Custom Criteria for
BlueCross Blue Shield of Rhode Island Commercial

XELODA (capecitabine)

GPI CODING:

213000050003**

DESCRIPTION:

Xeloda is an oral prodrug of 5-fluorouracil (5-FU), an antimetabolite antineoplastic agent. Xeloda is indicated for the treatment of colorectal cancer and breast cancer.

APPROVAL DURATION:

Approval duration: 1 year

CRITERIA FOR XELODA

Colorectal cancer

I. Adjuvant treatment, as a single agent, in patients with Dukes' C colon cancer who have undergone complete resection of the primary tumor when treatment with fluoropyrimidine therapy alone is preferred **OR**
II. First-line treatment of patients with metastatic colorectal carcinoma when treatment with fluoropyrimidine therapy alone is preferred

OR

Breast cancer

I. Treatment of patients with metastatic breast cancer after failure of prior anthracycline-containing chemotherapy, in combination with docetaxel **OR**
II. Monotherapy treatment of patients with metastatic breast cancer resistant to both paclitaxel and an anthracycline-containing chemotherapy regimen or resistant to paclitaxel and for whom further anthracycline therapy is not indicated

OR

Off Label Uses for Oncology Drug

I. Off label uses for oncology drugs if considered medically acceptable in one or more of the following compendia (i.e., Micromedex DrugDex, AHFS, Clinical Pharmacology, and NCCN.) A use is identified by a compendium as medically accepted if the:
    A. Indication is a Category 1 or 2A in NCCN,
    B. Indication is a Class I, Class IIa or Class IIb in DrugDex,
    C. Narrative text in AHFS or Clinical Pharmacology is supportive; or
    D. The use is supported by clinical research in 2 or more peer-reviewed medical journals