



### COMPENDIA TRANSPARENCY TRACKING FORM FOR ONCOLOGY OFF-LABEL USES DERIVED FROM GUIDELINES

**DATE:** May 1, 2025

**DRUG NAME:** Budesonide

OFF-LABEL USE: Diarrhea, Chemotherapy-induced, refractory to loperamide

COMPENDIA TRANSPARENCY REQUIREMENTS				
1	Provide criteria used to evaluate/prioritize the request (therapy)			
2	Disclose evidentiary materials reviewed or considered			
3	Provide names of individuals who have substantively participated in the review or disposition of the request and disclose their potential			
	direct or indirect conflicts of interest			
4	Provide meeting minutes and records of votes for disposition of the request (therapy)			

# **EVALUATION/PRIORITIZATION CRITERIA: C,** \*to meet requirement 1(C, A, L)

CODE	EVALUATION/PRIORITIZATION CRITERIA		
Α	Treatment represents an established standard of care or significant <b>advance</b> over current therapies		
С	Cancer or cancer-related condition		
Е	Quantity and robustness of evidence for use support consideration		
L	Limited alternative therapies exist for condition of interest		
Р	Pediatric condition		
R	Rare disease		
S	Serious, life-threatening condition		

Note: a combination of codes may be applied to fully reflect points of consideration [eg, therapy may represent an advance in the treatment of a life-threatening condition with limited treatment alternatives (ASL)]

### **EVIDENCE CONSIDERED:**

\*to meet requirements 2 and 4

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A CONTRACTOR	Micromedex
U=	MICHOLICACA

CITATION	LITERATURE CODE
Bossi P, Antonuzzo A, Cherny NI, Rosengarten O, Pernot S, Trippa F, Schuler U, Snegovoy A, Jordan K, Ripamonti CI; ESMO Guidelines Committee. Diarrhoea in adult cancer patients: ESMO Clinical Practice Guidelines. Ann Oncol. 2018 Oct 1;29(Suppl 4):iv126-iv142. doi: 10.1093/annonc/mdy145. PMID: 29931177.	
Lenfers BH, Loeffler TM, Droege CM, Hausamen TU. Substantial activity of budesonide in patients with irinotecan (CPT-11) and 5-fluorouracil induced diarrhea and failure of loperamide treatment. Ann Oncol. 1999 Oct;10(10):1251-3. doi: 10.1023/a:1008390308416. PMID: 10586346.	S

Literature evaluation codes: S = Literature selected; 1 = Literature rejected = Topic not suitable for scope of content; 2 = Literature rejected = Does not add clinically significant new information; 3 = Literature rejected = Methodology flawed/Methodology limited and unacceptable; 4 = Other (review article, letter, commentary, or editorial)

## **CONTRIBUTORS:**

\*to meet requirement 3

PACKET PREPARATION	DISCLOSURES
Stacy LaClaire, PharmD	None
Deanna Rossi	None

## **ASSIGNMENT OF RATINGS:**

\*to meet requirement 4

	EFFICACY	STRENGTH OF RECOMMENDATION	STRENGTH OF EVIDENCE
MERATIVE MICROMEDEX	Evidence Favors Efficacy	Class IIB	В

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