### Criteria for Use of Hylan G-F 20 (Synvisc®) and Sodium Hyaluronate (Hyalgan®)

## I. Indications for VA Patients

Synvisc® and Hyalgan®, regulated in the U.S. as devices rather than drugs, are indicated for the treatment of pain in osteoarthritis (OA) of the knee in patients who meet the following criteria<sup>†</sup>:

- A. Osteoarthritis of the knee(s) (American College of Rheumatology criteria) confirmed by history, exam, x-ray, and synovial fluid analysis.
- B. Documented inadequate control of pain or intolerance to an adequate trial of acetaminophen (4 Grams/day), NSAIDs, intraarticular corticosteroid injections, and other non-narcotic or narcotic analgesics.
- C. Inadequate response to bracing and use of canes or crutches.
- D. Inadequate response to measures such as weight loss and physical therapy.
- E. Surgery is not an option due to concurrent medical conditions that preclude the patient as candidate for surgery. These agents may also be considered as a bridging option before resorting to surgery.

#### II. Dosage and Administration

- A. One treatment cycle of Synvisc® consists of three weekly intra-articular injections administered by a health care provider following strict aseptic technique. Each injection syringe contains 16mg of Hylan G-F20. The treatment cycle of Hyalgan® consists of five weekly intra-articular injections, each containing 20mg of sodium hyaluronate.
- B. Subcutaneous lidocaine or another local anesthetic should be injected prior to administration of Synvisc<sup>®</sup> and Hyalgan<sup>®</sup>.
- C. Removal of synovial fluid or effusion, if present, should precede Synvisc® or Hyalgan® therapy.

### III. Warnings/Adverse Events

- A. The use of Synvisc® and Hyalgan® is contraindicated in patients with known hypersensitivity to hyaluronate preparations.
- B. Synvisc® and Hyalgan® should not be injected into knees of patients having skin or knee joint infections or skin diseases at the injection site area.
- C. Transient pain and/or swelling of the injected joint have been reported after intra-articular injection of Synvisc® and Hyalgan®.
- D. The safety of Synvisc® and Hyalgan® has not been studied in pregnant women, and thus, should be avoided during pregnancy.

#### IV. Monitoring Parameters

- A. Patients with allergies to avian proteins, feathers, and egg products should be monitored for allergic reactions, since Synvisc® and Hyalgan® are extracted from combs of roosters.
- B. Drug Interactions
  - Concurrent administration of other medications into the knee during Synvisc® or Hyalgan® therapy may compromise the safety and effectiveness of the agents and is, therefore, discouraged.
  - 2. Disinfectants containing quaternary ammonium salts should not be used for skin preparation as hyaluronic acid can precipitate under such conditions.

# V. Outcomes

Studies have shown Synvisc® and Hyalgan® to reduce pain and functional impairment associated with OA of the knee. One treatment cycle may provide up to six months of pain relief; however, the safety and effectiveness of repeat treatment cycles has not been well established.

#### VI. Cost Information

The cost of drug for one treatment cycle of Synvisc® (3 weekly injections) into ONE knee is \$493.28, and that of Hyalgan® (5 weekly injections) is \$448.50. (Clinic cost for drug administration not included).

Nonsteroidal Anti-Inflammatory

Drugs (per month)

Ibuprofen 800mg tid \$1.87

Naproxen 500mg bid \$4.23 Diclofenac 75mg bid \$6.75 Sulindac 200mg bid \$2.39 Salsalate 1500mg bid \$2.83

Etodolac 300-400mg bid \$0.01-10.80

Nabumetone 750mg bid \$45.75 Celecoxib 100-200mg qd \$53.25-90.12 Rofecoxib 12.5 or 25mg qd \$45.00 Tolmetin 400mg tid \$13.50 Indomethacin 25mg tid \$2.70 Piroxicam 20mg qd \$1.20 Glucocorticoids (per injection)
Triamcinolone acetonide inj. 40mg \$3.18
Methylprednisolone acetate inj. 40mg \$1.34
Prednisone 10-40mg QD \$1.50-\$6.17 per mth
Analgesics (per month)
Acetaminophen 1gm QID \$6.00
APAP 650mg/propox. 100mg QID \$15.96

Tramadol 50mg tid \$34.84

<sup>†</sup> It is strongly recommended that the use of these agents be restricted to specialists in rheumatology and orthopedics.