Ferriprox is an iron-chelating agent with affinity for ferric ion (iron III); binds to ferric ion and forms a 3:1 (deferiprone:iron) complex which is excreted in the urine. Has a lower affinity for other metals such as copper, aluminum, and zinc.

**Pre-Authorization Criteria:** treatment of chronic transfusional iron overload due to thalassemia syndromes with inadequate response to other chelation therapy.


**Dosing: Adult:**
Note: Round dose to the nearest 250 mg (or 1/2 tablet). If serum ferritin falls consistently below 500 mcg/L, consider temporary treatment interruption.
Transfusional iron overload: Oral: Initial: 25 mg/kg 3 times/day (75 mg/kg/day); individualize dose based on response and therapeutic goal; maximum dose: 33 mg/kg 3 times/day (99 mg/kg/day)

**Dosing: Pediatric:**
Pediatric dosing is currently unavailable or not applicable for this drug.

**Dosing: Geriatric:**
Refer to adult dosing. Begin at the low end of dosing range.

**Dosing: Renal Impairment:**
No dosage adjustments are provided in the manufacturer’s labeling (has not been studied).

**Dosing: Hepatic Impairment:**
No dosage adjustments are provided in the manufacturer’s labeling (has not been studied).

**Dosing: Adjustment for Toxicity:**
ANC <1500/mm³: Interrupt treatment
ANC <500/mm³: In addition to treatment interruption, consider hospitalization (and other clinically-appropriate management); do not resume or rechallenge unless the potential benefits outweigh potential risks
Infection: Interrupt treatment; monitor ANC more frequently

**Dosage Forms: U.S.:**
Excipient information presented when available (limited, particularly for generics); consult specific product labeling.
Tablet, Oral:
Ferriprox: 500 mg [scored]

Generic Equivalent Available: U.S.-No

**Administration:**
Administer in the morning, at mid day and in the evening. Administration with food may decrease nausea.

**Adverse Reactions:**
>10%: nausea, chromaturia
Other Serious Less Common Reactions: hypersensitivity reactions, anaphylaxis, Henoch-Schonlein purpura, neutropenia, agranulocytosis, thrombocytopenia, pancytopenia

**U.S. BOXED WARNING:**
Agranulocytosis/Neutropenia may occur and lead to serious infections and death; neutropenia may precede agranulocytosis; measure ANC at baseline, then q week; interrupt treatment if ANC <1500 cells/mm³; interrupt treatment if infection develops and monitor ANC more frequently; advise patients to promptly report any symptoms of infection.

**References:**
4. www.uptodate.com: Deferiprone: Drug Information
5. www.epocrates.com: Ferriprox Drug Information

**REVISION HISTORY:**

Date Reviewed/No Updates: 1/13/15 by C. Sanders, MD
Date Approved by P&T Committee: 1/27/15
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Date Approved by P&T Committee: 1/24/17
Date Reviewed/No Updates: 1/23/18 by C. Sanders, MD; R. Sterling, MD
Date Approved by P&T Committee: 1/23/18

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