

This policy has been developed through review of medical literature, consideration of medical necessity, generally accepted medical practice standards, and IEHP Pharmacy and Therapeutic Subcommittee approval.

Drug: Xopenex (levalbuterol)

Class: Asthma

Formulary medication: Albuterol

Effective Date: July 2002, updated January 2006

Policy/Criteria:

Xopenex may be medically necessary if any of the following condition is met:

1. Prescribed by pulmonologists or allergists.
2. Documented failure, or intolerance of formulary medication such as albuterol.

Clinical Justification:

1. Albuterol is a racemic mixture of R and S- enantiomers. Levalbuterol is the R-enantiomer version, which is responsible for the bronchodilating activities.
2. Levalbuterol has not demonstrated superiority in efficacy when compared to albuterol.
3. Studies have demonstrated S-albuterol does not increase airway reactivity. There is no justification where levalbuterol is safer than albuterol.
4. Several studies have demonstrated that levalbuterol offers no significant advantage over albuterol when measuring the incidence of side effects.

Reference:

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