** Analgesics and Anesthetics  
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**Keywords**

This policy was approved by the FEP® Pharmacy and Medical Policy Committee on March 16, 2018 and is effective on April 1, 2018.