Esketamine (SPRAVATO)
Criteria for Use
February 2022

VA Pharmacy Benefits Management Services, Medical Advisory Panel, and VISN Pharmacist Executives

The following recommendations are based on medical evidence, clinician input, and expert opinion. The content of the document is dynamic and will be revised as new information becomes available. The purpose of this document is to assist practitioners in clinical decision-making, to standardize and improve the quality of patient care, and to promote cost-effective drug prescribing. THE CLINICIAN SHOULD USE THIS GUIDANCE AND INTERPRET IT IN THE CLINICAL CONTEXT OF THE INDIVIDUAL PATIENT. INDIVIDUAL CASES THAT ARE EXCEPTIONS TO THE EXCLUSION AND INCLUSION CRITERIA SHOULD BE ADJUDICATED AT THE LOCAL FACILITY ACCORDING TO THE POLICY AND PROCEDURES OF ITS P&T COMMITTEE AND PHARMACY SERVICES.

The Product Information should be consulted for detailed prescribing information.

See the VA National PBM-MAP-VPE Monograph on this drug at the *PBM INTERnet* or *PBM INTRAnet* site for further information.

Exclusion Criteria

If the answer to **ANY** item below is met, then the patient should **NOT** receive esketamine.

- ☐ Hypersensitivity to esketamine, ketamine, or any of the excipients.
- ☐ Aneurysmal vascular disease (including thoracic and abdominal aorta, intracranial, and peripheral arterial vessels) or arteriovenous malformation.
- ☐ History of intracerebral hemorrhage.
- ☐ History of seizures
- ☐ Current or recent (within 30 days) delirium.
- ☐ Current uncontrolled hypertension (systolic blood pressure >140 mm Hg or diastolic blood pressure > 90 mm Hg).
- ☐ Severe cardiac decompensation (Class IV heart failure or unstable angina).
- ☐ Severe hepatic impairment (Child-Pugh class C).
- ☐ Current or previous interstitial or ulcerative cystitis.
- ☐ **Comorbid psychiatric condition** is present (schizophrenia, schizoaffective disorder, MDD with psychotic symptoms, bipolar disorder, obsessive-compulsive disorder, intellectual disability, autism, **cluster B personality disorder**, or a major neurocognitive disorder diagnosis).
- ☐ History of non-response to ketamine, esketamine, or ECT.
- ☐ History of VNS or deep brain stimulation in current episode of depression.
- ☐ Current or previous abuse of ketamine or esketamine.
- ☐ Clinical evidence for current substance abuse except tobacco use(e.g., confirmed UDS).
- ☐ Current barbiturate, cannabis, or opioid use.
- ☐ Current moderate or severe substance use disorder (SUD).
- ☐ Pregnancy (known pregnancy or positive pregnancy test).
- ☐ Patient is breastfeeding.

Inclusion Criteria

The answers to **ALL** of the following must be fulfilled in order to meet criteria.

- ☐ All REMS requirements have been met.
- ☐ Adults <65 years of age with current diagnosis of unipolar major depressive disorder by DSM-5.
- ☐ The patient did not achieve remission from at least four adequate therapeutic trials (dose and duration) of antidepressants, either alone or in combination with evidence-based psychotherapy, and in the current episode of depression is experiencing moderate to severe depressive symptomatology based on a depression rating scale within the last 30 days. At least two trials must include an antidepressant augmented with an additional agent (e.g., antipsychotic, second antidepressant, lithium, or thyroid supplementation) **OR** the patient is hospitalized with MDD complicated by acute suicidal ideation or behavior.
- ☐ Antidepressant treatment trials are considered unsuccessful if the patient has not responded to at least 6 weeks of an antidepressant at half maximum dose or greater.
- ☐ The patient has been considered for electroconvulsive therapy (ECT).
- ☐ The patient has started and is currently receiving a new antidepressant that has not previously failed in the current depressive episode.
- ☐ A VA psychiatrist or a VA licensed health-care provider (i.e., CPP, NP, PA) has evaluated the patient and determined and documented in the patient's medical records that the patient qualifies for esketamine treatment.
- ☐ The prescriber is a VA psychiatrist or a VA licensed health-care provider (i.e., CPP, NP, PA).
- ☐ The patient agrees to stay and be monitored for at least two hours after esketamine administration and agrees not to drive or operate heavy machinery/equipment and not to make major financial or legal decisions for the remainder of the day in which esketamine is administered.
- ☐ The patient or their legal representative can provide signed informed consent.
- ☐ The patient has an adult who can accompany him/her and assist with transportation, or another method of safe transport has been arranged and documented.

For women of childbearing potential

- ☐ Pregnancy should be excluded prior to receiving esketamine and the patient provided contraceptive counseling on potential risks vs. benefits of taking esketamine if patient were to become pregnant.

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