

Policies Repository



Policy Title Diclofenac epolamine 1.3% (Flector® Patch)

Policy Number FS.CLIN.60

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 **Diclofenac epolamine 1.3% (Flector® Patch)** is indicated for the topical treatment of acute pain due to minor strains, sprains, and contusions.

The use of diclofenac epolamine 1.3% (Flector® Patch) requires prior authorization (ie, clinical pharmacy and/or Medical Director review).

Policy Description **Diclofenac epolamine 1.3% (Flector® Patch)** is a non-steroidal anti-inflammatory drug (NSAID). As with other NSAIDs its ability to inhibit prostaglandin synthesis may be involved in its anti-inflammatory activity, as well as contribute to its efficacy in relieving pain associated with inflammation.

Policy Guideline Inclusion **Diclofenac epolamine 1.3% (Flector® Patch)** is approved when **all** of the following inclusion criteria are met:

- Documentation of pain.
- Documentation of the trial and failure or contraindication/intolerance to a meloxicam-containing product and one additional oral non-steroidal anti-inflammatory drug (NSAID).

Policy Guideline Exclusion **Diclofenac epolamine 1.3% (Flector® Patch)** is denied when **any** of the following inclusion criteria are present:

- No documentation of pain.
- No documentation of trial and failure or contraindication/intolerance to a meloxicam-containing product and one additional oral non-steroidal anti-inflammatory drug

(NSAID).

Policy List of Applicable Drugs

| Brand Name | Generic Name |
|---------------|----------------------|
| Flector Patch | diclofenac epolamine |

Dosing and Administration

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

Policy References

Product information for Flector Patch (diclofenac epolamine 1.3%). Alpharma. Bridgewater, NJ 08807. January 2007.

Micromedex. Flector™. [Micromedex web site]. Available at: <http://www.micromedex.com> [via subscription only]. Accessed January 6, 2010.

Galer BS, Rowbotham M, Perander J, et al. Topical diclofenac patch relieves minor sports injury pain: results of a multicenter controlled clinical trial. *J Pain Symptom Manage.* 2000 Apr; 19(4): 287-94

Policy Link to Related Policies**Printed**

02/01/2010 09:34:17

The Policy Bulletins on this web site were developed to assist Independence Blue Cross and its subsidiaries ("IBC") in administering the provisions of the respective benefit programs, and do not constitute a contract. If you are an IBC member, please refer to your specific benefit program for the terms, conditions, limitations and exclusions of your coverage. IBC does not provide health care services, medical advice or treatment, or guarantee the outcome or results of any medical services/treatments. The facility and professional providers are responsible for providing medical advice and treatment. Facility and professional providers are independent contractors and are not employees or agents of IBC. If you have a specific medical condition, please consult with your doctor. IBC reserves the right at any time to change or update its Policy Bulletins. © 2008 Independence Blue Cross. All Rights Reserved. Current Procedural Terminology © 2008 American Medical Association. All Rights Reserved.