

PRIOR AUTHORIZATION POLICY

POLICY: Diabetes – Symlin Prior Authorization Policy

- Symlin® (pramlintide subcutaneous injection – AstraZeneca)

REVIEW DATE: 08/07/2024

OVERVIEW

Symlin, an antihyperglycemic agent, is indicated as an adjunctive treatment in patients with **type 1 or type 2 diabetes** who use mealtime insulin therapy and who have failed to achieve desired glucose control despite optimal insulin therapy.¹

Guidelines/Consensus Statements

The American Diabetes Association Standards of Care (2024) do not provide a specific recommendation for use of Symlin in type 1 or type 2 diabetes and the American Association of Clinical Endocrinology (AACE) consensus statement of the comprehensive management of type 2 diabetes does not provide a recommendation for use of Symlin.^{2,4} The AACE and American College of Endocrinology guidelines for developing a comprehensive care plan (2022) recommend adding a glucagon-like peptide-1 agonist, a sodium glucose co-transporter-2 inhibitor, or Symlin (less commonly used) to reduce postprandial hyperglycemia, hemoglobin A_{1c}, and weight in individuals with type 2 diabetes who are treated with basal-bolus insulin therapy.³

POLICY STATEMENT

Prior Authorization is recommended for prescription benefit coverage of Symlin. All approvals are provided for the duration noted below.

Automation: If criteria for previous use of insulin (automated) within the past 130 days are not met at the point of service, coverage will be determined by Prior Authorization criteria.

RECOMMENDED AUTHORIZATION CRITERIA

Coverage of Symlin is recommended in those who meet the following criteria:

FDA-Approved Indication

1. **Diabetes Mellitus, Type 1 or Type 2.** Approve for 1 year if the medication is prescribed in adjunct to insulin therapy.

CONDITIONS NOT RECOMMENDED FOR APPROVAL

Coverage of Symlin is not recommended in the following situations:

1. **Weight Loss Treatment.** American Association of Clinical Endocrinologists/American College of Endocrinology obesity clinical practice guidelines (2016) comment that Symlin may lead to modest weight loss in diabetic patients but do not comment on a role for Symlin in management of obesity in non-diabetic patients.⁵ Guidelines from the American Gastroenterological Association (2022) do not address Symlin for weight loss.⁶ Other pharmacotherapies are available and indicated for weight loss.

08/07/2024

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2. Coverage is not recommended for circumstances not listed in the Recommended Authorization Criteria. Criteria will be updated as new published data are available.

REFERENCES

1. Symlin® subcutaneous injection [prescribing information]. Wilmington, DE: AstraZeneca; December 2019.
2. American Diabetes Association. Standards of care in diabetes – 2024. *Diabetes Care*. 2024;47(Suppl 1):S1-S321.
3. Samson SL, Vellanki P, Blonde L, et al. American Association of Clinical Endocrinology Consensus Statement - comprehensive type 2 diabetes management algorithm – 2023 update. *Endocr Pract*. 2023;29:205-340.
4. Blonde L, Umpierrez GE, Reddy SS et al. American Association of Clinical Endocrinology clinical practice guideline: developing a diabetes mellitus comprehensive care plan – 2022 update. 2022;28(10):923-1049.
5. Garvey WT, Mechanick JI, Brett EM, et al. American Association of Clinical Endocrinologist and American College of Endocrinology comprehensive clinical practice guidelines for medical care of patients with obesity. *Endocr Pract*. 2016;22 Suppl 3:1-203.
6. Grunvald E, Shah R, Hernaez R, et al; AGA Clinical Guidelines Committee. AGA Clinical Practice Guideline on Pharmacological Interventions for Adults with Obesity. *Gastroenterology*. 2022;163(5):1198-1225.