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Section:	Prescription Drugs	**Effective Date:**	October 1, 2024
Subsection:	Central Nervous System Drugs	**Original Policy Date:**	October 18, 2019
Subject:	Nayzilam	**Page:**	1 of 6

Last Review Date: September 6, 2024

Nayzilam

Description

Nayzilam (midazolam nasal spray)

Background
Nayzilam (midazolam) is a benzodiazepine. Nayzilam's mechanism of action is not fully understood but is thought to involve potentiation of GABAergic neurotransmission resulting from binding at the benzodiazepine site of the $GABA_A$ receptor (1).

Regulatory Status
FDA-approved indication: Nayzilam is indicated for the acute treatment of intermittent, stereotypic episodes of frequent seizure activity (i.e., seizure clusters, acute repetitive seizures) that are distinct from a patient's usual seizure pattern in patients with epilepsy 12 years of age and older (1).

Nayzilam has a boxed warning regarding the concomitant use of benzodiazepines and opioids may result in profound sedation, respiratory depression, coma, and death. Because of these risks, reserve concomitant prescribing of benzodiazepines and opioids for use in patients for whom alternative treatment options are inadequate and dosages and durations should be limited to the minimum required (1).

Nayzilam should be limited to 2 doses to treat a seizure cluster. Nayzilam should be used to treat no more than one episode every three days and treat no more than five episodes per month (1).

Benzodiazepines, including Nayzilam, can increase intraocular pressure in patients with glaucoma. Measurements of intraocular pressure in patients without eye disease show a moderate lowering following induction with midazolam. Nayzilam may be used in patients with open-angle glaucoma only if they are receiving appropriate therapy. Patients with open-angle glaucoma may need to have their ophthalmologic status evaluated following treatment with Nayzilam. Nayzilam is contraindicated in patients with narrow-angle glaucoma. (1)

Antiepileptic drugs (AEDs), including Nayzilam, increase the risk of suicidal thoughts or behavior in patients taking these drugs for any indication. Patients treated with any AED for any indication should be monitored for the emergence or worsening of depression, suicidal thoughts or behavior, and/or any unusual changes in mood or behavior (1).

The safety and effectiveness of Nayzilam in pediatric patients less than 12 years of age have not been established (1).

Related policies
Diacomit, Epidiolex, Fintepla, Libervant, Valtoco

Policy

This policy statement applies to clinical review performed for pre-service (Prior Approval, Precertification, Advanced Benefit Determination, etc.) and/or post-service claims.

Nayzilam may be considered **medically necessary** if the conditions indicated below are met.

Nayzilam may be considered **investigational** for all other indications.

Prior-Approval Requirements

Patients 12 years of age and older with a paid claim for a seizure medication such as: divalproex sodium (Depakote, Depakote ER), lamotrigine (Lamictal), levetiracetam (Keppra), topiramate (Topamax) in the past 180 days are exempt from these initial PA requirements

Age 12 years of age or older

Diagnosis

Patient must have the following:

Intermittent seizure episodes (i.e., seizure clusters, acute repetitive seizures)

AND ALL of the following:

a. Medication will be used for acute seizures
b. Episodes are distinct from the patient's usual epilepsy seizure pattern
c. Patient is on a stable regimen of antiepileptic therapy
d. Prescriber agrees to assess the patient before prescribing concomitant opioid therapy to limit opioid dosages and durations to the minimum required
e. **NOT** being used for the treatment of anxiety
f. **NO** concurrent therapy with another Prior Authorization (PA) benzodiazepine (see Appendix 1)

Prior–Approval *Renewal* Requirements

Same as above

Policy Guidelines

Pre–PA Allowance

None

Prior–Approval Limits

Quantity

Strength	Quantity Limit
5 mg single-dose nasal spray	30 units per 90 days

Duration 3 months

Prior–Approval *Renewal* Limits

Quantity

Strength	Quantity Limit

5 mg single-dose nasal spray	30 units per 90 days

Duration 6 months

Rationale

Summary

Nayzilam (clobazam) is a benzodiazepine. Nayzilam's mechanism of action is not fully understood but is thought to involve potentiation of GABAergic neurotransmission resulting from binding at the benzodiazepine site of the $GABA_A$ receptor. The safety and effectiveness of Nayzilam in pediatric patients less than 12 years of age have not been established (1).

Prior approval is required to ensure the safe, clinically appropriate, and cost-effective use of Nayzilam while maintaining optimal therapeutic outcomes.

References

1. Nayzilam [package insert]. Smyrna, GA: UCB, Inc.; January 2023.

Policy History

Date	Action
October 2019	Addition to PA
December 2019	Annual review
May 2020	Revised requirement from t/f two benzodiazepines to "patient has a contraindication to oral benzodiazepines". Also added no dual therapy with another BZD nasal spray requirement
June 2020	Annual review
December 2020	Annual review
September 2021	Annual review and reference update
September 2022	Annual review
December 2022	Annual editorial review. Per FEP, removed initiation requirement for patient to have a contraindication to an oral benzodiazepine and added requirement for this medication to be used for acute seizures
September 2023	Annual review and reference update
December 2023	Annual review

May 2024	Reworded no dual therapy requirement to no concurrent therapy with another PA benzodiazepine and added Libervant to Appendix 1
September 2024	Annual review

Keywords

This policy was approved by the FEP® Pharmacy and Medical Policy Committee on September 6, 2024 and is effective on October 1, 2024.

Appendix 1 - List of Prior Authorization (PA) Benzodiazepines

Generic Name	Brand Name
diazepam	Libervant
diazepam	Valtoco
midazolam	Nayzilam