

## Policies Repository



**Policy Title** Calcitriol (Vectical) Ointment

**Policy Number** FS.CLIN.73

*Application of Pharmacy Policy is determined by benefits and contracts. Benefits may vary based on product line, group or contract. Some medications may be subject to precertification, age, gender or quantity edits. Individual member benefits must be verified.*

*This Pharmacy Policy document describes the status of pharmaceutical information and/or technology at the time the document was developed. Since that time, new information relating to drug efficacy, interactions, contraindications, dosage, administration routes, safety or FDA approval may have changed. If the Medical/Pharmacy Reviewer is aware of any new information on the subject of this document, please provide it promptly to the Medical/Pharmacy Policy Department. This information may include new FDA approved indications, withdrawals or other FDA alerts. This type of information is relevant not only when considering whether this Policy should be updated, but also when applying it to current requests for coverage.*

*Members are advised to use participating pharmacies in order to receive the highest level of benefits.*

**Policy** Calcitriol (Vectical) is indicated for the topical treatment of mild to moderate plaque psoriasis in adults 18 years and older.

The use of Calcitriol (Vectical) requires prior authorization (ie, clinical pharmacy and or Medical Director review).

**Policy Description** Calcitriol (Vectical) is a naturally occurring active form of Vitamin D3. The mechanism of Calcitriol (Vectical) in the treatment of psoriasis has not been established but it is thought to inhibit the proliferation of, and promote the differentiation of keratinocytes of lesional psoriatic skin. Calcitriol (Vectical™) is new to the market and has not been shown to have superior efficacy to calcipotriene (Dovonex) for its FDA labeled indication.

**Policy Guideline Inclusion** Calcitriol (Vectical) is approved when **all** of the following inclusion criteria are met:

- Documentation of a diagnosis of mild to moderate plaque psoriasis in adults 18 years of age and older
- Documentation of a trial and failure/contraindication/intolerance/allergy to calcipotriene (Dovonex)

**Policy Guideline Exclusion** Calcitriol (Vectical) is denied when **any** of the following exclusion criteria are present:

- No documentation of a diagnosis of mild to moderate plaque psoriasis in adults 18 years of age and older
- No documentation of a trial and failure/contraindication/intolerance/allergy to calcipotriene (Dovonex)

**Policy List of Applicable Drugs**

Brand Name	Generic Name
Vectical	Calcitriol

**Dosing and Administration** Refer to the specific manufacturer's prescribing information for administration and dosage details for each specific agent.

**Policy References**

Facts and Comparisons website [Vectical]. Available at [www.factsandcomparisons.com](http://www.factsandcomparisons.com). Accessed April 15, 2009.

Vectical [package insert] Fort Worth, TX: Galderma Labs; 2008.

Vectical website. Available at [www.vectical.com](http://www.vectical.com). Accessed April 15, 2009.

Zhu X, Wang B, Zhao G, et al. An investigator-masked comparison of the efficacy and safety of twice daily applications of calcitriol ointment vs. calcipotriol ointment in subjects with mild to moderate chronic plaque-type psoriasis. 2007. JEADV 21; 466-472.

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**Policy Link to Related Policies****Printed**09/01/2009 10:14:52

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