Introduction

Indication[1]

Foslevodopa/foscarbidopa solution is indicated for the treatment of **motor fluctuations in patients with advanced levodopa-responsive Parkinson's disease (PD) who do not have satisfactory control of severe, debilitating motor fluctuations and hyper-/dyskinesia** despite optimized treatment with available combinations of PD medicinal products.

Foslevodopa/foscarbidopa should only be prescribed by neurologists who are experienced in the treatment of patients with PD.

Administration[1]

Foslevodopa/foscarbidopa is administered via **24-hour continuous SC infusion**, in the abdomen, avoiding a 5-cm radius around the navel and not be infused into areas where the site is tender, bruised, red or hard to the touch.

The infusion set (cannula) can remain in place for up to **3 days**.

Preparation and Equipment[1]

Employ **aseptic technique** for preparation and administration. Use the **VYAFUSER™ Pump** and only sterile, single-use components (syringe, infusion set, vial adapter).

Click to open the product monograph


Product Monograph
Including Patient Medication Information
PrVYALEV®

foslevodopa/foscarbidopa Solution
For subcutaneous infusion use
240 mg/mL foslevodopa and 12 mg/mL foscarbidopa
Antiparkinson Agent
ATC Code: N04BA0

AbbVie Corporation
8401 Trans-Canada Highway
St-Laurent, Qc H4S 1Z1

Date of Authorization:
2026-04-14

Control Number: 297629

VYALEV (foslevodopa/foscarbidopa solution) Page 1 of 53

Note: This tool does not include all the information from the product monograph. Please refer to the complete document for more details about foslevodopa/foscarbidopa. 1. AbbVie Corporation. PrVYALEV™ Product Monograph. April 14, 2026/p5/Indications / p11/ Administration. www.abbvie.ca/content/dam/abbvie-dotcom/ca/en/documents/products/VYALEV_PM_EN.pdf
SC, subcutaneous.

Subcutaneous Drug Delivery

Subcutaneous (SC) route of administration

- SC administration involves passing a small needle through the epidermal and dermal layers and into the fatty subcutaneous tissue.[1]
- Drug reaches bloodstream via capillaries (small-molecule) or the lymphatic system (large-molecule).[1]
- With subcutaneous administration, drug diffuses very slowly with a sustained rate of absorption.[2]



Expert insights video. Click to view
Alexis Truax, RN
Debra Johnston, RN

Continuous subcutaneous infusion (CSCI)

CSCI represents an effective method of drug administration when continuous dosing is desired and/or the oral route is compromised.[2,3]

Diagrammatic representation of SC drug injection

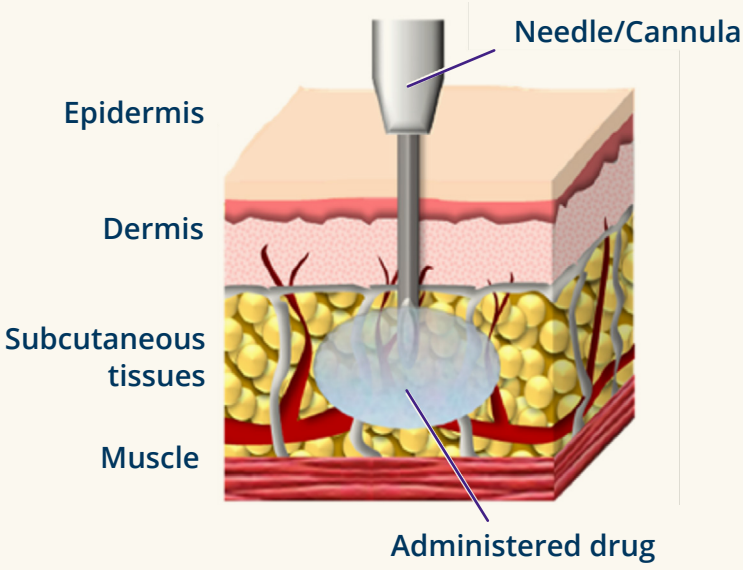
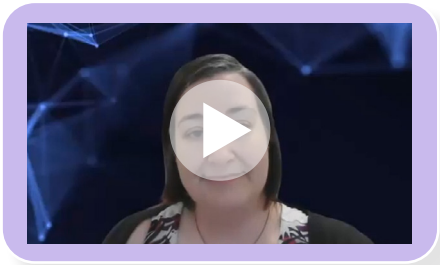


Image adapted from Kim H, et al. *Sci Rep*. 2017;7(1):9613.

1. Dychter SS, et al. *J Infus Nurs*. 2012;35(3):154–160; 2. Kim H, *et al. Sci Rep*. 2017;7(1):9613; 3. Baker J, et al. *BMC Palliative Care*. 2020;19:99.

Infusion-Site Reactions (62.2%)[1]

- Erythema
- Pain
- Edema
- Nodule
- Bruising
- Hemorrhage
- Induration
- Pruritus
- Papule
- Extravasation
- Inflammation
- Mass
- Warmth
- Hematoma
- Pallor
- Rash
- Swelling



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Alexis Truax, RN

Infusion-Site Infections (28.4%)[1]

- Cellulitis
- Abscess

Monitoring for Infusion-Site Reactions and Infections[1]

Careful monitoring of infusion-site reactions and infections is recommended.

In the clinical studies, **infusion-site events were the most common reported adverse events** and most common event that led to study discontinuation.

If any unusual signs appear **(redness, pain, swelling) at the infusion site, or worsen**, the patient should be advised to consult a healthcare professional.

More frequent rotation (infusion set replacement every 3 days maximum) of the infusion site is recommended to reduce the risk.

It is recommended that new infusion sites **be at least 2.5 cm from the sites used within the previous 12 days**.

In some patients, dose reduction contributed to reduce the occurrence of infusion site event.

Click to open
the product monograph



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1. AbbVie Corporation. PrVYALEV™ Product Monograph. April 14, 2026/p44/Instructions for Use/ p16/Infusion Site Reactions and Infections/ p17-18 Clinical Trial Adverse Reactions. www.abbvie.ca/content/dam/abbvie-dotcom/ca/en/documents/products/VYALEV_PM_EN.pdf.

Learn More: Factors Contributing to Infusion-Site Reactions

Non-Infectious Infusion-Site Reactions

Commonly seen with subcutaneous infusions of many medications

Factors that may contribute to infusion-site reactions[1]

- Concentration/tonicity of medication
- pH of solution
- Type of cannula
- Duration of cannula insertion
- Selection of site

Expert Insights: First Steps in Management of Skin Reactions



Expert insights video. Click to view
Lynne H. Robertson, Dermatologist

Assess/Observe

- Redness/rash?
- Pain?
- Bruising, bleeding?
- Swelling/nodule?
- Itching?
- Leakage of fluid at site?
- Rash?

Consider

Removing cannula and tubing & obtaining new infusion set

Placing new cannula >5 cm away from site and >2.5 cm away from any other site used within the last 12 days

1. Cleary NM, O'Gorman *A . BMJ Supportive & Palliative Care* 2023;13:e948–e950. doi:10.1136/spcare-2022-00390.
Expert Opinion, Dr. Lynne H. Robertson, October 2024.

Expert Insights: First Steps in Management of Skin Infections



Expert insights video. Click to view
Lynne H. Robertson, Dermatologist

When possible, all patients should have cultures taken

If patient is systemically well

→ Treat patient with **oral antibiotics**

If patient is systemically unwell

- Fever
- Chills
- Lymphangitic streaking
- Hypotension
- Severe pain

→ Treat patient with **IV antibiotics**

Expert Opinion, Dr. Lynne H. Robertson, October 2024.
IV, intravenous.