

## **Specialty Pharmacy Program**

### **Sprycel® (dasatinib)**

#### **DESCRIPTION**

Sprycel is an oral multiple tyrosine kinase inhibitor indicated for the treatment of chronic myelogenous leukemia and Philadelphia chromosome-positive acute lymphoblastic leukemia with resistance or intolerance to previous treatment.

#### **APPROVAL DURATION**

Approval duration: 1 year

#### **APPROVAL CRITERIA**

##### **FDA-Approved Indication(s)**

1. Treatment of chronic, accelerated, or myeloid or lymphoid blast phase chronic myeloid leukemia with resistance or intolerance to prior therapy including Gleevec (imatinib).
2. Treatment of Philadelphia chromosome-positive acute lymphoblastic leukemia with resistance or intolerance to prior therapy.

##### **Off-Label Indication(s)**

Requests for off-label use of Sprycel will be reviewed and approved when sufficiently supported by evidence from major compendia, published peer-reviewed medical literature, nationally accepted practice guidelines, or expert consensus statements. The major compendia that are recognized include AHFS® Drug Information, Thomson Micromedex®, National Comprehensive Cancer Network Drugs and Biologics Compendium™, and Clinical Pharmacology.