



**POTELIGEO  
(mogamulizumab-kpkc)**

**RATIONALE FOR INCLUSION IN PA PROGRAM**

**Background**

Poteligeo (mogamulizumab-kpkc) is a defucosylated, humanized IgG1 kappa monoclonal antibody that binds to CCR4, a G protein-coupled receptor for CC chemokines that is involved in the trafficking of lymphocytes to various organs. Poteligeo binding targets a cell for antibody-dependent cellular cytotoxicity (ADCC) resulting in depletion of the target cells. CCR4 is expressed on the surface of some T-cell malignancies (1).

**Regulatory Status**

FDA-approved indication: Poteligeo is a CC chemokine receptor type 4 (CCR4)-directed monoclonal antibody indicated for the treatment of adult patients with relapsed or refractory mycosis fungoides or Sézary syndrome after at least one prior systemic therapy (1).

Poteligeo may cause fatal and life-threatening skin adverse reactions, including Stevens-Johnson syndrome (SJS) and toxic epidermal necrolysis (TEN). Monitor patients for rash throughout the treatment course. Management of dermatologic toxicity includes topical corticosteroids and interruption or permanent cessation of Poteligeo. Discontinue Poteligeo permanently for SJS or TEN or for any life-threatening (Grade 4) reaction. For possible SJS or TEN, interrupt Poteligeo and do not restart unless SJS or TEN is ruled out and the cutaneous reaction has resolved to Grade 1 or less (1).

Fatal and life-threatening infusion reactions can occur with Poteligeo. Most reactions occur during or shortly after the first infusion. Consider premedication (such as diphenhydramine and acetaminophen) for the first infusion of Poteligeo in all patients. Monitor patients closely for signs and symptoms of infusion reactions and interrupt the infusion for any grade reaction and treat promptly (1).

Fatal and life-threatening infections and immune-mediated complications can also occur with Poteligeo. Patients should be monitored for signs and symptoms of infection and treat promptly. Interrupt or permanently discontinue Poteligeo as appropriate for suspected immune-mediated adverse reactions. Consider the benefit/risk of Poteligeo in patients with a history of autoimmune disease (1).



**BlueCross  
BlueShield**

Federal Employee Program.

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The safety and effectiveness of Poteligeo in pediatric patients have not been established (1).

### **Summary**

Poteligeo (mogamulizumab-kpkc) is a defucosylated, humanized IgG1 kappa monoclonal antibody that binds to CCR4, a G protein-coupled receptor for CC chemokines that is involved in the trafficking of lymphocytes to various organs. Poteligeo binding targets a cell for antibody-dependent cellular cytotoxicity (ADCC) resulting in depletion of the target cells. CCR4 is expressed on the surface of some T-cell malignancies. The safety and effectiveness of Poteligeo in pediatric patients have not been established (1).

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

### **References**

1. Poteligeo [package insert]. Bedminster, NJ: Kyowa Kirin, Inc.; August 2018.