The teduglutide-based pharmaceutical specialty is eligible for reimbursement among eligible beneficiaries, for the treatment of short-bowel syndrome type 1 (SBS, terminal jejunostomy), type 2 (SBS, jejuno-colic anastomosis) or type 3 (SBS, jejuno-ileal anastomosis) as a result of intestinal resection and underlying chronic intestinal insufficiency characterized by reduction of intestinal function below the minimum required for adequate nutrient absorption and requiring parenteral nutritional support to maintain energy, protein, hydroelectrolyte and micro-nutrient balance and to maintain the health status and/or growth of the entitled.

Belgian reimbursement criteria

- / Patient with minimum age of 1 year.
- / The beneficiary is treated by a specialist doctor experienced in the treatment of SBS and associated with Belgian center that has signed the convention for Extra-muros care in the context of parenteral nutrition for adults and/ or children with the NIHDI (RIZIV/INAMI).
- / The beneficiary has no active or suspected cancer and has no antecedents of cancer in the gastrointestinal system including the hepatobiliary system during the last 5 years.
- / Before initiating treatment, a colonoscopy with exeresis of any polyps must be performed on all beneficiaries from the age of 12 years. For children under 12 years of age, a test for faecal occult blood must be performed.
- / Reimbursement is authorized, based on an electronic application submitted by the prescribing physician-specialist identified and authenticated through the eHealth platform.

PN/IV stable phase

Parenteral support with fluid and nutrients has been optimized and stable since at least 3 months after the end of the minimal intestinal adaptation period. It is assumed that the beneficiary is in stable phase if he/she meets the following criteria:





Jejunocolic Jejunoileal anastomosis anastomosis = type 2 = type 3



/ Needed for parenteral support for at least 3 months. covering at least 50% of caloric needs and/or hydroelectrolyte balance.

AND

/ Over the last 3 months, the **volume** of parenteral support has changed by no more than 10%.

AND

/ The likelihood that parenteral support can be reduced and/or discontinued in the following 6 months is considered low by the treating physician based on the recipient's anatomical, physiological and medical profile.

AND

/ In beneficiaries with a terminal jejunostomy, there is no chance of restoring continuity of the bowel

Start Revestive® treatment in the induction period





Reimbursement Criteria for Paediatric patients in a Nutshell § 10660000





