

**ENBREL / ETANERCEPT
(TNF INHIBITORS FOR RA)
February 2005**

Etanercept is a biologic tumor necrosis factor (TNF) antagonist. It inhibits pro-inflammatory Cytokine activity. It is prescribed to attenuate the inflammation and pain associated with rheumatoid arthritis and to slow progression of joint destruction.

The PA Nurse may approve if the request meets the following guidelines:

- The member must be seen and evaluated by a contracted rheumatologist before starting on therapy. The member must be diagnosed with moderate to severely active RA. Initial authorizations will be for no more than 3 months of Rx.
- The member should be followed monthly for the first six months by the rheumatologist and every 6 weeks to two months thereafter by either the rheumatologist or the PCP.
- Patient must fail adequate doses of MTX (up to 15 mg po or sq weekly). Folic acid should be used to offset side effects.
- A combination treatment must be tried consisting of two DMARD's. Usually MTX in combination with one of two other DMARD's is tried. A combination of sulfasalazine and hydroxychloroquine can also be tried.
- If the patient failed one and two above then Etanercept can be approved for two to three months only, unless Arava is an alternative.
- If after two to three months of therapy, there has been no evidence of clinical improvement over the other regimens above then Etanercept will not continue to be approved.

If the request does not meet the above criteria, the request must be reviewed by a Medical Director.

References: See attached "Up To Date" for literature review.

Joel M. Kremer. Rational use of new and existing disease-modifying agents in rheumatoid arthritis. Ann Internal Med 2001,134:695-706

Approved by:

Clinical and Service Quality Improvement Committee (CSQIC) Date: _____

Approved by: _____ Date: _____