

Pharmaceutical Management Agency

Section H Update for Hospital Pharmaceuticals

Effective 1 September 2018

Cumulative for August and September 2018



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Summary of decisions

EFFECTIVE 1 SEPTEMBER 2018

- Adalimumab inj 20 mg per 0.4 ml syringe and 40 mg per 0.8 ml syringe (Humira) and inj 40 mg per 0.8 ml pen (HumiraPen) – amended restriction criteria
- Calamine (healthE Calamine Aqueous Cream BP) crm, aqueous, BP – new listing and addition of HSS
- Calcitonin (Miacalcic) inj 100 iu per ml 1 ml ampoule – listing new Pharmacode and delisting existing Pharmacode
- Compound electrolytes with glucose [dextrose] (Pedialyte – Bubblegum) soln with electrolytes (2 x 500 ml) – new listing, amended chemical name and presentation description
- Enteral feed 1.5kcal/ml (e.g Isosource Standard RTH) Liquid 5.4 g protein, 13.6 g carbohydrate and 3.3 g fat per 100 ml, 1,000 ml bottle – delisted 1 September 2018
- Eptifibatide (Integrilin) inj 2 mg per ml, 10 ml vial and inj 750 mcg per ml, 100 ml vial – price increase and addition of HSS
- Ethosuximide (Zarontin) cap 250 mg and oral liq 50 mg per ml – new listing
- Fentanyl (Boucher and Muir) inj 50 mcg per ml, 2 ml and 10 ml ampoule – price decrease and addition of HSS
- Fluorouracil (Fluorouracil Ebewe) inj 5- mg per ml, 50 ml vial – to be delisted 1 March 2019
- Fluticasone propionate (Flixonase Hayfever & Allergy) nasal spray 50 mcg per dose, 120 dose – price decrease and addition of HSS
- Gentamicin sulphate (APP Pharmaceuticals) inj 10 mg per ml, 2 ml ampoule – to be delisted 1 April 2019
- Heparin sodium (Pfizer) inj 1,000 iu per ml and 5,000 iu per ml, 5 ml ampoule – price decrease and addition of HSS
- Isoprenaline [isoproterenol] inj 200 mcg per ml, 1 ml and 5 ml ampoule – amended chemical name
- Letrozole (Letrole) tab 2.5 mg – price increase and addition of HSS
- Lidocaine [lignocaine] hydrochloride (Orion) gel 2%, 20 g – price increase, addition of HSS and amended unit of measure
- Magnesium chloride inj 1 mmol per 1 ml, 100 ml bag – new listing
- Mometasone furoate crm 0.1%, 15 g (Elocon Alcohol Free) and oint 0.1%, 15 g and 50 g (Elocon) – addition of HSS
- Mometasone furoate crm 0.1%, 50 g (Elocon Alcohol Free) and lotn 0.1%, 30 ml (Elocon) – price decrease and addition of HSS

Summary of decisions – effective 1 September 2018 (continued)

- Moxifloxacin tab 400 mg (Avelox) and inj 1.6 mg per ml, 250 ml bottle (Avelox IV 400) – amended restriction criteria
- Oxytocin (Oxytocin BNM) inj 5 iu per ml and 10 iu per ml, 1 ml ampoule – price decrease and addition of HSS
- Paracetamol (Gacet) suppos 125 mg – price decrease and addition of HSS
- Paracetamol (Gacet) suppos 250 mg – addition of HSS
- Promethazine theoclinate tab 25 mg – to be delisted 1 December 2018
- Quinapril tab 5 mg (Arrow-Quinapril 5) and tab 10 mg (Arrow-Quinapril 10) – price increase and addition of HSS
- Quinapril (Arrow-Quinapril 20) tab 20 mg – price decrease and addition of HSS
- Ritonavir oral liq 80 mg per ml – delisted 1 September 2018
- Rivaroxaban (Xarelto) tab 10 mg; 15 tab pack – to be delisted 1 December 2018
- Salbutamol (Ventolin) oral liq 400 mcg per ml – price increase and addition of HSS
- Sildenafil (Vedafil) tab 25 mg, 50 mg, 100 mg and inj 0.8 mg per ml, 12.5 ml vial – amended restriction criteria
- Temozolomide (Orion Temozolomide) cap 5 mg, 20 mg, 100 mg and 250 mg – amended restriction criteria
- Testosterone undecanoate (Andriol Testocaps) cap 40 mg – price increase and addition of HSS
- Thiamine hydrochloride (Max Health) tab 50 mg – new listing and addition of HSS
- Verapamil hydrochloride (Isoptin) inj 2.5 mg per ml, 2 ml ampoule – listing new Pharmacode and delisting existing Pharmacode

		Price (ex man. Excl. GST)		Brand or Generic Manufacturer
		\$	Per	

Section H changes to Part II

Effective 1 September 2018

ALIMENTARY TRACT AND METABOLISM

17	MAGNESIUM CHLORIDE (new listing) Inj 1 mmol per 1 ml, 100 ml bag			
20	THIAMINE HYDROCHLORIDE (new listing) Tab 50 mg – 1% DV Nov-18 to 2020	4.89	100	Max Health

BLOOD AND BLOOD FORMING ORGANS

28	HEPARIN SODIUM (↑ price and addition of HSS) Inj 1,000 iu per ml, 5 ml ampoule – 1% DV Nov-18 to 2021	58.57	50	Pfizer
	Inj 5,000 iu per ml, 5 ml ampoule – 1% DV Nov-18 to 2021	203.68	50	Pfizer
28	RIVAROXABAN (delisting) Tab 10 mg	41.55	15	Xarelto
	Note – Xarelto tab 10 mg, 15 tab pack to be delisted from 1 December 2018.			
29	EPTIFIBATIDE (↑ price and addition of HSS) → Inj 2 mg per ml, 10 ml vial – 1% DV Nov-18 to 2021.....	138.75	1	Integriulin
	→ Inj 750 mcg per ml, 100 ml vial – 1% DV Nov-18 to 2021....	405.00	1	Integriulin
33	COMPOUND ELECTROLYTES WITH GLUCOSE [DEXTROSE] (new listing, amended chemical name and presentation description) Soln with electrolytes (2 x 500 ml) – 1% DV Nov-18 to 2021	6.55	1,000 ml	Pedialyte – Bubblegum

CARDIOVASCULAR SYSTEM

35	QUINAPRIL (↑ price and addition of HSS) Tab 5 mg – 1% DV Nov-18 to 2021	6.01	90	Arrow-Quinapril 5
	Tab 10 mg – 1% DV Nov-18 to 2021	3.16	90	Arrow-Quinapril 10
35	QUINAPRIL (↓ price and addition of HSS) Tab 20 mg – 1% DV Nov-18 to 2021	4.89	90	Arrow-Quinapril 20
40	VERAPAMIL HYDROCHLORIDE (Pharmacode change) Inj 2.5 mg per ml, 2 ml ampoule	25.00	5	Isoptin
	Note – this is a new Pharmacode listing, 2535351. Pharmacode 253480 to be delisted from 1 March 2019.			
44	ISOPRENALE [ISOPROTERENOL] (amended chemical name) Inj 200 mcg per ml, 1 ml ampoule Inj 200 mcg per ml, 5 ml ampoule			

		Price (ex man. Excl. GST)		Brand or Generic Manufacturer
		\$	Per	

Changes to Section H Part II – effective 1 September 2018 (continued)

46	SILDENAFIL (amended restriction – affected criteria shown only)			
	→ Tab 25 mg – 1% DV Sep-18 to 2021	0.64	4	Vedafil
	→ Tab 50 mg – 1% DV Sep-18 to 2021	0.64	4	Vedafil
	→ Tab 100 mg – 1% DV Sep-18 to 2021	6.60	12	Vedafil
	→ Inj 0.8 mg per ml, 12.5 ml vial			
	Restricted			
	Initiation – tablets Pulmonary arterial hypertension			
	Any of the following:			
1	All of the following:			
1.1	Patient has pulmonary arterial hypertension (PAH)*; and			
1.2	Any of the following:			
1.2.1	PAH is in Group 1 of the WHO (Venice) clinical classifications; or			
1.2.2	PAH is in Group 4 of the WHO (Venice) clinical classifications, or			
1.2.3	PAH is in Group 5 of the WHO (Venice) clinical classifications; and			
1.3	Any of the following:			
1.3.1	PAH is in NYHA/WHO functional class II; or			
1.3.2	PAH is in NYHA/WHO functional class III; or			
1.3.3	PAH is in NYHA/WHO functional class IV; and			
1.4	Either:			
1.4.1	All of the following:			
1.4.1.1	1.4 Patient has a pulmonary capillary wedge pressure (PCWP) less than or equal to 15 mmHg; and			
1.4.1.2	1.5 Either:			
1.4.1.2.1	1.5.1 Patient has a mean pulmonary artery pressure (PAPm) > 25 mmHg; or			
1.4.1.2.2	1.5.2 Patient is peri Fontan repair; and			
1.4.1.3	1.6 Patient has a pulmonary vascular resistance (PVR) of at least 3 Wood Units or at least 240 International Units (dyn s cm-5); or			
1.4.2	Testing for PCWP, PAPm, or PVR cannot be performed due to the patient's young age; or			
2	For use in neonatal units for persistent pulmonary hypertension of the newborn (PPHN); or			
3	In-hospital stabilisation in emergency situations			

DERMATOLOGICALS

50	CALAMINE (brand change)			
	Crm, aqueous, BP – 1% DV Nov-18 to 2021	1.26	100 g	healthE Calamine Aqueous Cream BP
Note – Pharmacy Health crm, aqueous, BP to be delisted from 1 November 2018.				
52	MOMETASONE FUROATE (addition of HSS)			
	Crm 0.1% – 1% DV Nov-18 to 2021	1.51	15 g	Elocon Alcohol Free
	Oint 0.1% – 1% DV Nov-18 to 2021	1.51	15 g	Elocon
		2.90	50 g	Elocon
52	MOMETASONE FUROATE (↓ price and addition of HSS)			
	Crm 0.1% – 1% DV Nov-18 to 2021	2.50	50 g	Elocon Alcohol Free
	Lotn 0.1% – 1% DV Nov-18 to 2021	6.30	30 ml	Elocon

→ Restriction

(Brand) indicates a brand example only. It is not a contracted product.

		Price (ex man. Excl. GST) \$	Per	Brand or Generic Manufacturer
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Changes to Section H Part II – effective 1 September 2018 (continued)

GENITO-URINARY SYSTEM

57	OXYTOCIN (↓ price and addition of HSS)			
	Inj 5 iu per ml, 1 ml ampoule – 1% DV Nov-18 to 2021	3.98	5	Oxytocin BNM
	Inj 10 iu per ml, 1 ml ampoule – 1% DV Nov-18 to 2021	4.98	5	Oxytocin BNM

HORMONE PREPARATIONS

60	CALCITONIN (Pharmacode change)			
	Inj 100 iu per ml, 1 ml ampoule	121.00	5	Miacalcic
Note – this is a new Pharmacode listing, 2548356. Pharmacode 259012 to be delisted from 1 March 2019.				
60	TESTOSTERONE UNDECANOATE (↑ price and addition of HSS)			
	Cap 40 mg – 1% DV Nov-18 to 2021	21.00	60	Andriol Testocaps

INFECTIONS

70	GENTAMICIN SULPHATE (delisting)			
	Inj 10 mg per ml, 2 ml ampoule	175.10	25	APP Pharmaceuticals
Note – APP Pharmaceutical inj 10 mg per ml, 2 ml ampoule to be delisted from 1 April 2019.				
75	MOXIFLOXACIN (amended restriction – affected criteria shown only)			
	→ Tab 400 mg	52.00	5	Avelox
	→ Inj 1.6 mg per ml, 250 ml bottle	70.00	1	Avelox IV 400
	Restricted			
	Initiation – Mycobacterium infection			
	Infectious disease specialist, clinical microbiologist or respiratory specialist			
	Any of the following Either:			
1	Both:			
1.1	Active tuberculosis; and			
1.2	Any of the following:			
1.2.1	Documented resistance to one or more first-line medications; or			
1.2.2	Suspected resistance to one or more first-line medications (tuberculosis assumed to be contracted in an area with known resistance), as part of regimen containing other second-line agents; or			
1.2.3	Impaired visual acuity (considered to preclude ethambutol use); or			
1.2.4	Significant pre-existing liver disease or hepatotoxicity from tuberculosis medications; or			
1.2.5	Significant documented intolerance and/or side effects following a reasonable trial of first-line medications; or			
2	Mycobacterium avium-intracellulare complex not responding to other therapy or where such therapy is contraindicated; or			
3	Patient is under five years of age and has had close contact with a confirmed multi-drug resistant tuberculosis case.			
	Initiation – <i>Mycoplasma genitalium</i>			
	All of the following:			
1	Has nucleic acid amplification test (NAAT) confirmed <i>Mycoplasma genitalium</i> and is symptomatic ; and			
2	Either:			
2.1	Has tried and failed to clear infection using azithromycin; and or			
2.2	Has laboratory confirmed azithromycin resistance; and			
3	Treatment is only for 7 days.			

		Price (ex man. Excl. GST)		Brand or Generic Manufacturer
		\$	Per	

Changes to Section H Part II – effective 1 September 2018 (continued)

- 85 RITONAVIR (delisting)
 → Oral liq 80 mg per ml
 Note – Ritonavir oral liq 80 mg per ml to be delisted from 1 September 2018.

NERVOUS SYSTEM

- | | | | | |
|-----|---|-----------------|---------------|--------------------------------------|
| 106 | LIDOCAINE [LIGNOCAINE] HYDROCHLORIDE (↑ price, addition of HSS and amended unit of measure)
Gel 2% – 1% DV Nov-18 to 2021 | 4.87 | 20 g ml | Orion |
| 107 | PARACETAMOL (addition of HSS)
Suppos 125 mg – 1% DV Nov-18 to 2021 (↓ price).....
Suppos 250 mg – 1% DV Nov-18 to 2021..... | 3.29
3.79 | 10
10 | Gacet
Gacet |
| 108 | FENTANYL (↓ price and addition of HSS)
Inj 50 mcg per ml, 2 ml ampoule – 1% DV Nov-18 to 2021
Inj 50 mcg per ml, 10 ml ampoule – 1% DV Nov-18 to 2021 | 3.56
9.41 | 10
10 | Boucher and Muir
Boucher and Muir |
| 112 | ETHOSUXIMIDE (new listing)
Cap 250 mg
Oral liq 50 mg per ml..... | 281.75
56.35 | 200
200 ml | Zarontin
Zarontin |
| 117 | PROMETHAZINE THEOCLOATE (delisting)
→ Tab 25 mg
Note – Promethazine theoclinate tab 25 mg to be delisted from 1 December 2018. | | | |

ONCOLOGY AGENTS AND IMMUNOSUPPRESSANTS

- | | | | | |
|-----|--|----------------------------------|------------------|--|
| 131 | FLUOROURACIL (delisting)
Inj 50 mg per ml, 50 ml vial | 17.00 | 1 | Fluorouracil Ebewe |
| | Note – Fluorouracil Ebewe inj 50 mg per ml, 50 ml vial to be delisted from 1 March 2019. | | | |
| 135 | TEMOZOLOMIDE (amended restriction – affected criteria shown only)
→ Cap 5 mg – 1% DV Feb-17 to 2019.....
→ Cap 20 mg – 1% DV Feb-17 to 2019.....
→ Cap 100 mg – 1% DV Feb-17 to 2019.....
→ Cap 250 mg – 1% DV Feb-17 to 2019..... | 10.20
18.30
40.20
96.80 | 5
5
5
5 | Orion Temozolomide
Orion Temozolomide
Orion Temozolomide
Orion Temozolomide |

Restricted

Initiation – Ewing's Sarcoma

Reassessment required after 9 months

Patient has relapse or refractory Ewing's sarcoma.

Continuation – Ewing's Sarcoma

Reassessment required after 6 months

Both:

- 1 No evidence of disease progression; and
- 2 The treatment remains appropriate and the patient is benefitting from treatment.



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		Price (ex man. Excl. GST) \$	Brand or Generic Manufacturer
		Per	

Changes to Section H Part II – effective 1 September 2018 (continued)

144	LETROZOLE (↑ price and addition of HSS) Tab 2.5 mg – 1% DV Nov-18 to 2021	4.68	30	Letrole
151	ADALIMUMAB (amended restrictions – affected criteria shown only) → Inj 20 mg per 0.4 ml syringe	1,599.96	2	Humira
	→ Inj 40 mg per 0.8 ml pen.....	1,599.96	2	HumiraPen
	→ Inj 40 mg per 0.8 ml syringe	1,599.96	2	Humira
Restricted				
Initiation – Crohn's disease – adults				
Gastroenterologist				
<i>Re-assessment required after 3 months</i>				
All of the following:				
1	Patient has severe active Crohn's disease; and			
2	Any of the following:			
2.1	Patient has a Crohn's Disease Activity Index (CDAI) score of greater than or equal to 300; or			
2.2	Patient has extensive small intestine disease affecting more than 50 cm of the small intestine; or			
2.3	Patient has evidence of short gut syndrome or would be at risk of short gut syndrome with further bowel resection; or			
2.4	Patient has an ileostomy or colostomy, and has intestinal inflammation; and			
3	Patient has tried but had an inadequate response to, or has experienced intolerable side effects from, prior systemic therapy with immunomodulators at maximum tolerated doses (unless contraindicated) and corticosteroids; and			
4	Surgery (or further surgery) is considered to be clinically inappropriate.			
Continuation – Crohn's disease – adults				
Gastroenterologist				
<i>Re-assessment required after 3 months</i>				
Both:				
1	Either:			
1.1	Either:			
1.1.1	CDAI score has reduced by 100 points from the CDAI score when the patient was initiated on adalimumab; or			
1.1.2	CDAI score is 150 or less; or			
1.2	Both:			
2.2.1	The patient has demonstrated an adequate response to treatment but CDAI score cannot be assessed; and			
2.2.2	Applicant to indicate the reason that CDAI score cannot be assessed; and			
2	Adalimumab to be administered at doses no greater than 40 mg every 14 days.			
Initiation – Crohn's disease – children				
Gastroenterologist				
<i>Re-assessment required after 3 months</i>				
All of the following:				
1	Paediatric patient has severe active Crohn's disease; and			
2	Either:			
2.1	Patient has a Paediatric Crohn's Disease Activity Index (PCDAI) score of greater than or equal to 30; or			
2.2	Patient has extensive small intestine disease; and			
3	Patient has tried but had an inadequate response to, or has experienced intolerable side effects from, prior systemic therapy with immunomodulators at maximum tolerated doses (unless contraindicated) and corticosteroids; and			
4	Surgery (or further surgery) is considered to be clinically inappropriate.			

continued...

	Price (ex man. Excl. GST)	Brand or Generic Manufacturer
	\$	Per

Changes to Section H Part II – effective 1 September 2018 (continued)

continued...

Continuation – Crohn's disease – children

Gastroenterologist

Re-assessment required after 3 months

Both:

1 Any of the following:

- 1.1 PCDAI score has reduced by 10 points from the PCDAI score when the patient was initiated on adalimumab; or
- 1.2 PCDAI score is 15 or less; or
- 1.3 The patient has demonstrated an adequate response to treatment but PCDAI score cannot be assessed; and

2 Adalimumab to be administered at doses no greater than 40 mg every 14 days.

RESPIRATORY SYSTEM AND ALLERGIES

186	FLUTICASONE PROPIONATE (↑ price and addition of HSS) Nasal spray 50 mcg per dose – 1% DV Nov-18 to 20211.98	120 dose	Flixonase Hayfever & Allergy
188	SALBUTAMOL (↑ price and addition of HSS) Oral liq 400 mcg per ml – 1% DV Nov-18 to 202120.00	150 ml	Ventolin

SPECIAL FOODS

223	ENTERAL FEED 1.5 KCAL/ML (delisting) → Liquid 5.4 g protein, 13.6 g carbohydrate and 3.3 g fat per 100 ml,1,000 ml bottle	e.g. <i>Isosource Standard RTH</i>
Note – Enteral feed 1.5 kcal/ml (e.g. Isosource Standard RTH) liquid, 1,000 ml bottle to be delisted 1 September 2018.		

		Price (ex man. Excl. GST) \$	Per	Brand or Generic Manufacturer
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Changes to Section H Part II – effective 1 August 2018

ALIMENTARY TRACT AND METABOLISM

5	ALUMINIUM HYDROXIDE WITH MAGNESIUM HYDROXIDE AND SIMETICONE SIMETHICONE (amended chemical name and presentation description)			
	Tab 200 mg with magnesium hydroxide 200 mg and simeticone simethicone 20 mg			<i>e.g. Mylanta</i>
	Oral liq 400 mg with magnesium hydroxide 400 mg and simeticone simethicone 30 mg per 5 ml			<i>e.g. Mylanta Double Strength</i>
5	SIMETICONE SIMETHICONE (amended chemical name)			
	Oral drops 100 mg per ml			
5	SIMETICONE (new listing)			
	Oral drops 20 mg per 0.3 ml			
10	GLIBENCLAMIDE (new listing)			
	Tab 5 mg – 1% DV Oct-18 to 2021 6.00	100		Daonil
10	PIOGLITAZONE (addition of HSS)			
	Tab 15 mg – 1% DV Oct-18 to 2021 3.47	90		Vexazone
	Tab 30 mg – 1% DV Oct-18 to 2021 5.06	90		Vexazone
	Tab 45 mg – 1% DV Oct-18 to 2021 7.10	90		Vexazone
12	GLYCEROL (↑ price and addition of HSS)			
	Suppos 3.6 g – 1% DV Oct-18 to 2021 9.25	20		PSM
15	IMIGLUCERASE (delisting)			
	→ Inj 40 iu per ml, 5 ml vial			
	→ Inj 40 iu per ml, 10 ml vial			
	Note – Imiglucerase inj 40 iu per ml, 5 ml and 10 ml vials to be delisted from 1 March 2019.			
16	TALIGLUCERASE ALFA (new listing)			
	→ Inj 200 unit vial 1,072.00	1		Eleyso
	Restricted			
	Initiation			
	Only for use in patients with approval by the Gaucher's Treatment Panel.			
17	FERROUS SULPHATE (Pharmacode change)			
	Tab long-acting 325 mg (105 mg elemental) – 1% DV Jun-18 to 2021 2.06	30		Ferrograd
	Note – this is a new Pharmacode listing, 2534819. 604321 to be delisted from 1 February 2019.			

BLOOD AND BLOOD FORMING ORGANS

23	FOLIC ACID (↑ price and addition of HSS)			
	Tab 0.8 mg – 1% DV Oct-18 to 2021 21.84	1,000		Apo-Folic Acid
	Tab 5 mg – 1% DV Oct-18 to 2021 12.12	500		Apo-Folic Acid

		Price (ex man. Excl. GST)		Brand or Generic Manufacturer
		\$	Per	

Changes to Section H Part II – effective 1 August 2018 (continued)

25	TRANEXAMIC ACID (pack size correction) Inj 100 mg per ml, 10 ml ampoule – 1% DV Sep-18 to 2021 ... 10.95 Note – this is a correction to the pack size only.	5.40		Tranexamic-AFT
28	RIVAROXABAN (↓ price and restriction removed) → Tab 10 mg 41.55 Restricted Initiation – total hip replacement Limited to 5 weeks treatment For the prophylaxis of venous thromboembolism. Initiation – total knee replacement Limited to 2 weeks treatment For the prophylaxis of venous thromboembolism.	15		Xarelto
28	RIVAROXABAN (new listing) Tab 10 mg 83.10 Tab 15 mg 77.56 Tab 20 mg 77.56	30 28 28		Xarelto Xarelto Xarelto
33	SODIUM DIHYDROGEN PHOSPHATE [SODIUM ACID PHOSPHATE] (↑ price and addition of HSS) Inj 1 mmol per ml, 20 ml ampoule – 1% DV Oct-18 to 2021 ... 48.70	5		Biomed
33	POTASSIUM CHLORIDE (↑ price and addition of HSS) Tab long-acting 600 mg (8 mmol) – 1% DV Oct-18 to 2021 8.90	200		Span-K

CARDIOVASCULAR SYSTEM

35	TRANDOLAPRIL (delisting) → Cap 1 mg → Cap 2 mg Note – Trandolapril cap 1 mg and 2 mg to be delisted from 1 January 2019.			
35	ENALAPRIL MALEATE WITH HYDROCHLOROTHIAZIDE (delisting) → Tab 20 mg with hydrochlorothiazide 12.5 mg Note – Enalapril maleate with hydrochlorothiazide tab 20 mg with hydrochlorothiazide 12.5 mg to be delisted from 1 January 2019.			
37	ATROPINE SULPHATE (brand change) Inj 600 mcg per ml, 1 ml ampoule – 1% DV Oct-18 to 2021 ... 12.07 Note – AstraZeneca inj 600 mcg per ml, 1 ml ampoule to be delisted from 1 October 2018.	10		Martindale
38	METOPROLOL TARTRATE (brand change) Inj 1 mg per ml, 5 ml vial – 1% DV Feb-19 to 31 Jan 2022 29.50 Note – Lopresor inj 1 mg per ml, 5 ml vial to be delisted from 1 February 2019.	5		Metoprolol IV Mylan
38	METOPROLOL TARTRATE (↑ price and addition of HSS) Tab 50 mg – 1% DV Oct-18 to 2021 5.66 Tab 100 mg – 1% DV Oct-18 to 2021 7.55	100 60		Apo-Metoprolol Apo-Metoprolol

→ Restriction

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		Price (ex man. Excl. GST)		Brand or Generic Manufacturer
		\$	Per	
Changes to Section H Part II – effective 1 August 2018 (continued)				
38	NADOLOL (↑ price and addition of HSS)			
	Tab 40 mg – 1% DV Oct-18 to 2021	16.69	100	Apo-Nadolol
	Tab 80 mg – 1% DV Oct-18 to 2021	26.43	100	Apo-Nadolol
38	PINDOLOL (↑ price and addition of HSS)			
	Tab 5 mg – 1% DV Oct-18 to 2021	13.22	100	Apo-Pindolol
	Tab 10 mg – 1% DV Oct-18 to 2021	23.12	100	Apo-Pindolol
	Tab 15 mg – 1% DV Oct-18 to 2021	33.31	100	Apo-Pindolol
38	PROPRANOLOL (↑ price and addition of HSS)			
	Tab 10 mg – 1% DV Oct-18 to 2021	4.64	100	Apo-Propranolol
	Tab 40 mg – 1% DV Oct-18 to 2021	5.72	100	Apo-Propranolol
39	ISRADIPINE (delisting)			
	Cap long-acting 2.5 mg			
	Cap long-acting 5 mg			
	Note – Isradipine cap long-acting 2.5 mg and 5 mg to be delisted from 1 October 2018.			
39	DILTIAZEM HYDROCHLORIDE (↑ price and addition of HSS)			
	Cap long-acting 120 mg – 1% DV Oct-18 to 2021	33.42	500	Apo-Diltiazem CD
	Cap long-acting 180 mg – 1% DV Oct-18 to 2021	50.05	500	Apo-Diltiazem CD
	Cap long-acting 240 mg – 1% DV Oct-18 to 2021	66.76	500	Apo-Diltiazem CD
39	NIFEDIPINE (HSS suspended)			
	Tab long-acting 30 mg – 1% DV Dec-17 to 31 Jul 18 2020	3.14	30	Adalat Oros
40	VERAPAMIL HYDROCHLORIDE (Pharmacode change)			
	Tab 80 mg	11.74	100	Isoptin
	Note – this is a listing of a new Pharmacode, 2535335. Pharmacode 253502 to be delisted from 1 July 2019.			
40	CLONIDINE HYDROCHLORIDE (↓ price and addition of HSS)			
	Tab 25 mcg – 1% DV Oct-18 to 2021	8.75	112	Clonidine BNM
40	CLONIDINE HYDROCHLORIDE (brand change)			
	Inj 150 mcg per ml, 1 ml ampoule – 1% DV Oct-18 to 2021	25.96	10	Medsurge
	Note – Catapres inj 150 mcg per ml, 1 ml ampoule to be delisted from 1 October 2018.			
43	DOBUTAMINE HYDROCHLORIDE (brand change)			
	Inj 12.5 mg per ml, 20 ml ampoule	61.13	5	Dobutamine-hameln
	Note – Dobutamine-hameln inj 12.5 mg per ml, 20 ml ampoule to be delisted from 1 January 2019.			
45	BOSENTAN (brand change)			
	→ Tab 62.5 mg – 1% DV Dec-18 to 2021	141.00	60	Bosentan Dr Reddy's
	→ Tab 125 mg – 1% DV Dec-18 to 2021	141.00	60	Bosentan Dr Reddy's
	Note – Bosentan-Mylan tab 62.5 mg and 125 mg to be delisted from 1 December 2018.			
DERMATOLOGICALS				
50	ISOTRETINOIN (new listing)			
	Cap 5 mg – 1% DV Oct-18 to 2021	8.14	60	Oratane

		Price (ex man. Excl. GST)		Brand or Generic Manufacturer
		\$	Per	

Changes to Section H Part II – effective 1 August 2018 (continued)

50	ISOTRETINOIN (↓ price and addition of HSS)			
	Cap 10 mg – 1% DV Oct-18 to 2021	13.34	120	Oratane
	Cap 20 mg – 1% DV Oct-18 to 2021	20.49	120	Oratane
50	ISOTRETINOIN (delisting)			
	Cap 10 mg	12.47	100	Isotane 10
	Cap 20 mg	19.27	100	Isotane 20
	Note – Isotane 10 cap 10 mg and Isotane 20 cap 20 mg to be delisted from 1 October 2018.			
51	AQUEOUS CREAM (↑ price and addition of HSS)			
	Crm 100 g – 1% DV Oct-18 to 2021	1.05	100 g	Pharmacy Health SLS-free
	Note: DV limit applies to the pack sizes of 100 g or less.			
52	BETAMETHASONE VALERATE (↑ price and addition of HSS)			
	Crm 0.1% – 1% DV Oct-18 to 2021	3.45	50 g	Beta Cream
	Oint 0.1% – 1% DV Oct-18 to 2021	3.45	50 g	Beta Ointment
53	BETAMETHASONE VALERATE (addition of HSS)			
	Scalp app 0.1% – 1% DV Oct-18 to 2021	7.75	100 ml	Beta Scalp

GENITO-URINARY SYSTEM

57	OXYTOCIN WITH ERGOMETRINE MALEATE (↑ price and addition of HSS)			
	Inj 5 iu with ergometrine maleate 500 mcg per ml, 1 ml ampoule – 1% DV Oct-18 to 2021	15.00	5	Syntometrine
58	POTASSIUM CITRATE (↑ price and addition of HSS)			
	→ Oral liq 3 mmol per ml – 1% DV Oct-18 to 2021	31.80	200 ml	Biomed

HORMONE PREPARATIONS

61	DEXAMETHASONE (↑ price and addition of HSS)			
	Tab 0.5 mg – 1% DV Oct-18 to 2021	0.99	30	Dexamethsone
	Tab 4 mg – 1% DV Oct-18 to 2021	1.90	30	Dexamethsone
64	SOMATROPIN (↓ price and addition of HSS)			
	→ Inj 5 mg cartridge – 1% DV Oct-18 to 2021	34.88	1	Omnitrope
	→ Inj 10 mg cartridge – 1% DV Oct-18 to 2021	69.75	1	Omnitrope
	→ Inj 15 mg cartridge – 1% DV Oct-18 to 2021	104.63	1	Omnitrope

INFECTIONS

71	MEROPENEM (brand change)			
	→ Inj 500 mg vial – 1% DV Oct-18 to 2020	4.00	1	Meropenem Ranzbaxy
	→ Inj 1 g vial – 1% DV Oct-18 to 2020	8.00	1	Meropenem Ranzbaxy

Note – DBL Meropenem inj 500 mg and 1 g vial to be delisted from 1 October 2018.



(Brand) indicates a brand example only. It is not a contracted product.

		Price (ex man. Excl. GST)		Brand or Generic Manufacturer
		\$	Per	
Changes to Section H Part II – effective 1 August 2018 (continued)				
71	CEFALEXIN (↑ price and addition of HSS) Grans for oral liq 25 mg per ml – 1% DV Oct-18 to 2021 8.75 Grans for oral liq 50 mg per ml – 1% DV Oct-18 to 2021 11.75	100 ml 100 ml		Cefalexin Sandoz Cefalexin Sandoz
74	FLUCLOXACILLIN (addition of HSS) Grans for oral liq 25 mg per ml – 1% DV Oct-18 to 2021 2.29 Grans for oral liq 50 mg per ml – 1% DV Oct-18 to 2021 (↑ price) 3.68	100 ml 100 ml		AFT AFT
75	CIPROFLOXACIN (↑ price and addition of HSS) → Inj 2 mg per ml, 100 ml bag – 1% DV Oct-18 to 2021 68.20	10		Cipflox
77	LINEZOLID (↓ price and addition of HSS) → Tab 600 mg – 1% DV Oct-18 to 2021 553.77	10		Zyvox
77	TRIMETHOPRIM (↑ price and addition of HSS) Tab 300 mg – 1% DV Oct-18 to 2021 16.50	50		TMP
80	ISONIAZID (↑ price and addition of HSS) → Tab 100 mg – 1% DV Oct-18 to 2021 22.00	100		PSM
86	ENTECAVIR (new listing) Tab 0.5 mg – 1% DV Nov-18 to 2021 52.00 Note – Baraclude tab 0.5 mg to be delisted from 1 November 2018.	30		Entecavir Sandoz

MUSCULOSKELETAL SYSTEM

94	ETIDRONATE DISODIUM (delisting) Tab 200 mg 13.50 Note – Arrow-Etidronate tab 200 mg to be delisted from 1 January 2019.	100		Arrow-Etidronate
100	BACLOFEN (↑ price and addition of HSS) Tab 10 mg – 1% DV Oct-18 to 2021 4.20	100		Pacifen
101	DICLOFENAC SODIUM (↑ price and addition of HSS) Tab EC 50 mg – 1% DV Oct-18 to 2021 1.23 Tab long-acting 75 mg – 1% DV Oct-18 to 2021 22.80	50 500		Diclofenac Sandoz Apo-Diclo SR
101	DICLOFENAC SODIUM (↓ price and addition of HSS) Tab EC 25 mg – 1% DV Oct-18 to 2021 1.23 Tab long-acting 100 mg – 1% DV Oct-18 to 2021 25.15	50 500		Diclofenac Sandoz Apo-Diclo SR
102	MELOXICAM (delisting) → Tab 7.5 mg Note – Meloxicam tab 7.5 mg to be delisted from 1 November 2018			
102	NAPROXEN (↑ price and addition of HSS) Tab long-acting 750 mg – 1% DV Oct-18 to 2021 6.16 Tab long-acting 1 g – 1% DV Oct-18 to 2021 8.21	28 28		Naprosyn SR 750 Naprosyn SR 1000

		Price (ex man. Excl. GST)		Brand or Generic Manufacturer
		\$	Per	

Changes to Section H Part II – effective 1 August 2018 (continued)

NERVOUS SYSTEM

108	FENTANYL (pack size change) Inj 20 mcg per ml, 50 ml syringe – 1% DV Oct-18 to 2021	18.74	1	Biomed
Note – Biomed inj 20 mcg per ml, 50 ml syringe, 10 pack to be delisted 1 October 2018.				
108	METHADONE HYDROCHLORIDE (↑ price and addition of HSS) Oral liq 2 mg per ml – 1% DV Oct-18 to 2021	5.79	200 ml	Biodone
	Oral liq 5 mg per ml – 1% DV Oct-18 to 2021	5.79	200 ml	Biodone Forte
	Oral liq 10 mg per ml – 1% DV Oct-18 to 2021	6.79	200 ml	Biodone Extra Forte
110	CLOMIPRAMINE HYDROCHLORIDE (↑ price and addition of HSS) Tab 10 mg – 1% DV Oct-18 to 2021	13.99	100	Apo-Cloimipramine
	Tab 25 mg – 1% DV Oct-18 to 2021	9.46	100	Apo-Cloimipramine
111	MIRTAZAPINE (↑ price and addition of HSS) Tab 30 mg – 1% DV Oct-18 to 2021	2.63	30	Apo-Mirtazapine
	Tab 45 mg – 1% DV Oct-18 to 2021	3.48	30	Apo-Mirtazapine
112	GABAPENTIN (restriction removed and brands delisted) Note: Gabapentin not to be given in combination with pregabalin			
	Capsule 100 mg	7.16	100	Arrow-Gabapentin Neurontin Nupentin
	Capsule 300 mg	11.00	100	Arrow-Gabapentin Neurontin Nupentin
	Capsule 400 mg	13.75	100	Arrow-Gabapentin Neurontin Nupentin

Restricted

Initiation – preoperative and/or postoperative use

Limited to 8 days treatment

Initiation – pain management of burns patients

Re-assessment required after 1 month

Continuation – pain management of burns patients

Re-assessment required after 1 month

The treatment remains appropriate and the patient is benefiting from treatment.

Initiation – epilepsy

Re-assessment required after 15 months

Either:

1 Seizures are not adequately controlled with optimal treatment with other antiepilepsy agents; or

2 Seizures are controlled adequately but the patient has experienced unacceptable side effects from optimal treatment with other antiepilepsy agents.

Note: "Optimal treatment with other antiepilepsy agents" is defined as treatment with other antiepilepsy agents which are indicated and clinically appropriate for the patient, given in adequate doses for the patient's age, weight, and other features affecting the pharmacokinetics of the drug with good evidence of compliance.

Continuation – epilepsy

Patient has demonstrated a significant and sustained improvement in seizure rate or severity and/or quality of life.

continued...



Restriction

(Brand) indicates a brand example only. It is not a contracted product.

	Price (ex man. Excl. GST) \$	Per	Brand or Generic Manufacturer
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Changes to Section H Part II – effective 1 August 2018 (continued)

continued...

Note: As a guideline, clinical trials have referred to a notional 50% reduction in seizure frequency as an indicator of success with anticonvulsant therapy and have assessed quality of life from the patient's perspective

Initiation – Neuropathic pain or Chronic Kidney Disease-associated pruritus

Re-assessment required after 3 months

Either:

1 The patient has been diagnosed with neuropathic pain; or

2 Both:

2.1 The patient has Chronic Kidney Disease Stage 5-associated pruritus* where no other cause for pruritus can be identified (e.g. scabies, allergy); and

2.2 The patient has persistent pruritus not relieved with a trial of emollient/moisturising creams alone.

Continuation – Neuropathic pain or Chronic Kidney Disease-associated pruritus

Either:

1 The patient has demonstrated a marked improvement in their control of pain or itch (prescriber determined); or

2 The patient has previously demonstrated clinical responsiveness to gabapentin and has now developed neuropathic pain in a new site.

Note: Indications marked with * are unapproved indications. Dosage adjustment of gabapentin is recommended for patients with renal impairment.

Note – Arrow-Gabapentin, Narontin and Nupentin brands of gabapentin cap 100 mg, 300 mg and 400 mg to be delisted 1 August 2018.

114	PHENOBARBITONE (↑ price and addition of HSS)				
	Tab 15 mg – 1% DV Oct-18 to 2021	40.00	500	PSM	
	Tab 30 mg – 1% DV Oct-18 to 2021	40.00	500	PSM	
120	ZIPRASIDONE (HSS delayed)				
	Cap 20 mg – 1% DV Sep-18 to 2021	14.50	60	Zusdone	
120	OLANZAPINE (↓ price and addition of HSS)				
	→ Inj 210 mg vial – 1% DV Oct-18 to 2021	252.00	1	Zyprexa Relprevv	
	→ Inj 300 mg vial – 1% DV Oct-18 to 2021	414.00	1	Zyprexa Relprevv	
	→ Inj 405 mg vial – 1% DV Oct-18 to 2021	504.00	1	Zyprexa Relprevv	
124	DEXAMFETAMINE SULFATE (↑ price and addition of HSS)				
	→ Tab 5 mg – 1% DV Oct-18 to 2021	20.00	100	PSM	

ONCOLOGY AGENTS AND IMMUNOSUPPRESSANTS

130	CYCLOPHOSPHAMIDE (↑ price and addition of HSS)				
	Inj 1 g vial – 1% DV Oct-18 to 2021	35.65	1	Endoxan	
	Inj 2 g vial – 1% DV Oct-18 to 2021	71.25	1	Endoxan	
131	FLUOROURACIL (addition of HSS)				
	Inj 50 mg per ml, 20 ml vial – 1% DV Oct-18 to 2021 (↑ price)	12.00	1	Fluorouracil Ebewe	
	Inj 50 mg per ml, 100 ml vial – 1% DV Oct-18 to 2021	30.00	1	Fluorouracil Ebewe	
143	MEGESTROL ACETATE (↑ price and addition of HSS)				
	Tab 160 mg – 1% DV Oct-18 to 2021	63.53	30	Apo-Megestrol	

	Price (ex man. Excl. GST)		Brand or Generic Manufacturer
	\$	Per	

Changes to Section H Part II – effective 1 August 2018 (continued)

RESPIRATORY SYSTEM AND ALLERGIES

- 186 BUDESONIDE (brand change)
 Nasal spray 50 mcg per dose – **1% DV Oct-18 to 2020** 2.59 200 dose **SteroClear**
 Nasal spray 100 mcg per dose – **1% DV Oct-18 to 2020** 2.87 200 dose **SteroClear**
 Note – Butacort Aqueous nasal spray 50 mcg and 100 mcg per dose to be delisted from 1 October 2018.
- 186 SALBUTAMOL WITH IPRATROPIUM BROMIDE (↑ price and addition of HSS)
 Nebuliser soln 2.5 mg with ipratropium bromide
 0.5 mg per 2.5 ml ampoule – **1% DV Oct-18 to 2021** 5.20 20 **Duolin**
- 188 SALBUTAMOL (↑ price and addition of HSS)
 Nebuliser soln 1 mg per ml, 2.5 ml ampoule
 – **1% DV Oct-18 to 2021** 3.93 20 **Asthalin**
 Nebuliser soln 2 mg per ml, 2.5 ml ampoule
 – **1% DV Oct-18 to 2021** 4.03 20 **Asthalin**
- 191 BERACTANT (delisting)
 Soln 200 mg per 8 ml vial 550.00 1 Survanta
 Note – Survanta soln 200 mg per 8 ml vial to be delisted from 1 January 2019.

SENSORY ORGANS

- 192 SODIUM FUSIDATE [FUSIDIC ACID] (↑ price)
 Eye drops 1% 5.29 5 g Fucithalmic



(Brand) indicates a brand example only. It is not a contracted product.

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