

Trientine tetrahydrochloride (CUVRIOR)

Diagnoses Considered for Coverage:

- Wilson's disease

Coverage Criteria:

For Wilson's disease:

- Dose does not exceed FDA label maximum, **and**
- Patient has an inadequate response, intolerance, or contraindication to D-penicillamine, and
- Patient has intolerance or contraindication to trientine hydrochloride (Syprine) capsule that is not also expected with trientine tetrahydrochloride (Cuvrior) tablet, and
- For asymptomatic patients: Inadequate response, intolerance, or contraindication to zinc acetate (Galzin), and

Coverage Duration: one year

References:

1. Cuprimine. Prescribing Information. Bausch Health Companies. 2020
2. Cuvrior. Prescribing Information. Orphalan. 2022
3. Depen. Prescribing Information. Meda Pharmaceuticals (a Mylan Company). 2019
4. Syprine. Prescribing Information. Bausch Health Companies. 2020
5. Thiola. Prescribing Information. Mission Pharmacal Co. 2019
6. Thiola EC. Prescribing Information. Mission Pharmacal Co. 2021
7. Cuvrior. Prescribing Information. Orphalan SA. Chicago, IL. 2022
8. Fraenkel L, Bathon JM, England BR, et al. 2021 American College of Rheumatology Guideline for the Treatment of Rheumatoid Arthritis. *Arthritis Care Res (Hoboken)*. 2021;73(7):924-939

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