



RELiZORB® (IMMOBILIZED LIPASE) CARTRIDGE is indicated for use in pediatric patients (ages 5 years and above) and adult patients to hydrolyze fats in enteral formula. RELiZORB was issued a permanent HCPCS code (B4105) by the Centers for Medicare and Medicaid Services (CMS).

Peer to Peer Preparation

1

Have patient clinical documentation readily available, including clinic notes and growth charts

2

Be prepared to discuss your rationale for medical necessity

3

Explain why RELiZORB may be right for the patient, including potential benefits and risks

Clinical Support

- Two clinical trials covering both pediatric and adult patients for RELiZORB have been completed, which have both met their primary endpoints, both found use of RELiZORB to be safe and effective, and their results have been published in peer-reviewed journals.

For more information about the clinical trials, including efficacy and safety, visit www.relizorb.com.

- There is no clinical safety or efficacy data supporting the use of PERT capsules in enteral feeding.¹ PERT capsules are indicated for oral use only and are not formulated to be crushed or added to enteral feeding systems.¹

PERTs used with enteral feeding may result in serious problems, including clogging, over-exposure to enzymes, and risks to caregivers due to crushing of pills and accidental inhalation of crushed PERTs.²

Community Support

- In 2019, the Journal of Cystic Fibrosis released a statement supporting the widespread use of RELiZORB within the CF community.³

- In 2020, for non-CF patients, a position paper by the North American Society for Pediatric Gastroenterology, Hepatology, and Nutrition (NASPGHAN) deemed it reasonable and prudent to extrapolate the RELiZORB data for treatment of patients with exocrine pancreatic insufficiency (EPI) caused by rarer diseases.⁴

Note: RELiZORB is indicated for children aged 5 and above.

- The NASPGHAN Pancreas Committee recommends the use of RELiZORB in children with chronic pancreatitis who require enteral feedings.⁴

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1. Berry, A.J. Pancreatic enzyme replacement therapy during pancreatic insufficiency. *Nutr Clin Pract.* 2014;29(3):312-321.

2. Ferrie S, Graham C, Hoyle M. Pancreatic enzyme supplementation for patients receiving enteral feeds. *Nutr Clin Pract.* 2011;26(3):349-351.

3. Schwarzenberg SJ, Borowitz B. Challenging barriers to an option for improved provision of enteral nutrition. *Journal of Cystic Fibrosis.* 2019 Jul;18(4):447-449.

4. Freeman AJ, Maqbool A, Bellin MD, et al. Medical Management of Chronic Pancreatitis in Children: A Position Paper by the North American Society for Pediatric Gastroenterology, Hepatology, and Nutrition Pancreas Committee. *Journal of Pediatric Gastroenterology and Nutrition.* 2021 Feb;72(2):324-340.

Disclaimer: The above information is intended to be used only by healthcare professionals and includes and provides information that may be helpful in responding to payer questions during a peer-to-peer engagement. All patient reimbursement discussions and engagements should be based on the provider's evaluation of the patient and their condition.

Safety: RELiZORB is for use with enteral feeding only; do not connect to intravenous or other medical tubing. Medications should not be administered through RELiZORB. Please see Instructions for Use for full safety information at www.relizorb.com.