



Division: Pharmacy Policy	Subject: Prior Authorization Criteria
Original Development Date: Original Effective Date: Revision Date:	May 14, 2015  February 21, 2018

**BRISDELLE® (paroxetine)**

**LENGTH OF AUTHORIZATION:** UP TO 12 MONTHS

**APPROVAL INDICATIONS FOR INITIAL THERAPY:**

1. Must be  $\geq 18$  years of age.
2. Must have a moderate to severe vasomotor symptoms associated with menopause
3. Must have a trial and failure of preferred agents with the same indication (e.g. Premarin, estradiol etc.) or documented contraindication to preferred agents, such as current, past or suspected breast cancer, estrogen-dependent neoplasia, genital bleeding, endometrial hyperplasia, thromboembolic disease, liver dysfunction, hypersensitivity to menopausal hormone therapy, or porphyria cutanea tarda.

**DOSING & ADMINISTRATION:**

- The recommended dosage of BRISDELLE is 7.5mg once daily at bedtime.
- Dosage Form: 7.5mg capsule