RATIONALE FOR INCLUSION IN PA PROGRAM

Background
The selective serotonin receptor agonists, or “triptans”, are a class of medications that have the ability to stop a migraine headache at its earliest signs. Triptans work by binding to serotonin receptors in the brain. By mimicking the actions of serotonin, triptans cause the blood vessels to constrict and prevent some nerves from transmitting signals to the brain, effectively blocking the pain associated with migraine headaches. Each triptan medication affects a slightly different number of serotonin receptors, but all work in a similar fashion (1). Zecuity is a battery-powered sumatriptan patch that uses an electrical current to transport the drug through the skin over four hours (2).

Regulatory Status
FDA-approved indication: Zecuity is a serotonin (5HT) 1b/1d receptor agonist (triptan) indicated for the acute treatment of migraine with or without aura in adults (2).

Limitations of Use: (2)
1. Use only after a clear diagnosis of migraine has been established.
2. Not intended for the prevention of migraine attacks

Zecuity has several contraindications, especially when taken in high doses. Life-threatening disturbances of cardiac rhythm and myocardial infarction have been reported, as well as cerebrovascular stroke (2). Excessive use of triptans can lead to medication overuse headache (MOH) (2).

Safety and effectiveness in pediatric patients have not been established (2).

Summary
Zecuity is indicated for the acute treatment of migraine attacks with or without aura in adults. This medication is not intended for the prophylactic therapy of migraine or for use in the management of hemiplegic or basilar headaches. This class of medications has potentially serious side effects, especially when taken in high doses. Life-threatening disturbances of cardiac rhythm and myocardial infarction have been reported, as well as stroke (3).
Prior authorization is required to ensure the safe, clinically appropriate and cost effective use of Zecuity while maintaining optimal therapeutic outcomes.

References