Description:
Fluconazole, a triazole-class antifungal agent, is indicated for the oropharyngeal, esophageal and vaginal candidiasis, as well as cryptococcal meningitis. Noncomparative studies have also demonstrated efficacy for the treatment of *Candida* urinary tract infections, peritonitis, and systemic *Candida* infections including candidemia, disseminated candidiasis, and pneumonia. Fluconazole is also indicated for candidiasis prophylaxis in patients undergoing bone marrow transplantation who receive cytotoxic chemotherapy and/or radiation therapy.¹ Fluconazole has been used in children and equivalent dosing to adults is provided in the product labeling for pediatric patients, as well as dosing for some specific indications.

Pre-Authorization Criteria: treatment of candidiasis (esophageal, oropharyngeal, peritoneal, urinary tract, vaginal); systemic candida infections (eg, candidemia, disseminated candidiasis, and pneumonia); cryptococcal meningitis; antifungal prophylaxis in allogeneic bone marrow transplant recipients

Off-Label: Candida intertrigo; Cryptococcal pneumonia; Primary antifungal prophylaxis in pediatric oncology patients; Surgical prophylaxis (perioperative)

Note: Other uses include cutaneous fungal infections, tinea versicolor, vaginal candidiasis, onychomycosis
Exclusions

Coverage of fluconazole is not recommended in the following circumstances:

1. Coverage is not recommended for circumstances not listed in Recommended Authorization Criteria.

<table>
<thead>
<tr>
<th>A. Onychomycosis</th>
<th>Diflucan, fluconazole</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. One of the following:</td>
<td>X</td>
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<tr>
<td>- Member has diabetes OR,</td>
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<tr>
<td>- Member has an iatrogenically-induced or disease-associated immunosuppression, such as that due to AIDS, antirejection treatment for bone marrow or solid organ transplant, or chemotherapy for cancer OR,</td>
<td></td>
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<tr>
<td>- Member has a systemic dermatosis with impaired skin integrity (e.g., pemphigus, ichthyosis) OR,</td>
<td></td>
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<tr>
<td>- Member has a significant vascular compromise (peripheral)</td>
<td></td>
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<tr>
<td>2. One of the following:</td>
<td>X</td>
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<tr>
<td>- Contraindication to terbinafine (Lamisil®) OR,</td>
<td></td>
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<tr>
<td>- Intolerance to terbinafine (Lamisil) OR,</td>
<td></td>
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<tr>
<td>- Failure of an adequate trial of 6 weeks of terbinafine (Lamisil) OR,</td>
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<tr>
<td>- Presence of hepatic dysfunction or increased risk for liver disease OR,</td>
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<tr>
<td>- Fungal culture indicating lack of sensitivity to terbinafine (Lamisil) OR,</td>
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<tr>
<td>- Non-dermatophyte fungal infection (mixed infection, a mold or yeast infection)</td>
<td></td>
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<tr>
<td>AND</td>
<td></td>
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<tr>
<td>3. One of the following:</td>
<td>X</td>
</tr>
<tr>
<td>- Contraindication to itraconazole (Sporanox®) OR,</td>
<td></td>
</tr>
<tr>
<td>- Intolerance to itraconazole (Sporanox) OR,</td>
<td></td>
</tr>
<tr>
<td>- Failure of an adequate trial of 6 weeks of itraconazole (Sporanox)</td>
<td></td>
</tr>
</tbody>
</table>

For onychomycosis, new courses of therapy should not be initiated until 32 weeks following the end of therapy unless infection is noted in a previously unaffected nail (since cure rate continues to increase through the 11th month following initiation of a 12 week course of therapy).

QUANTITY LIMITS:
- According to the manufacturer, a single oral dose of Diflucan or fluconazole 150mg tablets is indicated for vaginal candidiasis
- Diflucan or fluconazole can be dosed at interval(s) as indicated in the table below. A quantity of
Diflucan or fluconazole 150mg tablets will be considered medically necessary as indicated in the table below:

<table>
<thead>
<tr>
<th>Drug</th>
<th>Dosing Interval</th>
<th>Dosage Strength</th>
<th>Quantity Limits</th>
</tr>
</thead>
<tbody>
<tr>
<td>Diflucan, fluconazole</td>
<td>Once Daily</td>
<td>150mg</td>
<td>Up to 2 tablets in 30 days</td>
</tr>
</tbody>
</table>

References