Epidiolex (cannabidiol)



NEW PRODUCT SLIDESHOW



Introduction

- Brand name: Epidiolex
- Generic name: Cannabidiol
- Pharmacological class: Cannabinoid
- Strength and Formulation: 100mg/mL; oral soln; strawberry-flavored; contains dehydrated alcohol, sesame seed oil
- Manufacturer: Greenwich Biosciences
- How supplied: Oral soln—100mL (w. dosing syringes + adapter)
- Legal Classification: CV

Epidiolex



Indication

 Treatment of seizures associated with Lennox-Gastaut syndrome (LGS) or Dravet syndrome (DS)

Dosage & Administration

- Use calibrated measuring device
- ≥2yrs: Initially 2.5mg/kg twice daily, may increase to 5mg/kg twice daily after 1 week
- May further increase in weekly increments of 2.5mg/kg twice daily (or no sooner than every other day) as tolerated; max
 10mg/kg twice daily

Dosage & Administration

- Hepatic impairment (moderate): initially
 - 1.25mg/kg twice daily up to 2.5mg/kg twice daily, max 5mg/kg twice daily
- Hepatic impairment (severe): initially 0.5mg/kg twice daily up to 1mg/kg twice daily; max 2mg/kg twice daily

Considerations for Special Populations

- Pregnancy: No adequate data on developmental risks in pregnant women
- Nursing mothers: Consider mother's clinical need and potential adverse effects on breastfed infant
- Pediatric: <2yrs: not established</p>
- Elderly: Trials did not include patients above 55yrs; use with caution
- Hepatic impairment: See Dosing

Warnings/Precautions

- Risk of hepatocellular injury
- Obtain ALT/AST and total bilirubin prior to, at 1 month, 3 months, and 6 months after initiation, and periodically thereafter
 - Also within 1 month after dose adjustments or concomitant drugs known to impact the liver
- Evaluate and consider more frequent monitoring if elevated liver enzymes at baseline

Warnings/Precautions

- Interrupt or discontinue if hepatic dysfunction occurs; discontinue if ALT/AST elevations >3xULN and bilirubin >2xULN, or sustained ALT/AST elevations >5xULN
- Monitor for somnolence and sedation
- Monitor for emergence or worsening of depression, suicidal thoughts/behavior or any unusual changes in mood/behavior

Warnings/Precautions

- Discontinue if hypersensitivity reactions occurs
- Withdraw gradually
- Avoid abrupt cessation

Interactions

- Potentiated by moderate or strong CYP3A4
 or CYP2C19 inhibitors: consider reducing Epidiolex dose
- Antagonized by strong CYP3A4 or CYP2C19 inducers: consider increasing Epidiolex dose

Interactions

- May potentiate UGT1A9 (eg, diflunisal, propofol, fenofibrate), UGT2B7 (eg, gemfibrozil, lamotrigine, morphine, lorazepam), CYP2C8 or CYP2C9 (eg, phenytoin) substrates: consider reducing dose of these
- May affect CYP1A2 (eg, theophylline, caffeine) or CYP2B6 (eg, bupropion, efavirenz) substrates: consider adjusting dose of these

Interactions

- Potentiates sensitive CYP2C19 substrates (eg, diazepam, clobazam): consider reducing dose of substrate Increased transaminase elevations with concomitant valproate and/or clobazam; monitor more frequently, consider discontinuation or dose adjustment May increase risk of somnolence and
 - sedation with concomitant CNS depressants, alcohol; monitor

Adverse Reactions

- Somnolence
- Sedation
- Decreased appetite
- Diarrhea
- Transaminase elevations
- Fatigue
- Malaise

- Asthenia
- Rash
- Insomnia
- Sleep disorders
- Poor quality sleep
- Infections
- Hypersensitivity reactions

Mechanism of Action

- The precise mechanisms by which Epidiolex exerts its anticonvulsant effect in humans are unknown
- Cannabidiol does not appear to exert its anticonvulsant effects through interaction with cannabinoid receptors

 The efficacy of Epidiolex for the treatment of seizures associated with LGS was established in 2 randomized, double-blind, placebo-controlled trials in patients aged 2 to 55yrs (Study 1 and Study 2)

- Study 1 (N=171) compared Epidiolex 20mg/kg daily vs placebo
- Study 2 (N=225) compared Epidiolex 10mg/kg daily and 20mg/kg daily vs placebo
- The primary efficacy measure in both trials was the percent change from baseline in the frequency of drop seizures (atonic, tonic, or tonic-clonic seizures) over the 14-week treatment period

- In both studies, the median percent change from baseline in the frequency of drop seizures was significantly greater for Epidiolex than for placebo
 - Study 1:-22% placebo vs -44% Epidiolex 20mg/kg (P = 0.01)
 - Study 2: -17% placebo vs -37% Epidiolex 10mg/kg and -42% Epidiolex 20mg/kg (both P <.01)

 The efficacy of Epidiolex for the treatment of seizures associated with Dravet syndrome was demonstrated in a single randomized, double-blind, placebocontrolled trial in patients aged 2 to 18yrs (Study 3; N=120)

- Patients received a dose of Epidiolex 20mg/kg daily or placebo
- The primary efficacy measure was the percent change from baseline in the frequency of convulsive seizures (all countable atonic, tonic, clonic, and tonicclonic seizures) over the 14-week treatment period

 The median percent change from baseline in the frequency of convulsive seizures was significantly greater for Epidiolex 20mg/kg daily than for placebo (-13% placebo vs -39% Epidiolex, P =0.01)

For more clinical trial data, see full labeling

New Product Monograph

 For more information view the product monograph available at:

https://www.empr.com/epidiolex/drug/34888/