

## **Protocol for Vuity® (pilocarpine hydrochloride 1.25% ophthalmic solution)**

**Approved July 2022**

**Background:** *Presbyopia is the gradual loss of the eyes' ability to focus on nearby objects. It's a natural part of aging.*

**Vuity** is a cholinergic muscarinic receptor agonist indicated for the treatment of presbyopia in adults.

### **Criteria for approval:**

1. Patient has a diagnosis of presbyopia
2. Patient is usually 40 to 55 years of age
3. Medication is prescribed by or in consultation with an ophthalmologist or optometrist
4. Patient has tried and has inadequate response, intolerance, or contraindication to the use of corrective eyeglasses or contact lenses
5. Vuity is not prescribed concurrently with any other ophthalmic pilocarpine formulation
6. Medication is prescribed in accordance with Food and Drug Administration (FDA) established indication and dosing regimens or in accordance with medically appropriate off-label indication and dosing according to American Hospital Formulary Service, Micromedex, Clinical Pharmacology, Wolters Kluwer Lexi-Drugs (Lexicomp), national guidelines, or other peer-reviewed evidence

### **Continuation of therapy:**

1. Patient is responding positively to therapy
2. Medication is prescribed in accordance with Food and Drug Administration (FDA) established indication and dosing regimens or in accordance with medically appropriate off-label indication and dosing according to American Hospital Formulary Service, Micromedex, Clinical Pharmacology, Wolters Kluwer Lexi-Drugs (Lexicomp), national guidelines, or other peer-reviewed evidence

**Initial Approval Duration:** 6 months

**Renewal Approval Duration:** 12 months

### **References:**

1. Vuity [prescribing information]. AbbVie Inc. North Chicago, IL 60064. October 2021
2. Clinical Pharmacology® Gold Standard Series [Internet database]. Tampa FL. Elsevier 2019. Updated periodically