

Pharmaceutical Management Agency

# Update

# New Zealand Pharmaceutical Schedule

Effective 1 October 2017

Cumulative for September and October 2017



## Contents

Summary of PHARMAC decisions effective 1 October 2017 .....	4
New tender listings for 1 October 2017 .....	5
New listings.....	5
Ferric carboxymaltose infusion (Ferinject).....	5
Ciprofloxacin 0.3% eye drops.....	5
Changed listings.....	6
Nicotine replacement therapy (NRT) – Pharmacist provision without a prescription .....	6
Venlafaxine brand change.....	6
Curam (amoxicillin with clavulanic acid) liquid .....	6
Metoprolol succinate sole supply .....	6
Macrogol 400 and propylene glycol eye drops (Systane Unit Dose) .....	6
Supply issues.....	7
Span-K now available .....	7
Cholvastin (pravastatin).....	7
Ispaghula (psyllium) husk – Bonvit brand new listing.....	7
Other.....	7
Schedule subscription enquiries .....	7
Lamotrigine (Motrig).....	7
Testosterone (Androderm) – delisting of 2.5 mg per day transdermal patch.....	8
Special Authority symbols .....	8
News in brief.....	8
Tender News.....	9
Looking Forward .....	10
Sole Subsidised Supply Products cumulative to October 2017 .....	11
New Listings.....	24
Changes to Restrictions, Chemical Names and Presentations .....	27
Changes to Subsidy and Manufacturer’s Price.....	29

---

Changes to Brand Name ..... 31  
Changes to PSO..... 31  
Delisted Items ..... 32  
Items to be Delisted ..... 35  
Index ..... 37

## Summary of PHARMAC decisions

EFFECTIVE 1 OCTOBER 2017

### New listings (pages 24-25)

- Hyoscine butylbromide (Buscopan) tab 10 mg
- Ispaghula (psyllium) husk (Bonvit) powder for oral soln, 500 g OP – Only on a prescription
- Ferric carboxymaltose (Ferinject) inj 50 mg per ml, 10 ml vial – Special Authority – Retail pharmacy
- Bisoprolol fumarate (Bosvate) tab 2.5 mg, 5 mg and 10 mg, 90 tab pack
- Carvedilol (Carvedilol Sandoz) tab 6.25 mg, 12.5 mg and 25 mg
- Metoprolol succinate (Betaloc CR) tab long-acting 190 mg
- Nifedipine (Adalat Oros) tab long-acting 30 mg and 60 mg
- Finasteride (Ricit) tab 5 mg – Special Authority – Retail pharmacy
- Escitalopram (Apo-Escitalopram) tab 10 mg and 20 mg

### Changes to restrictions (page 27)

- Hyoscine butylbromide tab 10 mg (Buscopan and Gastrosoothe) and inj 20 mg, 1 ml (Buscopan) – amended chemical name
- Paroxetine (Apo-Paroxetine) tab 20 mg – Brand Switch Fee removed
- Nicotine (Habitrol) patch 7 mg, 14 mg and 21 mg, lozenge 1 mg and 2 mg and gum (fruit and mint) 2 mg and 4 mg – Pharmacist able to provide without prescription
- Ciprofloxacin (Ciloxan) eye drops 0.3%, 5 ml OP – amended restriction

### Increased subsidy (page 29)

- Olsalazine (Dipentum) tab 500 mg and cap 250 mg
- Permethrin (Lyderm) crm 5%, 30 g OP
- Paracetamol (Paracare) oral liq 120 mg per 5 ml
- Methotrexate (Hospira) inj 2.5 mg per ml, 2 ml

### Decreased subsidy (page 29)

- Nystatin (m-Nystatin) oral liq 100,000 u per ml, 24 ml OP
- Multivitamin renal (Clinicians Renal Vit) cap
- Metoprolol succinate (Betaloc CR) tab long-acting 47.5 mg and 95 mg
- Lidocaine [lignocaine] hydrochloride (Xylocaine Viscous) oral (gel) soln 2%
- Risperidone (Actavis) tab 0.5 mg, 1 mg, 2 mg, 3 mg and 4 mg

## New tender listings for 1 October 2017

- Amoxicillin (Alphamox 250) grans for oral liq 250 mg per 5 ml
- Bisoprolol fumarate (Bosvate) 2.5 mg, 5 mg and 10 mg tab
- Carvedilol (Carvedilol Sandoz) 6.25 mg, 12.5 mg and 25 mg tab
- Escitalopram (Apo-Escitalopram) 10 mg and 20 mg tab
- Finasteride (Ricit) 5 mg tab
- Hyoscine butylbromide (Buscopan) 10 mg tab
- Metoprolol succinate (Betaloc CR) 190 mg tab
- Nifedipine (Adalat Oros) 30 mg and 60 mg long-acting tab



Amoxicillin (Alphamox 250) grans for oral liq 250 mg per 5 ml will be listed from 21 September 2017. This is being listed earlier than the notified listing date (1 December 2017) due to increased demand for this presentation.

---

## New listings

### Ferric carboxymaltose infusion (Ferinject)

Ferric carboxymaltose injection (Ferinject) will be listed from 1 October 2017, funded for patients with iron-deficiency anaemia meeting Special Authority criteria. There will be regional variation in how these services are provided in primary care and prescribers will need to liaise with their local DHB. More information can be found on our website at: <https://www.pharmac.govt.nz/news/notification-2017-09-11-iron-infusions/>

### Ciprofloxacin 0.3% eye drops

From 1 October 2017, the subsidy by endorsement restriction applying to ciprofloxacin 0.3% eye drops will be amended to include second line treatment of chronic suppurative otitis media (CSOM).

## Changed listings

### **Nicotine replacement therapy (NRT) – Pharmacist provision without a prescription**

From 1 October 2017, Pharmacists will be able to authorise funded nicotine replacement therapy products without prescription. The Schedule rules will be amended from 1 October 2017 to allow this change. More information about this change can be found on our website: <https://www.pharmac.govt.nz/information-for/>

Pharmacist provision of funded emergency contraceptive pill (levonorgestrel tablets) (ECP) will be implemented from 1 December 2017, not 1 October 2017 as originally proposed.

### **Venlafaxine brand change**

Enlifax XR is the only funded brand of venlafaxine. People who want to keep using another brand of venlafaxine can ask their pharmacist about price and ongoing availability. Find out more about the change here:

<https://www.pharmac.govt.nz/medicines/my-medicine-has-changed/venlafaxine/>

### **Curam (amoxicillin with clavulanic acid) liquid**

Curam granules for oral liquid 50 mg with 12.5 mg clavulanic acid is listed as an "Original Pack" (OP). Pharmacists' software automatically claims an OP (or OPs) for each dispensing, so wastage cannot be claimed. We listed this presentation of Curam with the OP rule (rather than apply wastage) as it is supplied with a syringe and adaptor with each bottle. This will ensure that each patient can get a syringe and adaptor.

### **Metoprolol succinate sole supply**

Betaloc CR will be Sole Supply from 1 March 2018. However, stock of the Myloc CR brand remains available for all strengths. For a full update on metoprolol succinate availability, go to our website:

<https://www.pharmac.govt.nz/medicines/my-medicine-has-changed/metoprolol/>

### **Macrogol 400 and propylene glycol eye drops (Systane Unit Dose)**

There is a potential out-of-stock for Systane Unit Dose eye drops 0.4% and propylene glycol 0.3%, 0.4 ml. We have temporarily listed an alternative, Systane Unit Dose Ultra until 1 November 2017.

## Supply issues

### Span-K now available

The Span-K brand of potassium chloride tab long-acting 600 mg (8 mmol) is now available. Slow-K and Duro-K, supplied via section 29 of the Medicines Act 1981, will be delisted from 1 November 2017.

### Cholvastin (pravastatin)

There is a short-term supply issue that may impact the availability of pravastatin (Cholvastin) 20 mg and 40 mg tablets during October 2017. To carefully manage remaining stock, and to avoid a patient level shortage, PHARMAC is asking pharmacists to dispense 'Core patients' in monthly lots, and 'Long Term Condition' patients as often as appropriate to meet that patient's compliance and adherence needs, until further notice, per Rule 4.1. Resupply is expected in late October 2017.

### Ispaghula (psyllium) husk – Bonvit brand new listing

The Bonvit brand of ispaghula (psyllium) husk powder for oral solution will be listed temporarily from 1 October 2017 due to a supply issue with Konsyl-D.

---

## Other

### Schedule subscription enquiries

We are no longer using a third party to manage our Schedule subscriptions. To subscribe to our list to receive email publications, go to [www.schedule.co.nz](http://www.schedule.co.nz). For all other subscription enquiries, please contact us at [enquiry@pharmac.govt.nz](mailto:enquiry@pharmac.govt.nz).

### Lamotrigine (Motrig)

The Motrig brand of lamotrigine 25 mg, 50 mg and 100 mg dispersible tablets will be delisted from 1 April 2018. Three alternative brands of these presentations of lamotrigine, (Lamictal, Arrow-Lamotrigine and Logem) remain listed.

## Testosterone (Androderm) – delisting of 2.5 mg per day transdermal patch

The 2.5 mg testosterone transdermal patch (Androderm) has been discontinued and will be delisted from 1 March 2018. Clinical advice from the Endocrinology Subcommittee of PTAC was that the 5 mg patch is a suitable alternative treatment option for most patients. For patients requiring a lower dose, alternative presentations of testosterone are available (capsule and injection).

## Special Authority symbols

We have become aware that the  $\leq$  and  $\geq$  symbols do not appear correctly on the online Special Authority forms accessed via Medtech users. We will be replacing these symbols with text from 1 October 2017 in all relevant forms. These text changes are not represented in this Update.

---

## News in brief

**Indinavir** (Crixivan) 200 mg and 400 mg capsules will be delisted from 1 March 2018.





# Tender News

## Sole Subsidised Supply changes – effective 1 November 2017

Chemical Name	Presentation; Pack size	Sole Subsidised Supply brand (and supplier)
Amoxicillin with clavulanic acid	Tab 500 mg with clavulanic acid 125 mg; 20 tab	Augmentin (GSK)
Amoxicillin with clavulanic acid	Grans for oral liq amoxicillin 50 mg with clavulanic acid 12.5 mg per ml; 100 ml OP	Curam (Sandoz)
Colecalciferol	Cap 1.25 mg (50,000 iu); 12 cap	Vit.D3 (Multichem)
Desmopressin acetate	Nasal spray 10 mcg per dose; 6 ml OP	Desmopressin-Ph&T (AFT)
Emulsifying ointment	Oint BP; 500 g	AFT (AFT)
Fentanyl	Patch 12.5 mcg per hour; 5 patch	Fentanyl Sandoz (Novartis)
Fentanyl	Patch 25 mcg per hour; 5 patch	Fentanyl Sandoz (Novartis)
Fentanyl	Patch 50 mcg per hour; 5 patch	Fentanyl Sandoz (Novartis)
Fentanyl	Patch 75 mcg per hour; 5 patch	Fentanyl Sandoz (Novartis)
Fentanyl	Patch 100 mcg per hour; 5 patch	Fentanyl Sandoz (Novartis)
Glucose [dextrose]	Inj 50%, 10 ml ampoule; 5 inj	Biomed (Biomed)
Glucose [dextrose]	Inj 50%, 90 ml bottle; 1 inj	Biomed (Biomed)
Imatinib mesilate	Cap 100 mg; 60 cap	Imatinib-AFT (AFT)
Imatinib mesilate	Cap 400 mg; 30 cap	Imatinib-AFT (AFT)
Ipratropium bromide	Aqueous nasal spray 0.03%; 15 ml OP	Univent (Rex Medical)
Isosorbide mononitrate	Tab 20 mg; 100 tab	ISMO 20 (Healthcare Logistics)
Ispaghula (psyllium) husk	Powder for oral soln; 500 g OP	Konsyl-D (Mylan)
Nicotinic acid	Tab 50 mg; 100 tab	Apo-Nicotinic Acid (Apotex)
Nicotinic acid	Tab 500 mg; 100 tab	Apo-Nicotinic Acid (Apotex)
Oestriol	Crn 1 mg per g with applicator; 15 g OP	Ovestin (Aspen)
Oestriol	Pessaries 500 mcg; 15 each	Ovestin (Aspen)
Paracetamol	Tab 500 mg – bottle pack; 1,000 tab	Pharmacare (API)
Paracetamol	Tab 500 mg – blister pack; 1,000 tab	Pharmacare (API)
Pegylated interferon alpha-2a	Inj 180 mcg prefilled syringe; 4 inj	Pegasys (Roche)
Permethrin	Lotn 5%; 30 ml OP	A-Scabies (AFT)
Pyridoxine hydrochloride	Tab 50 mg; 500 tab	Apo-Pyridoxine (Apotex)
Ranitidine	Oral liq 150 mg per 10 ml; 300 ml	Peptisoothe (AFT)
Ranitidine	Tab 150 mg; 500 tab	Ranitidine Relief (Mylan)

## Sole Subsidised Supply changes – effective 1 November 2017 (continued)

Chemical Name	Presentation; Pack size	Sole Subsidised Supply brand (and supplier)
Ranitidine	Tab 300 mg; 500 tab	Ranitidine Relief (Mylan)
Pine tar with trolamine laurilsulfate and fluorescein	Soln 2.3% with trolamine laurilsulfate and fluorescein sodium; 500 ml	Pinetarsool (Douglas)
Trimethoprim with sulphamethoxazole [Co-trimoxazole]	Oral liq 8 mg with sulphamethoxazole 40 mg per ml; 100 ml	Deprim (AFT)

## Looking Forward

*This section is designed to alert both pharmacists and prescribers to possible future changes to the Pharmaceutical Schedule. It may also assist pharmacists, distributors and wholesalers to manage stock levels.*

### Decisions for implementation 1 November 2017

- Pemetrexed inj 100 mg and 500 mg vial (Juno Pemetrexed) and inj 1 mg for ECP (Baxter) – new listing, PCT only – Specialist, Special Authority
- Simvastatin (Simvastatin Mylan) tab 10 mg, 20 mg, 40 mg and 80 mg – new listing

## Sole Subsidised Supply Products – cumulative to October 2017

Generic Name	Presentation	Brand Name	Expiry Date*
Acarbose	Tab 50 mg & 100 mg	Glucobay	2018
<b>Acetazolamide</b>	<b>Tab 250 mg</b>	<b>Diamox</b>	<b>2020</b>
Acetylcysteine	Inj 200 mg per ml, 10 ml ampoule	DBL Acetylcysteine	2018
Aciclovir	Eye oint 3%, 4.5 g OP Tab dispersible 200 mg, 400 mg & 800 mg	VirusPOS Lovir	2019
<b>Acitretin</b>	<b>Cap 10 mg &amp; 25 mg</b>	<b>Novatretin</b>	<b>2020</b>
Adult diphtheria and tetanus vaccine	Inj 2 IU diphtheria toxoid with 20 IU tetanus toxoid in 0.5 ml	ADT Booster	2020
Alfacalcidol	Cap 0.25 mcg & 1 mcg Oral drops 2 mcg per ml, 20 ml OP	One-Alpha	2020
Amiodarone hydrochloride	Inj 50 mg per ml, 3 ml ampoule Tab 100 mg & 200 mg	Lodi Cordarone X	2019
Amisulpride	Tab 100 mg, 200 mg & 400 mg Oral liq 100 mg per ml	Sulprix Solian	2019
<b>Amlodipine</b>	<b>Tab 2.5 mg, 5 mg &amp; 10 mg</b>	<b>Apo-Amlodipine</b>	<b>2020</b>
<b>Amorolfine</b>	<b>Nail soln 5%, 5 ml OP</b>	<b>MycosNail</b>	<b>2020</b>
<b>Amoxicillin</b>	<b>Inj 250 mg, 500 mg and 1 g vials</b> Cap 250 mg & 500 mg	<b>Ibiamox</b> Apo-Amoxi	<b>2020</b> 2019
Aqueous cream	Crn, 500 g	AFT SLS-free	2018
Ascorbic acid	Tab 100 mg	Cvite	2019
Aspirin	Tab 100 mg Tab dispersible 300 mg	Ethics Aspirin EC Ethics Aspirin	2019
Atenolol	Tab 50 mg & 100 mg	Mylan Atenolol	2018
Atorvastatin	Tab 10 mg, 20 mg, 40 mg & 80 mg	Lorstat	2018
<b>Atropine sulphate</b>	<b>Eye drops 1%, 15 ml OP</b>	<b>Atropt</b>	<b>2020</b>
<b>Azathioprine</b>	<b>Tab 25 mg &amp; 50 mg</b> Inj 50 mg vial	<b>Imuran</b>	<b>2019</b>
Azithromycin	Grans for oral liq 200 mg per 5 ml (40 mg per ml) Tab 250 mg & 500 mg	Zithromax Apo-Azithromycin	2018
Baclofen	Inj 0.05 mg per ml, 1 ml ampoule	Lioresal Intrathecal	2018
Benzathine benzylpenicillin	Inj 900 mg (1.2 million units) in 2.3 ml syringe	Bicillin LA	2018
<b>Benzylpenicillin sodium [penicillin G]</b>	<b>Inj 600 mg (1 million units) vial</b>	<b>Sandoz</b>	<b>2020</b>
<b>Betahistine dihydrochloride</b>	<b>Tab 16 mg</b>	<b>Vergo 16</b>	<b>2020</b>
Betamethasone dipropionate with calcipotriol	Gel 500 mcg with calcipotriol 50 mcg per g, 30 g OP Oint 500 mcg with calcipotriol 50 mcg per g, 30 g OP	Daivobet	2018

\*Expiry date of the Sole Subsidised Supply period is 30 June of the year indicated unless otherwise stated. Please note that Sole Subsidised Supply may have been awarded for a wider scope than just those presentation(s) listed in the above table.

## Sole Subsidised Supply Products – cumulative to October 2017

Generic Name	Presentation	Brand Name	Expiry Date*
Betamethasone valerate	Crn 0.1%, 50 g OP Oint 0.1%, 50 g OP	Beta Cream Beta Ointment	2018
Bezafibrate	Tab 200 mg Tab long-acting 400 mg	Bezalip Bezalip Retard	2018
Bimatoprost	Eye drops 0.03%; 3 ml OP	Bimatoprost Actavis	2018
Bisacodyl	Suppos 10 mg Tab 5 mg	Lax-Suppositories Lax-Tab	2018
Bosentan	Tab 62.5 mg & 125 mg	Mylan-Bosentan	2018
Bupropion hydrochloride	Tab modified-release 150 mg	Zyban	2020
Buspirone hydrochloride	Tab 5 mg & 10 mg	Orion	2018
Cabergoline	Tab 0.5 mg	Dostinex	2018
Calamine	Crn, aqueous, BP Lotn, BP	Pharmacy Health PSM	2018
Calcipotriol	Oint 50 mcg per g, 100 g OP	Daivonex	2020
Calcitriol	Cap 0.25 mcg & 0.5 mcg	Calcitriol-AFT	2019
Candesartan cilexetil	Tab 4 mg, 8 mg, 16 mg & 32 mg	Candestar	2018
Capecitabine	Tab 150 mg & 500 mg	Brinov	2019
Cefaclor monohydrate	Grans for oral liq 125 mg per 5 ml Cap 250 mg	Ranbaxy-Cefaclor	2019
Cefalexin	Cap 250 mg & 500 mg Grans for oral liq 25 mg per ml Grans for oral liq 50 mg per ml	Cephalexin ABM Cefalexin Sandoz	2019 2018
<b>Cefazolin</b>	<b>Inj 500 mg &amp; 1 g vials</b>	<b>AFT</b>	<b>2020</b>
Ceftriaxone	Inj 500 mg & 1 g vial	DEVA	2019
Celecoxib	Cap 100 mg & 200 mg	Celecoxib Pfizer	2020
Cetirizine hydrochloride	Tab 10 mg	Zista	2019
Cetomacrogol	Crn BP	healthE	2018
Cetomacrogol with glycerol	Crn 90% with glycerol 10%, 500 ml OP & 1,000 ml OP	Pharmacy Health Sorbolene with Glycerin	2019
Chloramphenicol	Eye oint 1%, 4 g OP Eye drops 0.5%, 10 ml OP	Chlorsig Chlorafast	2019 2018
Chlorhexidine gluconate	Soln 4% wash Handrub 1% with ethanol 70% Mouthwash 0.2%	healthE	2018
Ciclopirox olamine	Nail soln 8%, 7 ml OP	Apo-Ciclopirox	2018
Cilazapril	Tab 2.5 mg & 5 mg	Apo-Cilazapril	2019
Cilazapril with hydrochlorothiazide	Tab 5 mg with hydrochlorothiazide 12.5 mg	Apo-Cilazapril/ Hydrochlorothiazide	2019
<b>Ciprofloxacin</b>	<b>Tab 250 mg, 500 mg &amp; 750 mg</b>	<b>Cipflox</b>	<b>2020</b>

\*Expiry date of the Sole Subsidised Supply period is 30 June of the year indicated unless otherwise stated. Please note that Sole Subsidised Supply may have been awarded for a wider scope than just those presentation(s) listed in the above table.

## Sole Subsidised Supply Products – cumulative to October 2017

Generic Name	Presentation	Brand Name	Expiry Date*
Citalopram hydrobromide	Tab 20 mg	PSM Citalopram	2018
<b>Clarithromycin</b>	<b>Tab 250 mg &amp; 500 mg</b>	<b>Apo-Clarithromycin</b>	<b>2020</b>
Clindamycin	Cap hydrochloride 150 mg Inj phosphate 150 mg per ml, 4 ml ampoule	Clindamycin ABM Dalacin C	2019
Clobetasol propionate	Crm 0.05%, 30 g OP Oint 0.05%, 30 g OP	Dermol	2019
Clomipramine hydrochloride	Tab 10 mg & 25 mg	Apo-Clomipramine	2018
Clonidine hydrochloride	Tab 25 mcg	Clonidine BNM	2018
Clopidogrel	Tab 75 mg	Arrow - Clopid	2019
Clotrimazole	Vaginal crm 1% with applicators, 35 g OP Vaginal crm 2% with applicators, 20 g OP	Clomazol	2019
Coal tar	Soln BP	Midwest	2019
Codeine phosphate	Tab 15 mg, 30 mg & 60 mg	PSM	2019
Compound electrolytes	Powder for oral soln	Enerlyte	2019
Crotamiton	Crm 10%, 20 g OP	Itch-Soothe	2018
Cyclizine hydrochloride	Tab 50 mg	Nauzene	2018
Cyproterone acetate	Tab 50 mg & 100 mg	Procur	2018
<b>Cyproterone acetate with ethinyloestradiol</b>	<b>Tab 2 mg with ethinyloestradiol 35 mcg and 7 inert tabs</b>	<b>Ginet</b>	<b>2020</b>
Darunavir	Tab 400 mg & 600 mg	Prezista	2020
Desferrioxamine mesilate	Inj 500 mg vial	Desferal	2018
Desmopressin acetate	Tab 100 mcg & 200 mcg	Minirin	2019
Dexamethasone	Tab 0.5 mg & 4 mg	Dexmethsone	2018
Dexamfetamine sulfate	Tab 5 mg	PSM	2018
Diclofenac sodium	Tab EC 25 mg & 50 mg Tab long-acting 75 mg & 100 mg	Diclofenac Sandoz Apo-Diclo SR	2018
Digoxin	Tab 62.5 mcg Tab 250 mcg	Lanoxin PG Lanoxin	2019
Dihydrocodeine tartrate	Tab long-acting 60 mg	DHC Continus	2019
<b>Dimethicone</b>	<b>Lotn 4%, 200 ml OP</b>	<b>healthE Dimethicone 4% Lotion</b>	<b>2019</b>
	Crm 5%, pump bottle, 500 ml OP	healthE Dimethicone 5%	
	Crm 10% pump bottle, 500 ml OP	healthE Dimethicone 10%	2018

\*Expiry date of the Sole Subsidised Supply period is 30 June of the year indicated unless otherwise stated. Please note that Sole Subsidised Supply may have been awarded for a wider scope than just those presentation(s) listed in the above table.

## Sole Subsidised Supply Products – cumulative to October 2017

Generic Name	Presentation	Brand Name	Expiry Date*
Diphtheria, tetanus and acellular pertussis vaccine	Inj 2 IU diphtheria toxoid with 20 IU tetanus toxoid, 8 mcg pertussis toxoid, 8 mcg pertussis filamentous haemagglutinin and 2.5 mcg pertactin in 0.5 ml syringe	Boostrix	2020
Diphtheria, tetanus, acellular pertussis and inactivated polio vaccine	Inj 30 IU diphtheria toxoid with 40 IU tetanus toxoid, 25 mcg pertussis toxoid, 25 mcg pertussis filamentous haemagglutinin, 8 mcg pertactin and 80 D-antigen units poliomyelitis virus in 0.5ml syringe	Infanrix IPV	2020
Diphtheria, tetanus, pertussis, polio, hepatitis B and haemophilus influenzae type B vaccine	Inj 30IU diphtheria toxoid with 40IU tetanus toxoid, 25mcg pertussis toxoid, 25mcg pertussis filamentous haemagglutinin, 8 mcg pertactin, 80 D-antigen units poliomyelitis virus, 10 mcg hepatitis B surface antigen in 0.5ml syringe	Infanrix-hexa	2020
Dipyridamole	Tab long-acting 150 mg	Pytazen SR	2019
<b>Docusate sodium</b>	<b>Tab 50 mg &amp; 120 mg</b>	<b>Coloxyl</b>	<b>2020</b>
Domperidone	Tab 10 mg	Prokinex	2018
<b>Donepezil hydrochloride</b>	<b>Tab 5 mg &amp; 10 mg</b>	<b>Donepezil-Rex</b>	<b>2020</b>
Dorzolamide with timolol	Eye drops 2% with timolol 0.5%, 5 ml OP	Arrow-Dortim	2018
<b>Doxazosin</b>	<b>Tab 2 mg &amp; 4 mg</b>	<b>Apo-Doxazosin</b>	<b>2020</b>
Efavirenz	Tab 50 mg, 200 mg & 600 mg	Stocrin	2018
Enalapril maleate	Tab 5 mg, 10 mg & 20 mg	Ethics Enalapril	2018
Entacapone	Tab 200 mg	Entapone	2018
Epoetin alfa [erythropoietin alfa]	Inj 1,000 iu in 0.5 ml, syringe Inj 2,000 iu in 0.5 ml, syringe Inj 3,000 iu in 0.3 ml, syringe Inj 4,000 iu in 0.4 ml, syringe Inj 5,000 iu in 0.5 ml, syringe Inj 6,000 iu in 0.6 ml, syringe Inj 8,000 iu in 0.8 ml, syringe Inj 10,000 iu in 1 ml, syringe Inj 40,000 iu in 1 ml, syringe	Eprex	28/2/18
Ethinylestradiol	Tab 10 mcg	NZ Medical and Scientific	2018
Etidronate disodium	Tab 200 mg	Arrow-Etidronate	2018
Etoposide	Inj 20 mg per ml, 5 ml vial	Rex Medical	2018
<b>Exemestane</b>	<b>Tab 25 mg</b>	<b>Pfizer Exemestane</b>	<b>2020</b>
Felodipine	Tab long-acting 2.5 mg, 5 mg & 10 mg	Plendil ER	2018

\*Expiry date of the Sole Subsidised Supply period is 30 June of the year indicated unless otherwise stated. Please note that Sole Subsidised Supply may have been awarded for a wider scope than just those presentation(s) listed in the above table.

## Sole Subsidised Supply Products – cumulative to October 2017

Generic Name	Presentation	Brand Name	Expiry Date*
Fentanyl	Inj 50 mcg per ml, 2 ml & 10 ml ampoule	Boucher and Muir	2018
Ferrous fumarate	Tab 200 mg (65 mg elemental)	Ferro-tab	2018
Ferrous sulphate	Oral liq 30 mg (6 mg elemental) per ml	Ferodan	2019
<b>Flucloxacillin</b>	<b>Inj 250 mg &amp; 500 mg vials</b> Grans for oral liq 25 mcg per ml Grans for oral liq 50 mcg per ml Cap 250 mg & 500 mg	<b>Flucloxin</b> AFT  Staphlex	<b>2020</b> 2018
Fludarabine phosphate	Tab 10 mg	Fludara Oral	2018
Fluorometholone	Eye drops 0.1%, 5 ml OP	FML	2018
Fluorouracil sodium	Crm 5%, 20 g OP	Efudix	2018
Fluoxetine hydrochloride	Cap 20 mg Tab dispersible 20 mg, scored	Arrow-Fluoxetine	2019
Fluticasone propionate	Metered aqueous nasal spray, 50 mcg per dose	Flixonase Hayfever & Allergy	2018
Folic acid	Tab 0.8 mg & 5 mg	Apo-Folic Acid	2018
Furosemide [frusemide]	Inj 10 mg per ml, 2 ml ampoule Tab 40 mg Tab 500 mg	Frusemide-Claris Diurin 40 Urex Forte	2019 2018
Fusidic acid	Tab 250 mg	Fucidin	2020
Galsulfase	Inj 1 mg per ml, 5 ml vial	Naglazyme	2018
Gemfibrozil	Tab 600 mg	Lipazil	2019
Gentamicin sulphate	Inj 40 mg per ml, 2 ml ampoule	Pfizer	2018
<b>Gliclazide</b>	<b>Tab 80 mg</b>	<b>Glizide</b>	<b>2020</b>
Glipizide	Tab 5 mg	Minidiab	2018
<b>Glycerol</b>	<b>Liquid</b> Suppos 3.6 g	<b>healthE Glycerol BP</b> PSM	<b>2020</b> 2018
Goserelin	Implant 3.6 mg & 10.8 mg syringe	Zoladex	2019
Haemophilus influenzae type B vaccine	Haemophilus influenzae type B polysaccharide 10 mcg conjugated to tetanus toxoid as carrier protein 20-40 mcg; prefilled syringe plus vial 0.5 ml	Hiberix	2020
Haloperidol	Tab 500 mcg, 1.5 mg & 5 mg Oral liq 2 mg per ml Inj 5 mg per ml, 1 ml ampoule	Serenace	2019
Hepatitis A vaccine	Inj 720 ELISA units in 0.5 ml syringe Inj 1440 ELISA units in 1 ml syringe	Havrix Junior Havrix	2020
Hepatitis B recombinant vaccine	Inj 5 mcg per 0.5 ml vial Inj 10 mcg per 1 ml vial Inj 40 mcg per 1 ml vial	HBvaxPRO	2020

\*Expiry date of the Sole Subsidised Supply period is 30 June of the year indicated unless otherwise stated. Please note that Sole Subsidised Supply may have been awarded for a wider scope than just those presentation(s) listed in the above table.

## Sole Subsidised Supply Products – cumulative to October 2017

Generic Name	Presentation	Brand Name	Expiry Date*
Human papillomavirus (6, 11, 16, 18, 31, 33, 45, 52 and 58) vaccine [HPV]	Inj 270 mcg in 0.5 ml syringe	Gardasil 9	2020
<b>Hydrocortisone</b>	<b>Powder</b> Crm 1%, 30 g OP Crm 1%, 500 g Inj 100 mg vial Tab 5 mg & 20 mg	<b>ABM</b> DermAssist Pharmacy Health Solu-Cortef Douglas	<b>2020</b> 2019  2018
Hydrocortisone acetate	Rectal foam 10%, CFC-free (14 applications), 21.1 g OP	Colifoam	2018
<b>Hydrocortisone and paraffin liquid and lanolin</b>	<b>Lotn 1% with paraffin liquid 15.9% and lanolin 0.6%, 250 ml</b>	<b>DP Lotn HC</b>	<b>2020</b>
Hydrocortisone with miconazole	Crm 1% with miconazole nitrate 2%, 15 g OP	Micreme H	2018
Hydrogen peroxide	Soln 3% (10 vol)	Pharmacy Health	2018
Hydroxocobalamin	Inj 1 mg per ml, 1 ml ampoule	Neo-B12	2018
Hydroxychloroquine	Tab 200 mg	Plaquenil	2018
Ibuprofen	Tab long-acting 800 mg	Brufen SR	2018
Indapamide	Tab 2.5 mg	Dapa-Tabs	2019
Influenza vaccine	Inj 45 mcg in 0.5 ml syringe	Influvac	31/12/19
Ipratropium bromide	Nebuliser soln, 250 mcg per ml, 1 ml ampoule Nebuliser soln, 250 mcg per ml, 2 ml ampoule	Univent	2019
Isoniazid	Tab 100 mg Tab 100 mg with rifampicin 150 mg Tab 150 mg with rifampicin 300 mg	PSM Rifinah	2018
<b>Isosorbide mononitrate</b>	<b>Tab long-acting 60 mg</b> Tab long-acting 40 mg	<b>Duride</b> Ismo 40 Retard	<b>2020</b> 2019
Itraconazole	Cap 100 mg	Itrazole	2019
<b>Ketoconazole</b>	<b>Shampoo 2%, 100 ml OP</b>	<b>Sebizole</b>	<b>2020</b>
Lactulose	Oral liq 10 g per 15 ml	Laevolac	2019
Lansoprazole	Cap 15 mg & 30 mg	Lanzol Relief	2018
Latanoprost	Eye drops 0.005%, 2.5 ml OP	Hysite	2018
Leflunomide	Tab 10 mg & 20 mg	Apo-Leflunomide	2020
Letrozole	Tab 2.5 mg	Letrole	2018
Levomepromazine hydrochloride	Inj 25 mg per ml, 1 ml ampoule	Wockhardt	2019
Levonorgestrel	Tab 1.5 mg Intra-uterine system 20 mcg per day Subdermal implant (2 x 75 mg rods)	Postinor-1 Mirena Jadelle	2019  31/12/17
Lisinopril	Tab 5 mg, 10 mg & 20 mg	Ethics Lisinopril	2018

\*Expiry date of the Sole Subsidised Supply period is 30 June of the year indicated unless otherwise stated. Please note that Sole Subsidised Supply may have been awarded for a wider scope than just those presentation(s) listed in the above table.



## Sole Subsidised Supply Products – cumulative to October 2017

Generic Name	Presentation	Brand Name	Expiry Date*
Lithium carbonate	Tab 250 mg & 400 mg	Lithicarb FC	2018
Loperamide hydrochloride	Tab 2 mg Cap 2 mg	Nodia Diamide Relief	2019
<b>Lopinavir with ritanovir</b>	<b>Tab 200 mg with ritonavir 50 mg</b>	<b>Kaletra</b>	<b>2020</b>
Loratadine	Oral liq 1 mg per ml, 120 ml Tab 10 mg	Lorfast Lorafix	2019
Lorazepam	Tab 1 mg & 2.5 mg	Ativan	2018
<b>Magnesium sulphate</b>	<b>Inj 2 mmol per ml, 5 ml ampoule</b>	<b>DBL</b>	<b>2020</b>
Mask for spacer device	Small	e-chamber Mask	2018
Measles, mumps and rubella vaccine	Inj, measles virus 1,000 CCID50, mumps virus 5,012 CCID50, Rubella virus 1,000 CCID50; prefilled syringe/ampoule of diluent 0.5 m	Priorix	2020
Medroxyprogesterone acetate	Tab 2.5 mg, 5 mg & 10 mg Tab 100 mg Inj 150 mg per ml, 1 ml syringe	Provera Provera HD Depo-Provera	2019
Megestrol acetate	Tab 160 mg	Apo-Megestrol	2018
Meningococcal C conjugate vaccine	Inj 10 mcg in 0.5 ml syringe	Neisvac-C	2020
Meningococcal (Groups A, C, Y and W-135) conjugate vaccine	Inj 4 mcg of each meningococcal polysaccharide conjugated to a total of approximately 48 mcg of diphtheria toxoid carrier per 0.5ml vial	Menactra	2020
Mesalazine	Enema 1 g per 100 ml Suppos 1 g	Pentasa Pentasa	2018
Metformin hydrochloride	Tab immediate-release 500 mg	Metchek	2018
Methadone hydrochloride	Tab 5 mg Oral liq 2 mg per ml Oral liq 5 mg per ml Oral liq 10 mg per ml	Methatabs Biodone Biodone Forte Biodone Extra Forte	2018
<b>Methotrexate</b>	<b>Inj 100 mg per ml, 50 ml vial</b>	<b>Methotrexate Ebewe</b>	<b>2020</b>
	Inj 25 mg per ml, 2 ml & 20 ml vials	DBL Methotrexate Onco-Vial	2019
	Tab 2.5 mg & 10 mg	Trexate	2018
Methylprednisolone	Tab 4 mg & 100 mg	Medrol	2018
Methylprednisolone (as sodium succinate)	Inj 40 mg vial Inj 125 mg vial Inj 500 mg vial Inj 1 g vial	Solu-Medrol	2018
Methylprednisolone acetate	Inj 40 mg per ml, 1 ml vial	Depo-Medrol	2018

\*Expiry date of the Sole Subsidised Supply period is 30 June of the year indicated unless otherwise stated. Please note that Sole Subsidised Supply may have been awarded for a wider scope than just those presentation(s) listed in the above table.

## Sole Subsidised Supply Products – cumulative to October 2017

Generic Name	Presentation	Brand Name	Expiry Date*
Methylprednisolone acetate with lidocaine [lignocaine]	Inj 40 mg per ml with lidocaine [lignocaine] 1 ml vial	Depo-Medrol with Lidocaine	2018
Metoprolol tartrate	Tab 50 mg & 100 mg	Apo-Metoprolol	2018
Miconazole	Oral gel 20 mg per g, 40 g OP	Decozol	2018
<b>Miconazole nitrate</b>	<b>Vaginal crm 2% with applicator, 40 g OP</b>	<b>Micreme</b>	<b>2020</b>
Mirtazapine	Tab 30 mg & 45 mg	Apo-Mirtazapine	2018
Misoprostol	Tab 200 mcg	Cytotec	2019
Mitomycin C	Inj 5 mg vial	Arrow	2019
Moclobemide	Tab 150 mg & 300 mg	Apo-Moclobemide	2018
Mometasone furoate	Crn 0.1%, 15 g OP & 50 g OP Oint 0.1%, 15 g OP & 50 g OP Lotn 0.1%, 30 ml OP	Elocon Alcohol Free Elocon	2018
Montelukast	Tab 4 mg, 5 mg & 10 mg	Apo-Montelukast	2019
Morphine hydrochloride	Oral liq 1 mg per ml Oral liq 2 mg per ml Oral liq 5 mg per ml Oral liq 10 mg per ml	RA-Morph	2018
<b>Morphine sulphate</b>	<b>Tab immediate-release 10 mg &amp; 20 mg</b> <b>Inj 5 mg per ml, 1 ml ampoule</b> <b>Inj 10 mg per ml, 1 ml ampoule</b> <b>Inj 15 mg per ml, 1 ml ampoule</b> <b>Inj 30 mg per ml, 1 ml ampoule</b> Tab long-acting 10 mg, 30 mg, 60 mg & 100 mg	<b>Sevredol</b>  <b>DBL Morphine Sulphate</b>  Arrow-Morphine LA	<b>2020</b>   2019
Morphine tartrate	Inj 80 mg per ml, 1.5 ml ampoule	DBL Morphine Tartrate	2019
Nadolol	Tab 40 mg & 80 mg	Apo-Nadolol	2018
<b>Naltrexone hydrochloride</b>	<b>Tab 50 mg</b>	<b>Naltraccord</b>	<b>2020</b>
Naproxen	Tab 250 mg Tab 500 mg Tab long-acting 750 mg Tab long-acting 1 g	Noflam 250 Noflam 500 Naprosyn SR 750 Naprosyn SR 1000	2018
Nevirapine	Tab 200 mg	Nevirapine Alphapharm	2018
Nifedipine	Tab long-acting 10 mg	Adalat 10	2020
Norethisterone	Tab 350 mcg Tab 5 mg	Noriday 28 Primolut N	2018
Nortriptyline hydrochloride	Tab 10 mg & 25 mg	Norpress	2019
Nystatin	Vaginal crm 100,000 u per 5 g with applicator(s), 75 g OP	Nilstat	2020

\*Expiry date of the Sole Subsidised Supply period is 30 June of the year indicated unless otherwise stated. Please note that Sole Subsidised Supply may have been awarded for a wider scope than just those presentation(s) listed in the above table.

## Sole Subsidised Supply Products – cumulative to October 2017

Generic Name	Presentation	Brand Name	Expiry Date*
Oestradiol	Patch 25 mcg per day Patch 50 mcg per day Patch 75 mcg per day Patch 100 mcg per day	Estradot Estradot 50 mcg Estradot Estradot	2019
Oestradiol valerate	Tab 1 mg & 2 mg	Progynova	2018
Oil in water emulsion	Crn; 500 g	O/W Fatty Emulsion Cream	2018
<b>Olanzapine</b>	<b>Tab 2.5 mg, 5 mg &amp; 10 mg</b> <b>Tab orodispersible 5 mg &amp; 10 mg</b>	<b>Zypine</b> <b>Zypine ODT</b>	<b>2020</b>
Omeprazole	Inj 40 mg ampoule with diluent	Dr Reddy's Omeprazole	2019
Ondansetron	Tab 4 mg & 8 mg	Apo-Ondansetron	2019
Ornidazole	Tab 500 mg	Arrow-Ornidazole	2019
<b>Oxazepam</b>	<b>Tab 10 mg &amp; 15 mg</b>	<b>Ox-Pam</b>	<b>2020</b>
Oxybutynin	Oral liq 5 mg per 5 ml Tab 5 mg	Apo-Oxybutynin	2019
Oxycodone hydrochloride	Tab controlled-release 5 mg, 10 mg, 20 mg, 40 mg & 80 mg Inj 10 mg per ml, 1 ml & 2 ml ampoules Inj 50 mg per ml, 1 ml ampoule Cap immediate-release 5 mg, 10 mg & 20 mg	BNM OxyNorm	2018
Oxytocin	Inj 5 iu per ml, 1 ml ampoule Inj 10 iu per ml, 1 ml ampoule	Oxytocin BNM	2018
Oxytocin with ergometrine maleate	Inj 5 iu with ergometrine maleate 500 mcg per ml	Syntometrine	2018
<b>Pamidronate disodium</b>	<b>Inj 3 mg per ml, 10 ml vial</b> <b>Inj 6 mg per ml, 10 ml vial</b> <b>Inj 9 mg per ml, 10 ml vial</b>	<b>Pamisol</b>	<b>2020</b>
Pancreatic enzyme	Cap pancreatin 150 mg (amylase 8,000 Ph Eur U, lipase 10,000 Ph Eur U, total protease 600 Ph Eur U) Cap pancreatin 300 mg (amylase 18,000 Ph Eur U, lipase 25,000 Ph Eur U, total protease 1,000 Ph Eur U)	Creon 10000 Creon 25000	2018
Pantoprazole	Tab EC 20 mg & 40 mg	Panzop Relief	2019
Paracetamol	Suppos 125 mg & 250 mg Suppos 500 mg	Gacet Paracare	2018
<b>Paracetamol with codeine</b>	<b>Tab paracetamol 500 mg with codeine phosphate 8 mg</b>	<b>Paracetamol + Codeine (Relieve)</b>	<b>2020</b>
Paroxetine	Tab 20 mg	Apo-Paroxetine	2019

\*Expiry date of the Sole Subsidised Supply period is 30 June of the year indicated unless otherwise stated. Please note that Sole Subsidised Supply may have been awarded for a wider scope than just those presentation(s) listed in the above table.

## Sole Subsidised Supply Products – cumulative to October 2017

Generic Name	Presentation	Brand Name	Expiry Date*
Peak flow meter	Low range	Mini-Wright AFS	2018
	Normal range	Low Range Mini-Wright Standard	
Perhexiline maleate	Tab 100 mg	Pexsig	2019
<b>Perindopril</b>	<b>Tab 2 mg &amp; 4 mg</b>	<b>Apo-Perindopril</b>	<b>2020</b>
<b>Pethidine hydrochloride</b>	<b>Inj 50 mg per ml, 1 ml &amp; 2 ml ampoules</b>	<b>DBL Pethidine Hydrochloride</b>	<b>2020</b>
	Tab 50 mg & 100 mg	PSM	2018
Phenobarbitone	Tab 15 mg & 30 mg	PSM	2018
Phenoxyethylpenicillin (penicillin V)	Grans for oral liq 125 mg per 5 ml	AFT	2019
	Grans for oral liq 250 mg per 5 ml Cap 250 mg & 500 mg	Cilicaine VK	2018
Phenytoin sodium	Inj 50 mg per ml, 2 ml ampoule	Hospira	2018
	Inj 50 mg per ml, 5 ml ampoule		
Pioglitazone	Tab 15 mg, 30 mg & 45 mg	Vexazone	2018
Pizotifen	Tab 500 mcg	Sandomigran	2018
Pneumococcal (PCV10) conjugate vaccine	Inj 1 mcg of pneumococcal polysaccharide serotypes 1, 5, 6B, 7F, 9V, 14 and 23F; 3 mcg of pneumococcal polysaccharide serotypes 4, 18C and 19F in 0.5 ml prefilled syringe	Synflorix	2020
Pneumococcal (PPV23) polysaccharide vaccine	Inj 575 mcg in 0.5 ml prefilled syringe (25 mcg of each 23 pneumococcal serotype)	Pneumovax 23	2020
Poliomyelitis vaccine	Inj 80D antigen units in 0.5 ml syringe	IPOL	2020
<b>Poloxamer</b>	<b>Oral drops 10%, 30 ml OP</b>	<b>Coloxyl</b>	<b>2020</b>
Polyvinyl alcohol	Eye drops 1.4%, 15 ml OP	Vistil	2019
	Eye drops 3%, 15 ml OP	Vistil Forte	
Pramipexole hydrochloride	Tab 0.25 mg & 1 mg	Ramipex	2019
Prednisone	Tab 1 mg, 2.5 mg, 5 mg & 20 mg	Apo-Prednisone	2020
<b>Procaine penicillin</b>	<b>Inj 1.5 g in 3.4 ml syringe</b>	<b>Cilicaine</b>	<b>2020</b>
Progesterone	Cap 100 mg	Urogestan	2019
Promethazine hydrochloride	Inj 25 mg per ml, 2 ml ampoule	Hospira	2019
	Oral liq 1 mg per ml	Allersoothe	2018
	Tab 10 mg & 25 mg		
Pyridostigmine bromide	Tab 60 mg	Mestinon	2019
<b>Quetiapine</b>	<b>Tab 25 mg, 100 mg, 200 mg &amp; 300 mg</b>	<b>Quetapel</b>	<b>2020</b>
Quinapril	Tab 5 mg	Arrow-Quinapril 5	2018
	Tab 10 mg	Arrow-Quinapril 10	
	Tab 20 mg	Arrow-Quinapril 20	

\*Expiry date of the Sole Subsidised Supply period is 30 June of the year indicated unless otherwise stated. Please note that Sole Subsidised Supply may have been awarded for a wider scope than just those presentation(s) listed in the above table.

## Sole Subsidised Supply Products – cumulative to October 2017

Generic Name	Presentation	Brand Name	Expiry Date*
Quinapril with hydrochlorothiazide	Tab 10 mg with hydrochlorothiazide 12.5 mg	Accuretic 10	2018
	Tab 20 mg with hydrochlorothiazide 12.5 mg	Accuretic 20	
Rifabutin	Cap 150 mg	Mycobutin	2019
<b>Rifampicin</b>	<b>Cap 150 mg &amp; 300 mg Oral liq 100 mg per 5 ml</b>	<b>Rifadin</b>	<b>2020</b>
<b>Rifaximin</b>	<b>Tab 550 mg</b>	<b>Xifaxan</b>	<b>2020</b>
Risedronate sodium	Tab 35 mg	Risedronate Sandoz	2019
<b>Risperidone</b>	<b>Oral liq 1 mg per ml</b>	<b>Risperon</b>	<b>2020</b>
<b>Rizatriptan</b>	<b>Tab orodispersible 10 mg</b>	<b>Rizamelt</b>	<b>2020</b>
Ropinirole hydrochloride	Tab 0.25 mg, 1 mg, 2 mg & 5 mg	Apo-Ropinirole	2019
Rotavirus vaccine	Oral susp live attenuated human rotavirus 1,000,000 CCID50 per dose, prefilled oral applicator	Rotarix	2020
Salbutamol	Nebuliser soln, 1 mg per ml, 2.5 ml ampoule	Asthalin	2018
	Nebuliser soln, 2 mg per ml, 2.5 ml ampoule		
Salbutamol with ipratropium bromide	Nebuliser soln, 2.5 mg with ipratropium bromide 0.5 mg per vial, 2.5 ml ampoule	Duolin	2018
Sertraline	Tab 50 mg & 100 mg	Arrow-Sertraline	2019
Sildenafil	Tab 25 mg, 50 mg & 100 mg	Vedafil	2018
Siltuximab	Inj 100 mg & 400 mg vials	Sylvant	2018
Sodium chloride	Inj 0.9%, 10 ml ampoule	Pfizer Biomed	2019
	Inj 23.4% (4 mmol/ml), 20 ml ampoule		
	Inj 0.9%, bag; 500 ml & 1,000 ml	Baxter	
<b>Sodium citro-tartrate</b>	<b>Grans eff 4 g sachets</b>	<b>Ural</b>	<b>2020</b>
Sodium cromoglycate	Eye drops 2%, 5 ml OP	Rexacrom	2018
Sodium polystyrene sulphonate	Powder	Resonium A	2018
Somatropin	Inj cartridges 5 mg, 10 mg & 15 mg	Omnitrope	31/12/17
Sotalol	Tab 80 mg & 160 mg	Mylan	2019
Spacer device	220 ml (single patient)	e-chamber Turbo	2018
Spirolactone	Tab 25 mg & 100 mg	Spiractin	2019
Sulfadiazine silver	Crm 1%, 50 g OP	Flamazine	2020
Sulphasalazine	Tab 500 mg	Salazopyrin	2019
	Tab EC 500 mg	Salazopyrin EN	
Sumatriptan	Tab 50 mg & 100 mg	Apo-Sumatriptan	2019

\*Expiry date of the Sole Subsidised Supply period is 30 June of the year indicated unless otherwise stated. Please note that Sole Subsidised Supply may have been awarded for a wider scope than just those presentation(s) listed in the above table.

## Sole Subsidised Supply Products – cumulative to October 2017

Generic Name	Presentation	Brand Name	Expiry Date*
Tacrolimus	Cap 0.5 mg, 1 mg & 5 mg	Tacrolimus Sandoz	31/10/18
<b>Temazepam</b>	<b>Tab 10 mg</b>	<b>Normison</b>	<b>2020</b>
Temozolomide	Cap 5 mg, 20 mg, 100 mg & 250 mg	Orion Temozolomide	2019
Tenoxicam	Tab 20 mg	Tilcotil	2019
Terazosin	Tab 2 mg Tab 5 mg Tab 1 mg	Apo-Terazosin Apo-Terazosin Actavis	2019
<b>Testosterone cypionate</b>	<b>Inj 100 mg per ml, 10 ml vial</b>	<b>Depo-Testosterone</b>	<b>2020</b>
Testosterone undecanoate	Cap 40 mg	Andriol Testocaps	2018
Tetrabenazine	Tab 25 mg	Motelis	2019
Thymol glycerin	Compound, BPC	PSM	2019
<b>Timolol</b>	<b>Eye drops 0.25% &amp; 0.5%, 5 ml OP</b> Eye drops 0.25%, gel forming, 2.5 ml OP Eye drops 0.5%, gel forming, 2.5 ml OP	<b>Arrow-Timolol</b> Timoptol XE	<b>2020</b> 2019
Tobramycin	Inj 40 mg per ml, 2 ml vial	Tobramycin Mylan	2018
Tolcapone	Tab 100 mg	Tasmar	2019
<b>Tramadol hydrochloride</b>	<b>Cap 50 mg</b> <b>Tab sustained-release 100 mg</b> <b>Tab sustained-release 150 mg</b> <b>Tab sustained-release 200 mg</b>	<b>Arrow-Tramadol</b> <b>Tramal SR 100</b> <b>Tramal SR 150</b> <b>Tramal SR 200</b>	<b>2020</b>
Tranexamic acid	Tab 500 mg	Cyklolapron	2019
<b>Triamcinolone acetonide</b>	<b>Inj 10 mg per ml, 1 ml ampoule</b> <b>Inj 40 mg per ml, 1 ml ampoule</b> <b>Crn 0.02%, 100 g OP</b> <b>Oint 0.02%, 100 g OP</b> <b>Paste 0.1%, 5 g OP</b>	<b>Kenacort-A 10</b> <b>Kenacort-A 40</b> <b>Aristocort</b>  <b>Kenalog in Orabase</b>	<b>2020</b>
Trimethoprim	Tab 300 mg	TMP	2018
Tuberculin PPD [Mantoux] test	Inj 5 TU per 0.1 ml, 1 ml vial	Tubersol	2020
Urea	Crn 10%, 100 g OP	healthE Urea Cream	2019
<b>Ursodeoxycholic acid</b>	<b>Cap 250 mg</b>	<b>Urosan</b>	<b>2020</b>
Valaciclovir	Tab 500 mg & 1,000 mg	Vaclovir	2018
Valganciclovir	Tab 450 mg	Valcyte	2018
<b>Vancomycin</b>	<b>Inj 500 mg vial</b>	<b>Mylan</b>	<b>2020</b>
Varicella vaccine [chickenpox vaccine]	Inj 2000 PFU prefilled syringe plus vial	Varilrix	2020
Venlafaxine	Cap 37.5 mg, 75 mg & 150 mg	Enlafax XR	2020
Vitamin B complex	Tab, strong, BPC	Bplex	2019

\*Expiry date of the Sole Subsidised Supply period is 30 June of the year indicated unless otherwise stated. Please note that Sole Subsidised Supply may have been awarded for a wider scope than just those presentation(s) listed in the above table.

## Sole Subsidised Supply Products – cumulative to October 2017

Generic Name	Presentation	Brand Name	Expiry Date*
Vitamins	Tab (BPC cap strength)	Mvite	2019
Voriconazole	Tab 50 mg & 200 mg	Vttack	2018
Water	Inj 5 ml ampoule Inj 10 ml ampoule	InterPharma Pfizer	2019
Zidovudine [AZT]	Cap 100 mg Oral liq 10 mg per ml, 200 ml OP	Retrovir	2019
<b>Zidovudine [AZT] with lamivudine</b>	<b>Tab 300 mg with lamivudine 150 mg</b>	<b>Alphapharm</b>	<b>2020</b>
Ziprasidone	Cap 20 mg, 40 mg, 60 mg & 80 mg	Zusdone	2018
Zopiclone	Tab 7.5 mg	Zopiclone Actavis	2018

October changes are in bold type

\*Expiry date of the Sole Subsidised Supply period is 30 June of the year indicated unless otherwise stated. Please note that Sole Subsidised Supply may have been awarded for a wider scope than just those presentation(s) listed in the above table.

Check your Schedule for full details  
Schedule page ref

Subsidy  
(Mnfr's price)  
\$ Per

Brand or  
Generic Mnfr  
✓ fully subsidised

## New Listings

Effective 1 October 2017

22 HYOSCINE BUTYLBROMIDE  
\* Tab 10 mg ..... 8.75 100 ✓ **Buscopan**

38 ISPAGHULA (PSYLLIUM) HUSK – Only on a prescription  
\* Powder for oral soln ..... 5.51 500 g OP ✓ **Bonvit**

44 FERRIC CARBOXYMALTOSE – Special Authority see SA1675 – Retail pharmacy  
Inj 50 mg per ml, 10 ml vial ..... 150.00 1 ✓ **Ferinject**

▶ SA1675 Special Authority for Subsidy

Initial application – (serum ferritin less than or equal to 20 mcg/L) from any medical practitioner. Approval valid for 3 months for applications meeting the following criteria:

Both:

1. Patient has been diagnosed with iron-deficiency anaemia with a serum ferritin level of less than or equal to 20 mcg/L; and
2. Any of the following:
  - 2.1. Patient has been compliant with oral iron treatment and treatment has proven ineffective; or
  - 2.2. Treatment with oral iron has resulted in dose-limiting intolerance; or
  - 2.3. Rapid correction of anaemia is required.

Renewal – (serum ferritin less than or equal to 20 mcg/L) from any medical practitioner. Approval valid for 3 months for applications meeting the following criteria:

Both:

1. Patient continues to have iron-deficiency anaemia with a serum ferritin level of less than or equal to 20 mcg/L; and
2. A re-trial with oral iron is clinically inappropriate.

Initial application (iron deficiency anaemia) only from an internal medicine physician, obstetrician, gynaecologist, anaesthetist or a medical practitioner on the recommendation of an internal medicine physician, obstetrician, gynaecologist or anaesthetist. Approval valid for 3 months for applications meeting the following criteria:

Both:

1. Patient has been diagnosed with iron-deficiency anaemia; and
2. Any of the following:
  - 2.1. Patient has been compliant with oral iron treatment and treatment has proven ineffective; or
  - 2.2. Treatment with oral iron has resulted in dose-limiting intolerance; or
  - 2.3. Patient has symptomatic heart failure, chronic kidney disease stage 3 or more or active inflammatory bowel disease and a trial of oral iron is unlikely to be effective; or
  - 2.4. Rapid correction of anaemia is required.

Renewal (iron deficiency anaemia) only from an internal medicine physician, obstetrician, gynaecologist, anaesthetist or a medical practitioner on the recommendation of an internal medicine physician, obstetrician, gynaecologist or anaesthetist. Approval valid for 3 months for applications meeting the following criteria:

Both:

1. Patient continues to have iron-deficiency anaemia; and
2. A re-trial with oral iron is clinically inappropriate.

57 BISOPROLOL FUMARATE  
Tab 2.5 mg ..... 3.53 90 ✓ **Bosvate**  
Tab 5 mg ..... 5.15 90 ✓ **Bosvate**  
Tab 10 mg ..... 9.40 90 ✓ **Bosvate**

Note – this is a listing of a new pack size.



Check your Schedule for full details Schedule page ref	Subsidy (Mnfr's price) \$	Per	Brand or Generic Mnfr ✓ fully subsidised
---	---------------------------------	-----	--

### New Listings – effective 1 October 2017 (continued)

57	CARVEDILOL			
	* Tab 6.25 mg .....	2.24	60	✓ Carvedilol Sandoz
	* Tab 12.5 mg .....	2.30	60	✓ Carvedilol Sandoz
	* Tab 25 mg – For carvedilol oral liquid formulation refer .....	2.95	60	✓ Carvedilol Sandoz
58	METOPROLOL SUCCINATE			
	* Tab long-acting 190 mg .....	3.00	30	✓ Betaloc CR
59	NIFEDIPINE			
	* Tab long-acting 30 mg .....	3.14	30	✓ Adalat Oros
	* Tab long-acting 60 mg .....	5.67	30	✓ Adalat Oros
81	FINASTERIDE – Special Authority see SA0928 – Retail pharmacy			
	* Tab 5 mg .....	4.81	100	✓ Ricit
133	ESCITALOPRAM			
	* Tab 10 mg .....	1.11	28	✓ Apo-Escitalopram
	* Tab 20 mg .....	1.90	28	✓ Apo-Escitalopram

### Effective 21 September 2017

98	AMOXICILLIN			
	Grans for oral liq 250 mg per 5 ml .....	1.31	100 ml	✓ Alphamox 250
	a) Up to 300 ml available on a PSO			
	b) Up to 10 x the maximum PSO quantity for RFPP – see rule 5.2.6			
	c) Wastage claimable – see rule 3.3.2			

### Effective 1 September 2017

53	SODIUM CHLORIDE			
	Not funded for use as a nasal drop. Only funded for nebuliser use when in conjunction with an antibiotic intended for nebuliser use.			
	Inj 0.9%, 5 ml ampoule – Up to 5 inj available on a PSO .....	7.00	50	✓ Multichem
58	PROPRANOLOL			
	* Tab 10 mg .....	3.65	100	✓ Apo-Propranolol
	* Tab 40 mg .....	4.65	100	✓ Apo-Propranolol
	Note – This is the listing of new Pharmacodes for Apo-Propranolol tab 10 mg, 2525941 and 40 mg, 2525968.			
64	HYDRALAZINE HYDROCHLORIDE			
	* Tab 25 mg – Special Authority see SA1321			
	– Retail Pharmacy .....	CBS	84	✓ AMDIPHARM S29
172	TEMOZOLOMIDE – Special Authority see SA1616 – Retail pharmacy			
	Cap 20 mg .....	18.30	5	✓ Temizole 20 S29
	Wastage claimable – see 3.3.2			
	Cap 140 mg .....	56.00	5	✓ Orion Temozolomide
213	PREDNISOLONE ACETATE			
	Eye drops 1% .....	7.00	5 ml OP	✓ Pred Forte

▲ Three months supply may be dispensed at one time if endorsed "certified exemption" by the prescriber or pharmacist

\* Three months or six months, as applicable, dispensed all-at-once

Check your Schedule for full details Schedule page ref	Subsidy (Mnfr's price) \$	Per	Brand or Generic Mnfr ✓ fully subsidised
---	---------------------------------	-----	--

### New Listings – effective 1 September 2017 (continued)

215	MACROGOL 400 AND PROPYLENE GLYCOL – Special Authority see SA1388 – Retail pharmacy Eye drops 0.4% and propylene glycol 0.3%, 0.4 ml.....	7.00	24	✓ <b>Systane Unit Dose Ultra</b>
217	PHARMACY SERVICES – May only be claimed once per patient. * Brand switch fee.....	4.50	1 fee	✓ <b>BSF Apo-Leflunomide</b> ✓ <b>BSF Enlaxaf XR</b>
	a) The Pharmacode for BSF Apo-Leflunomide is 2527014 b) The Pharmacode for BSF Enlaxaf XR is 2527022			

### Effective 11 August 2017

57	DIGOXIN * ‡ Oral liq 50 mcg per ml .....	16.60	60 ml	✓ <b>Lanoxin S29</b> <b>S29</b> Wastage claimable – see rule 3.3.2
----	---	-------	-------	---

### Effective 1 August 2017

128	LIDOCAINE [LIGNOCAINE] Gel 2%, tube – Subsidy by endorsement .....	14.50	30 ml	✓ <b>Xylocaine 2% Jelly</b> a) Up to 150 ml available on a PSO b) Subsidised only if prescribed for urethral or cervical administration and the prescription is endorsed accordingly.
	Gel 2%, 10 ml urethral syringe – Subsidy by endorsement .....	212.50	25	✓ <b>Cathejell</b> a) Up to 5 each available on a PSO b) Subsidised only if prescribed for urethral or cervical administration and the prescription is endorsed accordingly.

Check your Schedule for full details  
Schedule page ref

Subsidy  
(Mnfr's price)  
\$ Per

Brand or  
Generic Mnfr  
✓ fully subsidised

## Changes to Restrictions, Chemical Names and Presentations Effective 1 October 2017

22	<b>HYOSCINE N-BUTYLBROMIDE BUTYLBROMIDE</b>			
	* Tab 10 mg .....	8.75	100	✓ Buscopan
		2.18	20	✓ Gastrosoothe
	* Inj 20 mg, 1 ml – Up to 5 inj available on a PSO .....	9.57	5	✓ Buscopan
134	<b>PAROXETINE – Brand switch fee payable (Pharmacode 2523930)</b>			
	* Tab 20 mg .....	4.02	90	✓ Apo-Paroxetine
162	<b>NICOTINE</b>			
	Nicotine will not be funded under the Dispensing Frequency Rule in amounts less than 4 weeks of treatment.			
	<b>Note – may be provided by a pharmacist under the non-prescribing Practitioners provisions in Part III of Section A</b>			
	Patch 7 mg – Up to 28 patch available on a PSO .....	10.57	28	✓ Habitrol
	Patch 14 mg – Up to 28 patch available on a PSO .....	11.31	28	✓ Habitrol
	Patch 21 mg – Up to 28 patch available on a PSO .....	11.95	28	✓ Habitrol
	Lozenge 1 mg – Up to 216 loz available on a PSO .....	12.91	216	✓ Habitrol
	Lozenge 2 mg – Up to 216 loz available on a PSO .....	14.14	216	✓ Habitrol
	Gum 2 mg (Fruit) – Up to 384 piece available on a PSO .....	22.26	384	✓ Habitrol
	Gum 2 mg (Mint) – Up to 384 piece available on a PSO .....	22.26	384	✓ Habitrol
	Gum 4 mg (Fruit) – Up to 384 piece available on a PSO .....	25.67	384	✓ Habitrol
	Gum 4 mg (Mint) – Up to 384 piece available on a PSO .....	25.67	384	✓ Habitrol
212	<b>CIPROFLOXACIN</b>			
	Eye Drops 0.3% – <b>Subsidy by endorsement</b> .....	12.43	5 ml OP	✓ Ciloxan
	For treatment of bacterial keratitis or severe bacterial conjunctivitis resistant to chloramphenicol.			
	<b>When prescribed for the treatment of bacterial keratitis or severe bacterial conjunctivitis resistant to chloramphenicol; or for the second line treatment of chronic suppurative otitis media (CSOM)*; and the prescription is endorsed accordingly.</b>			
	<b>Notes: Indication marked with a * is an Unapproved Indication</b>			

▲ Three months supply may be dispensed at one time if endorsed "certified exemption" by the prescriber or pharmacist

\* Three months or six months, as applicable, dispensed all-at-once

Check your Schedule for full details  
Schedule page ref

Subsidy  
(Mnfr's price)  
\$ Per

Brand or  
Generic Mnfr  
✓ fully subsidised

## Changes to Restrictions – effective 1 September 2017

53	SODIUM CHLORIDE (Sole Supply suspended) Not funded for use as a nasal drop. Only funded for nebuliser use when in conjunction with an antibiotic intended for nebuliser use. Inj 0.9%, 5 ml ampoule – Up to 5 inj available on a PSO ..... 7.00	50	✓ InterPharma
56	QUINAPRIL WITH HYDROCHLOROTHIAZIDE (Stat dispensing removed) Tab 10 mg with hydrochlorothiazide 12.5 mg..... 3.65 Tab 20 mg with hydrochlorothiazide 12.5 mg..... 4.78	30 30	✓ <u>Accuretic 10</u> ✓ <u>Accuretic 20</u>
99	FLUCLOXACILLIN Inj 1 g vial – Up to 5 <del>10</del> inj available on a PSO ..... 5.22 10.44	5 10	✓ Flucil ✓ Flucloxin
119	LEFLUNOMIDE – <b>Brand Switch Fee payable (Pharmacode 2527014)</b> Tab 10 mg ..... 2.90 Tab 20 mg ..... 2.90	30 30	✓ <u>Apo-Leflunomide</u> ✓ <u>Apo-Leflunomide</u>
135	VENLAFAXINE – <b>Brand Switch Fee payable (Pharmacode 2527022)</b> Cap 37.5 mg ..... 6.38 Cap 75 mg ..... 8.11 Cap 150 mg ..... 11.16	84 84 84	✓ <u>Enlafax XR</u> ✓ <u>Enlafax XR</u> ✓ <u>Enlafax XR</u>
213	PREDNISOLONE ACETATE (Sole Supply suspended) Eye drops 1% ..... 3.93	10 ml OP	✓ Prednisolone-AFT

Check your Schedule for full details  
Schedule page ref

Subsidy  
(Mnfr's price)  
\$ Per

Brand or  
Generic Mnfr  
✓ fully subsidised

## Changes to Subsidy and Manufacturer's Price

Effective 1 October 2017

21	OLSALAZINE (↑ subsidy)				
	Tab 500 mg .....	93.37	100	✓ Dipentum	
	Cap 250 mg .....	53.00	100	✓ Dipentum	
42	NYSTATIN (↓ subsidy)				
	Oral liq 100,000 u per ml .....	1.95 (2.55)	24 ml OP		m-Nystatin
43	MULTIVITAMIN RENAL – Special Authority see SA1546 – Retail pharmacy (↓ subsidy)				
	* Cap .....	6.49	30	✓ Clinicians Renal Vit	
58	METOPROLOL SUCCINATE (↓ subsidy)				
	* Tab long-acting 47.5 mg .....	1.25	30	✓ Betaloc CR	
	* Tab long-acting 95 mg .....	1.99	30	✓ Betaloc CR	
74	PERMETHRIN (↑ subsidy)				
	Crn 5% .....	4.95	30 g OP	✓ Lyderm	
129	LIDOCAINE [LIGNOCAINE] HYDROCHLORIDE (↓ subsidy)				
	Oral (gel) soln 2% .....	38.00 (55.00)	200 ml		Xylocaine Viscous
130	PARACETAMOL (↑ subsidy)				
	*‡ Oral liq 120 mg per 5 ml .....	5.35	1,000 ml	✓ Paracare	
	a) Up to 200 ml available on a PSO				
	b) Not in combination				
144	RISPERIDONE – Safety medicine; prescriber may determine dispensing frequency (↓ subsidy)				
	Tab 0.5 mg .....	1.86	60	✓ Actavis	
	Tab 1 mg .....	2.06	60	✓ Actavis	
	Tab 2 mg .....	2.29	60	✓ Actavis	
	Tab 3 mg .....	2.50	60	✓ Actavis	
	Tab 4 mg .....	3.43	60	✓ Actavis	
165	METHOTREXATE (↑ subsidy)				
	* Inj 2.5 mg per ml, 2 ml – PCT – Retail pharmacy-Specialist .....	47.50	5	✓ Hospira	

▲ Three months supply may be dispensed at one time if endorsed  
“certified exemption” by the prescriber or pharmacist

\* Three months or six months, as  
applicable, dispensed all-at-once

Check your Schedule for full details  
Schedule page ref

Subsidy  
(Mnfr's price)  
\$ Per

Brand or  
Generic Mnfr  
✓ fully subsidised

## Changes to Subsidy and Manufacturer's Price – effective 1 September 2017

25	SODIUM NITROPRUSSIDE – Maximum of 50 strip per prescription (↓ subsidy) * Test strip – Not on a BSO .....	12.00	50 strip OP	✓ Ketostix
51	ENOXAPARIN SODIUM – Special Authority see SA1646 – Retail pharmacy (↓ subsidy) Inj 20 mg in 0.2 ml syringe..... Inj 40 mg in 0.4 ml syringe..... Inj 60 mg in 0.6 ml syringe..... Inj 80 mg in 0.8 ml syringe..... Inj 100 mg in 1 ml syringe..... Inj 120 mg in 0.8 ml syringe..... Inj 150 mg in 1 ml syringe.....	27.93 37.27 56.18 74.90 93.80 116.55 133.20	10 10 10 10 10 10 10	✓ Clexane ✓ Clexane ✓ Clexane ✓ Clexane ✓ Clexane ✓ Clexane ✓ Clexane
56	LOSARTAN POTASSIUM (↓ subsidy) * Tab 12.5 mg .....	1.39	84	✓ Losartan Actavis
	* Tab 25 mg .....	1.63	84	✓ Losartan Actavis
	* Tab 50 mg .....	2.00	84	✓ Losartan Actavis
	* Tab 100 mg .....	2.31	84	✓ Losartan Actavis
60	CLONIDINE (↓ subsidy) * Patch 2.5 mg, 100 mcg per day – Only on a prescription .....	7.40	4	✓ Catapres-TTS-1
	* Patch 5 mg, 200 mcg per day – Only on a prescription .....	10.04	4	✓ Catapres-TTS-2
	* Patch 7.5 mg, 300 mcg per day – Only on a prescription .....	12.34	4	✓ Catapres-TTS-3
81	ERGOMETRINE MALEATE (↑ subsidy) Inj 500 mcg per ml, 1 ml ampoule – Up to 5 inj available on a PSO .....	105.00	5	✓ DBL Ergometrine
99	FLUCLOXACILLIN (↓ subsidy) Inj 1 g vial – Up to 5 inj available on a PSO .....	10.44	10	✓ Flucloxin
180	OCTREOTIDE (↑ subsidy) Inj 50 mcg per ml, 1 ml vial .....	30.64	5	✓ DBL Octreotide
180	OCTREOTIDE (↓ subsidy) Inj 100 mcg per ml, 1 ml vial .....	18.69	5	✓ DBL Octreotide
	Inj 500 mcg per ml, 1 ml vial .....	72.50	5	✓ DBL Octreotide
205	FLUTICASONE (↓ subsidy) Aerosol inhaler, 50 mcg per dose .....	4.68	120 dose OP	✓ Floair
	Aerosol inhaler, 125 mcg per dose .....	7.22	120 dose OP	✓ Floair
	Aerosol inhaler, 250 mcg per dose .....	10.18	120 dose OP	✓ Floair
206	SALMETEROL (↓ subsidy) Aerosol inhaler 25 mcg per dose .....	9.90	120 dose OP	✓ Meterol
206	FLUTICASONE WITH SALMETEROL (↓ subsidy) Aerosol inhaler 50 mcg with salmeterol 25 mcg .....	14.58	120 dose OP	✓ RexAir
	Aerosol inhaler 125 mcg with salmeterol 25 mcg .....	16.83	120 dose OP	✓ RexAir
210	AMINOPHYLLINE (↑ subsidy) * Inj 25 mg per ml, 10 ml ampoule – Up to 5 inj available on a PSO .....	124.37	5	✓ DBL Aminophylline

Patients pay a manufacturer's surcharge when  
the Manufacturer's Price is greater than the Subsidy  
30

**S29** Unapproved medicine supplied under Section 29  
‡ safety cap reimbursed **Sole Subsidised Supply**

Check your Schedule for full details  
Schedule page ref

Subsidy  
(Mnfr's price)  
\$ Per

Brand or  
Generic Mnfr  
✓ fully subsidised

## Changes to Brand Name

Effective 1 September 2017

180	OCTREOTIDE				
	Inj 50 mcg per ml, 1 ml vial .....	30.64	5	✓ DBL Octreotide	
	Inj 100 mcg per ml, 1 ml vial .....	18.69	5	✓ DBL Octreotide	
	Inj 500 mcg per ml, 1 ml vial .....	72.50	5	✓ DBL Octreotide	

## Changes to PSO

Effective 1 September 2017

246	FLUCLOXACILLIN				
	✓ Inj 1 g vial .....	5 10			

▲ Three months supply may be dispensed at one time if endorsed  
"certified exemption" by the prescriber or pharmacist

\* Three months or six months, as  
applicable, dispensed all-at-once

Check your Schedule for full details  
Schedule page ref

Subsidy  
(Mnfr's price)  
\$ Per

Brand or  
Generic Mnfr  
✓ fully subsidised

## Delisted Items

Effective 1 October 2017

44	CALCIUM GLUCONATE * Inj 10%, 10 ml ampoule.....	34.24	10	✓ Hameln	<b>S29</b>
75	PHENOTHRIN Shampoo 0.5%..... Note – Parasidose shampoo 0.5%, 200 ml OP remains subsidised.	5.68	100 ml OP	✓ Parasidose	
126	DANTROLENE Cap 25 mg.....	65.00	100	✓ Dantrium	<b>S29</b>
131	MORPHINE SULPHATE a) Only on a controlled drug form b) No patient co-payment payable c) Safety medicine; prescriber may determine dispensing frequency Tab immediate-release 10 mg..... Tab immediate-release 20 mg..... Note – this delist only applies to Pharmacodes 242675 and 242756. New Pharmacodes were listed 1 July 2017.	2.80 5.52	10 10	✓ Sevredol ✓ Sevredol	
141	GRANISETRON * Tab 1 mg .....	5.98	50	✓ Granirex	
179	AZATHIOPRINE – Retail pharmacy-Specialist * Tab 25 mg ..... * Tab 50 mg – For azathioprine oral liquid formulation refer.....	5.80 10.58	60 100	✓ Azamun ✓ Azamun	
217	PHARMACY SERVICES – May only be claimed once per patient. * Brand switch fee..... a) The Pharmacode for BSF Apo-Paroxetine is 2523930	4.50	1 fee	✓ BSF Apo-Paroxetine	
256	HAEMOPHILUS INFLUENZAE TYPE B VACCINE – [Xpharm] One dose for patients meeting any of the following: 1) For primary vaccination in children; or 2) An additional dose (as appropriate) is funded for (re-)immunisation for patients post haematopoietic stem cell transplantation, or chemotherapy; functional asplenic; pre or post splenectomy; pre- or post solid organ transplant, pre- or post cochlear implants, renal dialysis and other severely immunosuppressive regimens; or 3) For use in testing for primary immunodeficiency diseases, on the recommendation of an internal medicine physician or paediatrician. Inj 10 mcg vial with diluent syringe .....	0.00	1	✓ Act-HIB	
258	HUMAN PAPILLOMAVIRUS (6, 11, 16 AND 18) VACCINE [HPV] – [Xpharm] Funded for patient meeting either of the following criteria: 1) Maximum of 3 doses for people aged 9 to 26 years inclusive; or 2) Maximum of four doses for people aged 9 to 26 years inclusive, post chemotherapy. Inj 120 mcg in 0.5 ml syringe .....	0.00	10 1	✓ Gardasil ✓ Gardasil	



Check your Schedule for full details Schedule page ref	Subsidy (Mnfr's price) \$	Per	Brand or Generic Mnfr ✓ fully subsidised
---	---------------------------------	-----	--

### Delisted Items – effective 1 October 2017 (continued)

260	MEASLES, MUMPS AND RUBELLA VACCINE – [Xpharm] A maximum of two doses for any patient meeting the following criteria: 1) For primary vaccination in children; or 2) For revaccination following immunosuppression; or 3) For any individual susceptible to measles, mumps or rubella; or 4) A maximum of three doses for children who have had their first dose prior to 12 months. Note: Please refer to the Immunisation Handbook for appropriate schedule for catch up programmes. Inj 1000 TCID50 measles, 12500 TCID50 mumps and 1000 TCID50 rubella vial with diluent 0.5 ml vial.....	0.00	10 1	✓M-M-R II ✓M-M-R II
262	ROTAVIRUS LIVE REASSORTANT ORAL VACCINE – [Xpharm] Maximum of three doses for patients meeting the following: 1) first dose to be administered in infants aged under 15 weeks of age; and 2) no vaccination being administered to children aged 8 months or over. Oral susp G1, G2, G3, G4, P1(8)11.5 million CCID50 units per 2 ml, tube.....	0.00	10	✓RotaTeq

### Effective 1 September 2017

53	PEGFILGRASTIM – Special Authority see SA1384 – Retail pharmacy Inj 6 mg per 0.6 ml syringe .....	1,080.00	1	✓Neulastim
Note – This delist only applies to Pharmacocode 2265478. Pharmacocode 2513145 was listed 16 January 2017.				
56	AMIODARONE HYDROCHLORIDE Inj 50 mg per ml, 3 ml ampoule – Up to 5 inj available on a PSO .....	11.98	6	✓Cordarone-X
60	METHYLDOPA * Tab 125 mg .....	14.25	100	✓Prodopa
119	AURANOFIN – Subsidy by endorsement Subsidised for patients who were taking auranofin tab prior to 1 April 2017 and the prescription is endorsed accordingly. Pharmacists may annotate the prescription as endorsed where there exists a record of prior dispensing of auranofin. Tab 3 mg .....	68.99 114.98	60 100	✓Ridaura s29 <b>S29</b> ✓Ridaura s29 <b>S29</b>
119	LEFLUNOMIDE Tab 10 mg .....	2.90 (55.00)	30	Arava
	Tab 20 mg .....	2.90 (76.00)	30	Arava

▲ Three months supply may be dispensed at one time if endorsed "certified exemption" by the prescriber or pharmacist

\* Three months or six months, as applicable, dispensed all-at-once

Check your Schedule for full details  
Schedule page ref

Subsidy  
(Mnfr's price)  
\$

Per

Brand or  
Generic Mnfr  
✓ fully subsidised

### Delisted Items – effective 1 September 2017 (continued)

135	VENLAFAXINE				
	Tab 37.5 mg .....	2.13	28		
		(5.06)			Arrow-Venlafaxine XR
	Tab 75 mg .....	2.70	28		
		(6.44)			Arrow-Venlafaxine XR
	Tab 150 mg .....	3.72	28		
		(8.86)			Arrow-Venlafaxine XR
	Tab 225 mg .....	8.10	28		
		(14.34)			Arrow-Venlafaxine XR
	Cap 37.5 mg .....	2.13	28		
		(2.80)			Efexor XR
	Cap 75 mg .....	2.70	28		
		(5.59)			Efexor XR
	Cap 150 mg .....	3.72	28		
		(6.59)			Efexor XR
140	RIZATRIPTAN				
	Tab orodispersible 10 mg .....	3.24	12	✓	Rizamelt
140	SUMATRIPTAN				
	Tab 50 mg .....	24.44	100		
		(29.80)			Arrow-Sumatriptan
	Tab 100 mg .....	46.23	100		
		(54.80)			Arrow-Sumatriptan
147	ALPRAZOLAM – Subsidy by endorsement				
	a) Safety medicine; prescriber may determine dispensing frequency				
	b) Subsidised for patients who were taking alprazolam prior to 1 December 2016 and the prescription is endorsed accordingly. Pharmacists may annotate the prescription as endorsed where there exists a record of prior dispensing of alprazolam.				
	Tab 250 mcg.....	2.50	50		
		(4.84)			Xanax
	‡ Safety cap for extemporaneously compounded oral liquid preparations.				
	Tab 500 mcg.....	3.25	50		
		(5.92)			Xanax
	‡ Safety cap for extemporaneously compounded oral liquid preparations.				
	Tab 1 mg .....	5.00	50		
		(12.00)			Xanax
	‡ Safety cap for extemporaneously compounded oral liquid preparations.				
155	INTERFERON BETA-1-ALPHA – Special Authority see SA1564 – [Xpharm]				
	Inj 6 million iu per vial .....	1,170.00	4	✓	Avonex
167	CYTARABINE				
	Inj 500 mg – PCT – Retail pharmacy-Specialist .....	18.15	1	✓	Pfizer
234	ENTERAL/ORAL ELEMENTAL FEED 1KCAL/ML – Special Authority see SA1377 – Hospital pharmacy [HP3]				
	Powder .....	7.50	76 g OP	✓	Alitraq

Check your Schedule for full details Schedule page ref	Subsidy (Mnfr's price) \$	Per	Brand or Generic Mnfr ✓ fully subsidised
---	---------------------------------	-----	--

## Items to be Delisted

### Effective 1 November 2017

54	POTASSIUM CHLORIDE * Tab long-acting 600 mg (8 mmol) .....	3.71	100	✓ Duro-K S29 ✓ Slow-K S29
215	MACROGOL 400 AND PROPYLENE GLYCOL – Special Authority see SA1388 – Retail pharmacy Eye drops 0.4% and propylene glycol 0.3%, 0.4 ml .....	7.00	24	✓ Systane Unit Dose Ultra

### Effective 1 December 2017

60	CLONIDINE * Patch 2.5 mg, 100 mcg per day – Only on a prescription .....	7.40	4	✓ Catapres-TTS-1
	* Patch 5 mg, 200 mcg per day – Only on a prescription .....	10.04	4	✓ Catapres-TTS-2
	* Patch 7.5 mg, 300 mcg per day – Only on a prescription .....	12.34	4	✓ Catapres-TTS-3
99	FLUCLOXACILLIN Inj 1 g vial – Up to 5 inj available on a PSO .....	10.44	10	✓ Flucloxin
217	PHARMACY SERVICES May only be claimed once per patient. * Brand switch fee.....	4.50	1 fee	✓ BSF Apo-Leflunomide ✓ BSF Enlifax XR
	a) The Pharmacode for BSF Apo-Leflunomide is 2527014			
	b) The Pharmacode for BSF Enlifax XR is 2527022			

### Effective 1 January 2018

42	NYSTATIN Oral liq 100,000 u per ml .....	1.95 (2.55)	24 ml OP	m-Nystatin
129	LIDOCAINE [LIGNOCAINE] HYDROCHLORIDE Oral (gel) soln 2% .....	38.00 (55.00)	200 ml	Xylocaine Viscous
167	CYTARABINE Inj 20 mg per ml, 5 ml vial – PCT – Retail pharmacy-Specialist.....	80.00	5	✓ Hospira
	Inj 500 mg – PCT – Retail pharmacy-Specialist.....	95.36	5	✓ Hospira
	Inj 100 mg per ml, 10 ml vial – PCT – Retail pharmacy-Specialist.....	42.65	1	✓ Hospira
	Inj 100 mg per ml, 20 ml vial – PCT – Retail pharmacy-Specialist.....	34.47	1	✓ Hospira

### Effective 1 February 2018

25	METFORMIN HYDROCHLORIDE * Tab immediate-release 850 mg.....	7.82	500	✓ Apotex
----	--	------	-----	----------

▲ Three months supply may be dispensed at one time if endorsed "certified exemption" by the prescriber or pharmacist

\* Three months or six months, as applicable, dispensed all-at-once

Check your Schedule for full details Schedule page ref		Subsidy (Mnfr's price) \$	Per	Brand or Generic Mnfr ✓ fully subsidised
---	--	---------------------------------	-----	--

### Items to be Delisted – effective 1 March 2018

25	SODIUM NITROPRUSSIDE – Maximum of 50 strip per prescription * Test strip – Not on a BSO .....	6.00	50 strip OP	✓ <b>Accu-Chek Ketur-Test</b>
58	METOPROLOL SUCCINATE * Tab long-acting 23.75 mg .....	0.80	30	✓ <b>Myloc CR</b>
		2.39	90	✓ <b>Metoprolol - AFT CR</b>
	* Tab long-acting 47.5 mg .....	2.59	30	✓ <b>Myloc CR</b>
		3.48	90	✓ <b>Metoprolol - AFT CR</b>
	* Tab long-acting 95 mg .....	1.91	30	✓ <b>Myloc CR</b>
		5.73	90	✓ <b>Metoprolol - AFT CR</b>
	* Tab long-acting 190 mg .....	3.85	30	✓ <b>Myloc CR</b>
		11.54	90	✓ <b>Metoprolol - AFT CR</b>
86	TESTOSTERONE Transdermal patch, 2.5 mg per day .....	80.00	60	✓ <b>Androderm</b>
114	INDINAVIR – Special Authority see SA1651 – Retail pharmacy Cap 200 mg .....	519.75	360	✓ <b>Crixivan</b>
	Cap 400 mg .....	519.75	180	✓ <b>Crixivan</b>
173	VINBLASTINE SULPHATE Inj 1 mg per ml, 10 ml vial – PCT – Retail pharmacy-Specialist.....	37.29	1	✓ <b>Hospira</b>
	Note – the 5 inj pack remains subsidised.			

### Effective 1 April 2018

138	LAMOTRIGINE ▲ Tab dispersible 25 mg .....	14.74	56	✓ <b>Motrig</b>
	▲ Tab dispersible 50 mg .....	24.73	56	✓ <b>Motrig</b>
	▲ Tab dispersible 100 mg .....	42.34	56	✓ <b>Motrig</b>

### Effective 1 June 2019

146	PIPOTHIAZINE PALMITATE – Subsidy by endorsement a) Safety medicine; prescriber may determine dispensing frequency b) Subsidised for patients who were taking pipothiazine palmitate prior to 1 August 2014 and the prescription or PSO is endorsed accordingly. Pharmacists may annotate the prescription as endorsed where there exists a record of prior dispensing of pipothiazine palmitate.			
	Inj 50 mg per ml, 1 ml – Up to 5 inj available on a PSO .....	178.48	10	✓ <b>Piportil</b>
	Inj 50 mg per ml, 2 ml – Up to 5 inj available on a PSO .....	353.32	10	✓ <b>Piportil</b>

# Index

Pharmaceuticals and brands

<b>A</b>	
Accu-Chek Ketur-Test .....	36
Accuretic 10 .....	28
Accuretic 20 .....	28
Act-HIB .....	32
Adalat Oros .....	25
Alitraq .....	34
Alphamox 250 .....	25
Alprazolam .....	34
AMDIPHARM .....	25
Aminophylline .....	30
Amiodarone hydrochloride.....	33
Amoxicillin .....	25
Androderm .....	36
Apo-Escitalopram .....	25
Apo-Leflunomide .....	28
Apo-Paroxetine .....	27
Apo-Propranolol .....	25
Arava .....	33
Arrow-Sumatriptan .....	34
Arrow-Venlafaxine XR.....	34
Auranofin .....	33
Avonex .....	34
Azamun .....	32
Azathioprine .....	32
<b>B</b>	
Betaloc CR.....	25, 29
Bisoprolol fumarate .....	24
Bonvit .....	24
Bosvate .....	24
BSF Apo-Leflunomide.....	26, 35
BSF Apo-Paroxetine .....	32
BSF Enlafax XR .....	26, 35
Buscopan .....	24, 27
<b>C</b>	
Calcium gluconate .....	32
Carvedilol.....	25
Carvedilol Sandoz .....	25
Catapres-TTS-1 .....	30, 35
Catapres-TTS-2 .....	30, 35
Catapres-TTS-3 .....	30, 35
Cathejell.....	26
Ciloxan.....	27
Ciprofloxacin.....	27
Clexane.....	30
Clinicians Renal Vit.....	29
Clonidine.....	30, 35
Cordarone-X .....	33
Crixivan.....	36
Cytarabine .....	34, 35
<b>D</b>	
Dantrium S29.....	32
Dantrolene .....	32
DBL Aminophylline.....	30
DBL Ergometrine.....	30
DBL Octreotide.....	30, 31
Digoxin .....	26
Dipentum .....	29
Duro-K.....	35
<b>E</b>	
Efexor XR.....	34
Enlafax XR .....	28
Enoxaparin sodium.....	30
Enteral/oral elemental feed 1kcal/ml.....	34
Ergometrine maleate .....	30
Escitalopram.....	25
<b>F</b>	
Ferinject.....	24
Ferric carboxymaltose .....	24
Finasteride .....	25
Floair .....	30
Flucil.....	28
Flucloxacillin .....	28, 30, 31, 35
Flucloxin .....	28, 30, 35
Fluticasone .....	30
Fluticasone with salmeterol .....	30
<b>G</b>	
Gardasil .....	32
Gastrosoothe .....	27
Granirex .....	32
Granisetron .....	32
<b>H</b>	
Habitrol.....	27
Haemophilus influenzae type B vaccine .....	32
HPV .....	32
Human papillomavirus (6, 11, 16 and 18) vaccine [HPV].....	32
Hydralazine hydrochloride .....	25
Hyoscine butylbromide.....	24, 27
Hyoscine N-butylbromide .....	27
<b>I</b>	
Indinavir.....	36
Interferon beta-1-alpha.....	34
Ispaghula (psyllium) husk.....	24
<b>K</b>	
Ketostix.....	30
<b>L</b>	
Lamotrigine.....	36
Lanoxin S29.....	26
Leflunomide.....	28, 33
Lidocaine [lignocaine] .....	26

# Index

## Pharmaceuticals and brands

Lidocaine [lignocaine] hydrochloride .....	29, 35	Piportil .....	36
Lignocaine .....	26, 29, 35	Pipothiazine palmitate .....	36
Losartan Actavis .....	30	Potassium chloride .....	35
Losartan potassium .....	30	Pred Forte .....	25
Lyderm .....	29	Prednisolone acetate .....	25, 28
<b>M</b>		Prednisolone-AFT .....	28
Macrogol 400 and propylene glycol .....	26, 35	Prodopa .....	33
Measles, mumps and rubella vaccine .....	33	Propranolol .....	25
Meterol .....	30	<b>Q</b>	
Metformin hydrochloride .....	35	Quinapril with hydrochlorothiazide .....	28
Methotrexate .....	29	<b>R</b>	
Methyldopa .....	33	RexAir .....	30
Metoprolol - AFT CR .....	36	Ricit .....	25
Metoprolol succinate .....	25, 29, 36	Ridaura s29 .....	33
M-M-R II .....	33	Risperidone .....	29
m-Nystatin .....	29, 35	Rizamelt .....	34
Morphine sulphate .....	32	Rizatriptan .....	34
Motrig .....	36	RotaTeq .....	33
Multivitamin renal .....	29	Rotavirus live reassortant oral vaccine .....	33
Myloc CR .....	36	<b>S</b>	
<b>N</b>		Salmeterol .....	30
Neulastim .....	33	Sevredol .....	32
Nicotine .....	27	Slow-K .....	35
Nifedipine .....	25	Sodium chloride .....	25, 28
Nystatin .....	29, 35	Sodium nitroprusside .....	30, 36
<b>O</b>		Sumatriptan .....	34
Octreotide .....	30, 31	Systane Unit Dose Ultra .....	26, 35
Olsalazine .....	29	<b>T</b>	
Orion Temozolomide .....	25	Temizole 20 .....	25
<b>P</b>		Temozolomide .....	25
Paracare .....	29	Testosterone .....	36
Paracetamol .....	29	<b>V</b>	
Parasidose .....	32	Venlafaxine .....	28, 34
Paroxetine .....	27	Vinblastine sulphate .....	36
Pegfilgrastim .....	33	<b>X</b>	
Permethrin .....	29	Xanax .....	34
Pharmacy services .....	26, 32, 35	Xylocaine 2% Jelly .....	26
Phenothrin .....	32	Xylocaine Viscous .....	29, 35



**Pharmaceutical Management Agency**

Level 9, 40 Mercer Street, PO Box 10254, Wellington 6143, New Zealand

Phone: 64 4 460 4990 - Fax: 64 4 460 4995 - [www.pharmac.govt.nz](http://www.pharmac.govt.nz)

Email: [enquiry@pharmac.govt.nz](mailto:enquiry@pharmac.govt.nz)

**ISSN 1172-9376 (Print)**

**ISSN 1179-3686 (Online)**

While care has been taken in compiling this Update, Pharmaceutical Management Agency takes no responsibility for any errors or omissions and shall not be liable to any person for any damages or loss arising out of reliance by that person for any purpose on any of the contents of this Update. Errors and omissions brought to the attention of Pharmaceutical Management Agency will be corrected if necessary by an erratum or otherwise in the next edition of the Update.