

Protocol for Fabry Disease Products
Approved January
2020

Fabrazyme® (agalsidase beta)

Galafold® (migalastat)

Background:

Fabry disease is a rare genetic disorder caused by mutations in the alpha-galactosidase A (GLA) gene located on the X-chromosome. It results from a buildup of fat called globotriaosylceramide (GL-3) in blood vessels, kidneys, the heart, the nerves, and other organs. Patients with Fabry disease can develop slowly progressive kidney disease, cardiac hypertrophy, arrhythmias, stroke and early death.

***Fabrazyme** provides an exogenous source of alpha-galactosidase A, which is deficient in patients with Fabry disease. It catalyzes the hydrolysis of glycosphingolipids, including GL-3, which can accumulate in various body tissues of patients with Fabry disease.*

***Galafold** is an alpha-galactosidase A (alpha-Gal A) “pharmacological chaperone” that reversibly binds to the active site of the alpha-galactosidase A protein (encoded by the GLA), which is deficient in Fabry disease.*

Criteria for approval:

1. Patient has a diagnosis of Fabry disease confirmed by **one** of the following:
 - a. Documentation of complete deficiency or $\leq 5\%$ of mean normal alpha-galactosidase A (α - GAL A) enzyme activity in leukocytes, dried blood spots, or serum (plasma) analysis; **OR**
 - b. Documented galactosidase alpha mutation by gene sequencing; **AND**
2. Patient has one or more clinical/physical features associated with Fabry disease, such as:
 - a. Intermittent episodes of burning pain in the extremities (acroparesthesias)
 - b. Cutaneous vascular lesions (angiokeratomas)
 - c. Diminished perspiration (hypo- or anhidrosis)
 - d. Characteristic corneal and lenticular opacities
 - e. Chronic kidney disease (CKD) and/or proteinuria of unknown etiology
3. Medication is prescribed by or in consultation with a specialist in genetic disorders

For Fabrazyme:

- a. Patient is 8 years or older
- b. Patient is not receiving Galafold

For Galafold:

- a. Patient is an adult
- b. Patient has an amenable galactosidase alpha gene (GLA) variant based on in vitro assay data
- c. Patient does not have severe renal impairment or end-stage renal disease requiring dialysis
- d. Patient is not receiving Fabrazyme

4. Medication is prescribed in accordance with Food and Drug Administration (FDA) established indication and dosing regimens or in accordance with medically appropriate off-label indication and dosing according to American Hospital Formulary Service, Micromedex, Clinical Pharmacology, or national guidelines.

Initial Approval Duration: 6 months

Continuation of therapy:

1. There is a positive clinical response to therapy
2. Patient has been adherent with the medication
3. Routine lab tests to include ALL of the following:
 - a. Complete Blood Count (CBC)
 - b. Estimated glomerular filtration Rate (eGFR)
 - c. Urinalysis, urinary protein-to-creatinine ration, or albumin-to-creatinine ratio
 - d. Basic metabolic panel (BMP)

Renewal Approval Duration: 6 months

References:

1. Fabrazyme [package insert]. Genzyme Corporation. Cambridge, MA 02142. December 2018
2. Galafold [package insert]. Amicus Therapeutics U.S., Inc. Cranbury, NJ 08512. August 2018
3. R.J. Hopkin, et al., The management and treatment of children with Fabry disease: A United States-based perspective, *Molecular Genetics and Metabolism*. (2015), <http://dx.doi.org/10.1016/j.ymgme.2015.10.007>
4. *Clinical Pharmacology® Gold Standard Series* [Internet database]. Tampa FL. Elsevier 2016. Updated periodically
5. Biegstraaten M, Arngrímsson R, et al. Recommendations for initiation and cessation of enzyme replacement therapy in patients with Fabry disease: the European Fabry Working Group consensus document. *Orphanet J Rare Dis*. 2015 Mar 27;10:36. From: https://www.ncbi.nlm.nih.gov/pmc/articles/PMC4383065/pdf/13023_2015_Article_253.pdf Accessed: October 29, 2019.
6. Mauer, M., Kopp, J., B., Schiffmann, R., Fabry Disease: Clinical features and diagnosis. (2019). UpToDate. In AQ Lam (Ed.), Retrieved from: <https://www.uptodate.com/contents/fabry-disease-treatment-and-prognosis> Accessed: October 29, 2019.