JUVENILE SPONDYLOARTHRITIS OR ENTHESITIS-RELATED ARTHRITIS

DRUG NAME	BRANDS REIMBURSED	DOSAGE FORM/ STRENGTH	REIMBURSEMENT CRITERIA	STANDARD APPROVAL DURATION
Etanercept	Enbrel	25mg/vial 50 mg prefilled syringe for subcutaneous injection	**For the treatment of juvenile spondyloarthritis (JSpA) or enthesitis-related arthritis (ERA) in patients who meet the following criteria for either axial or peripheral disease:** **Axial Disease** • Age of disease onset ≤ 16 years; AND • Low back pain and stiffness for > 3 months that improve with exercise and not relieved by rest; AND • Failure to respond to or documented intolerance to adequate trials of 2 non-steroidal anti-inflammatory drugs (NSAIDs) for at least 4 weeks each; AND • BASDAI score of ≥ 4 after at least 4 weeks of standard NSAID therapy; AND • Radiographic evidence of severe active disease by X-ray, CT scan or MRI *	Initial and Renewals: 1 Year
Infliximab	Remicade	100 mg/vial	*The details of radiographic reports for severe active disease must provide the following; ◦ X-ray or CT scan report stating the presence of "SI joint fusion" or "SI joint erosion" OR ◦ MRI report stating the presence of "inflammation" or "edema" or "erosion" of the SI joint. Actual radiographic reports must be submitted with the request. If the radiographic reports do not specify the above findings, the request will be reviewed by external	

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Etanercept Infliximab	Enbrel Remicade	25mg/vial 50 mg prefilled syringe for subcutaneous injection 100 mg/vial	medical experts. The radiographic interpretation report from the radiologist or rheumatologist may be submitted along with radiographic report. The planned dosing regimen for the requested biologic should be provided. The recommended dose for the treatment of JSpA/ERA is as follows: • Etanercept 0.4mg/kg (max 25 mg) twice weekly or 0.8mg/kg (max 50 mg) once weekly • Infliximab: 5mg/kg/dose at 0, 2 and 6 weeks followed by maintenance therapy of up to 5mg/kg/dose every 6-8 weeks Higher dosing will undergo external review. **Renewal** will be considered for patients with objective evidence of at least a 50% reduction in BASDAI score or ≥ 2 absolute point reduction in BASDAI score. For renewals beyond the second year, objective evidence of preservation of treatment effect must be provided. **Peripheral Disease** • Age of disease onset ≤ 16 years; and • Patients must have a minimum of 3 (three) swollen joints and 5 (five) active joints; and • Evidence of enthesitis in at least 2 locations; and • Failure to respond to or documented intolerance to trials of 2 non-steroidal anti-inflammatory drugs	

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			(NSAIDs) for at least 4 weeks each AND at least one of either sulfasalazine (50 mg/kg/day-maximum 2 grams per day) or methotrexate (15mg/m^2 per week subcutaneously-maximum 25 mg per week) for 3 months. **Renewal** will be considered for patients with objective evidence of at least a 20% reduction in swollen joint count and a minimum of improvement in 2 swollen joints over the previous year. There should also be an improvement in number of enthesitis sites. For renewals beyond the second year, objective evidence of preservation of treatment effect must be provided. Requests that do not meet these criteria will undergo external review.	