

CROHN'S DISEASE DRUGS				
DRUG NAME	BRANDS REIMBURSED	DOSAGE FORM/ STRENGTH	REIMBURSEMENT CRITERIA	STANDARD APPROVAL DURATION
Infliximab	Remicade	100mg/10mL intravenous infusion	<p>Treatment of <u>fistulizing</u> Crohn's Disease in patients who have:</p> <ul style="list-style-type: none"> Actively draining perianal or enterocutaneous fistula(e) that have recurred or persisted despite a course of antibiotic therapy (ciprofloxacin and/or metronidazole) and immunosuppressive therapy (azathioprine or 6-mercaptopurine). <p><i>Note: Any intolerance(s) or contraindication(s) to treatment with required alternative(s) must be described in detail.</i></p> <p>Renewal will be considered for patients with resolution of fistulae.</p> <p>The planned dosing regimen for the requested biologic should be provided. The recommended dose for the treatment of Crohn's Disease is 5mg/kg/dose at 0, 2 and 6 weeks followed by 5mg/kg/dose every 8 weeks.</p>	<p>Initial: 3 months</p> <p>Renewal: 1 year</p>
Adalimumab	Humira	40mg/0.8mL prefilled syringe and 40mg/0.8mL prefilled pen for subcutaneous injection	<p>For the treatment of fistulising Crohn's disease with concomitant luminal disease in patients who meet the following criteria;</p> <ul style="list-style-type: none"> Patient with actively draining perianal or enterocutaneous fistula(e) that have recurred or persist despite a course of appropriate antibiotic therapy (e.g. ciprofloxacin and/or metronidazole) AND immununosuppressive therapy (e.g. azathioprine or 6-mercaptopurine) AND Harvey Bradshaw Index (HBI) score ≥ 7 <p>The dose that will be considered is Adalimumab (Humira) 160 mg at week zero, 80 mg at week two, followed by 40 mg every two weeks.</p> <p>Renewal will be considered based on the response to therapy.</p> <p>The dose that will be considered on renewals is Adalimumab (Humira) 40 mg every two weeks. All requests for higher doses will not be approved.</p>	<p>Initial: 3 months</p> <p>Renewal: 3 months to 1 year pending fistula(e) resolution</p>