

Pharmaceutical Management Agency

Update New Zealand Pharmaceutical Schedule

Effective 1 June 2019

Cumulative for May and June 2019



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Summary of PHARMAC decisions

EFFECTIVE 1 JUNE 2019

New listings (page 27)

- Acarbose (Accarb) tab 100 mg
- Heparin sodium (Pfizer) inj 25,000 iu per ml, 0.2 ml – S29 and wastage claimable
- Labetalol (Presolol) tab 100 mg and 200 mg – S29 and wastage claimable
- Methyldopa (Methyldopa Mylan) tab 250 mg – S29 and wastage claimable
- Methadone hydrochloride (Methatabs) tab 5 mg – only on a controlled drug form, no patient no-payment payable and safety medicine; prescriber may determine dispensing frequency
- Metoclopramide hydrochloride (Link Healthcare) inj 5 mg per ml, 2 ml ampoule – up to 5 inj available on a PSO, S29 and wastage claimable
- Arsenic trioxide (Baxter) inj 10 mg for ECP, 10 mg OP – PCT only-Specialist

Changes to restrictions (pages 29-31)

- Acarbose (Accarb) tab 50 mg – S29 and wastage removed
- Insulin pen needles (Berpu) 31 g x 6 mm – amended brand name
- Taliglucerase alfa (Eleyo) inj 200 unit vial – Brand switch fee removed
- Para-amino salicylic acid (Paser) grans for oral liq 4 g sachet – amended endorsement criteria
- Prortionamide (Peteha) tab 250 mg – amended endorsement criteria
- Paracetamol (Priceline, Paracetamol Pharmacare, Pharmacare and Pharmacy Health) tab 500 mg - blister pack – restrictions removed and stat dispensing reinstated
- Methadone hydrochloride (Methatabs) tab 5 mg - bottle pack – amended presentation description
- Dosulepin [dothiepin] hydrochloride (Dopress) tab 75 mg and cap 25 mg – subsidy by endorsement added
- Dasatinib (Sprycel) tab 20 mg, 50 mg and 70 mg – amended Special Authority, removal of Xpharm and addition of wastage claimable
- Chloroform (PSM) chloroform BP – note added
- Collodion flexible (PSM) collodion flexible – note added

Increased subsidy (pages 34-35)

- Roxithromycin (Arrow-Roxithromycin) tab 150 mg and 300 mg
- Carboplatin (Baxter) inj 1 mg for ECP

Summary of PHARMAC decisions – effective 1 June 2019 (continued)

Decreased subsidy (pages 34-35)

- Insulin pen needles (Berpu) 31 g x 6 mm
- Factor eight inhibitor bypassing fraction (FEIBA NF) inj 500 U
- Emtricitabine with tenofovir disoproxil (Truvada) tab 200 mg with tenofovir disoproxil 245 mg (300 mg as a fumarate)
- Efavirenz with emtricitabine and tenofovir disoproxil (Atripla) tab 600 mg with emtricitabine 200 mg and tenofovir disoproxil 245 mg (300 mg as a fumarate)
- Atazanavir sulphate (Reyataz) cap 150 mg and 200 mg
- Lidocaine [lignocaine] (Cathejell) gel 2%, 10 ml urethral syringe
- Methadone hydrochloride (Methatabs) tab 5 mg-bottle pack
- Levomepromazine maleate (Nozinan) tab 25 mg and 100 mg

News Stories – June 2019 Update

New listings

Labetalol tablets, 100 mg and 200 mg

The Hybloc brand is being discontinued by the supplier, Mylan. We expect stock to be exhausted by September 2019. We are listing Mylan's unregistered Presolol brand of labetalol 100 mg and 200 mg tablets from 1 June 2019. Mylan will notify wholesalers when stock is available. This will be supplied under S29 of the Medicines Act.

A labetalol tab 50 mg presentation of Presolol is not available. Presolol tab 100 mg is not scored, so can't be halved. This means that patients taking labetalol 50 mg tablets will need to transfer to a different treatment.

Methadone hydrochloride 5 mg tablets

We are listing a new blister pack presentation of methadone 5 mg tablet, Methatabs brand from 1 June 2019.

Changed listings

Lamotrigine brand change

A brand change for people using lamotrigine commenced 1 May 2019. People who are not already using the Logem brand of lamotrigine have five months to change to it.

While pharmacists may be already changing their patients to Logem, the Brand Switch Fee doesn't apply until October, when the sole supply period starts. This works with the claiming system. Pharmacists can claim a BSF for each patient they dispense Logem to (once per patient) in the three months following 1 October, regardless of when (or where) the patient changed.

Patient info leaflets are available to order from pharmaconline.co.nz or can be downloaded from our website.

We value the work prescribers and pharmacists do to support their patients through brand changes. There are a range of resources available to support health professionals and patients on the brand change on the [My Medicine Has Changed webpage](#) for lamotrigine on the PHARMAC website.



Dasatinib – changes to access and distribution

From 1 June 2019, we are changing the access criteria and distribution for dasatinib (Sprycel) tablets used to treat chronic myeloid leukaemia (CML) and Philadelphia chromosome-positive acute lymphoid leukaemia (Ph+ ALL).

The changes will mean:

- Direct distribution to patients will cease. Dasatinib will now be obtained from community pharmacy, in the same way as other medicines.
- Dasatinib funding will be subject to a standard Special Authority mechanism, with existing patients automatically receiving new numbers.
- People with Ph+ ALL and some people with CML will be eligible for funded dasatinib as a first line treatment, others will need to use it as a second line treatment, after imatinib.

We expect full packs will be able to be used, although wastage is claimable if required.

We have contacted all people currently taking dasatinib and their prescribing haematologists informing them of the changes, including the need for patients to present prescriptions in sufficient time for community pharmacies to order stock. People will get eight weeks' supply delivered on 16 May 2019. They will need a prescription from their haematologist or GP for ongoing supplies. People will start paying the normal pharmacy co-payment.

More information about the changes, including the full access criteria, can be found in the dasatinib notification on our website: <https://www.pharmac.govt.nz/news/notification-2019-05-03-dasatinib/>

Stock issues

Paracetamol – removing restrictions

We are now confident that we have enough stock of paracetamol 500 mg tablets (blister packs) in New Zealand to remove the dispensing restrictions from 1 June 2019.

We have advised wholesalers that they can now remove restrictions on supply to pharmacists. However, we ask that pharmacists order only what is needed at this time to help with maintaining supply in the distribution chain.

We acknowledge the additional work this stock issue has caused for pharmacists and wholesalers.

Metoclopramide injection 5 mg per ml, 2 ml ampoule

We are listing an alternative brand of metoclopramide injection (Link Healthcare) from 1 June 2019 to prevent going out-of-stock. The Link brand is supplied via Section 29.

Levodopa with carbidopa (Sinemet)

Update on this stock issue:

- 100/25 mg immediate release: Stock of Mylan's Kinson brand is available.
- 250/25 mg immediate release: Stock of MSD's Sinemet brand is available.
- 200/50 mg long-acting: Supplies are now exhausted. The alternative is the 100/25 mg long-acting.
- 100/25 mg long-acting: Stock of Mylan's brand is available (listed 1 May 2019)

Thank you for your patience with this stock shortage.

Acarbose

We will list a new 100 mg acarbose tablet (Accarb) from 1 June 2019, due to an ongoing supply issue with the Glucobay brand. Mylan will notify wholesalers when Accarb stock is available. The Accarb 50 mg tablets are now registered, so s29 and wastage will be removed from the listing.

Heparin – listing a 50 injection pack

There is not enough of the 5 injection pack of heparin 5000 iu per ml, 0.2 ml injections. We are listing a 50 injection pack size to avoid an out-of-stock. It will be supplied via Section 29, so wastage will apply.

Methyldopa

We're listing an alternative brand of methyldopa tablets 250 mg due to a potential supply issue. The new brand, Methyldopa Mylan will be supplied via Section 29 in packs of 500 tablets.

Mid-cycle listing of celecoxib

We listed celecoxib (Celebrex) 200 mg capsules from 1 May 2019 due a supply issue with the current brand. This listing was too late to be included in the May Update.

Delistings

Dosulepin [dothiepin] hydrochloride

Mylan is discontinuing supply of dosulepin [dothiepin] hydrochloride (Dopress) 75 mg tablets and 25 mg capsules as these are no longer being made. There are no other registered brands.

We are adding an endorsement to the listings from 1 June 2019, limiting funding to existing patients, so that new patients don't start on this treatment.

Supplies of the 25 mg capsules are expected to be exhausted soon and will be delisted 1 January 2020. Supplies of the 75 mg tablet are expected to be exhausted early 2020.

We have received expert advice from the Mental Health Subcommittee (of PTAC) that amitriptyline or nortriptyline could be considered as an alternative. Prescribers could also consider imipramine or mirtazapine.

News in brief

- **Hydrogen peroxide** (Crystaderm) crm 1%, 10 g OP – delisting delayed until further notice.
- **Para-amino salicylic acid** and **prontonamide** – minor changes to wording of restriction to align with other antituberculotics



Tender News

Sole Subsidised Supply changes – effective 1 July 2019

| Chemical Name | Presentation; Pack size | Sole Subsidised Supply brand (and supplier) |
|--|---|---|
| Abacavir sulphate | Tab 300 mg; 60 tab | Ziagen (GlaxoSmithKline) |
| Abacavir sulphate with lamivudine | Tab 600 mg with lamivudine 300 mg; 60 tab | Kivexa (GlaxoSmithKline) |
| Baclofen | Inj 2 mg per ml, 5 ml ampoule; 5 inj | Medsurge (Medsurge) |
| Emtricitabine | Cap 200 mg; 30 cap | Emtriva (Gilead) |
| Epoetin alfa | Inj 1,000 iu in 0.5 ml, syringe; 6 inj | Binocrit (Novartis) |
| Epoetin alfa | inj 2,000 iu in 1 ml, syringe; 6 inj | Binocrit (Novartis) |
| Epoetin alfa | inj 3,000 iu in 0.3 ml, syringe; 6 inj | Binocrit (Novartis) |
| Epoetin alfa | inj 4,000 iu in 0.4 ml, syringe; 6 inj | Binocrit (Novartis) |
| Epoetin alfa | inj 5,000 iu in 0.5 ml, syringe; 6 inj | Binocrit (Novartis) |
| Epoetin alfa | inj 6,000 iu in 0.6 ml, syringe; 6 inj | Binocrit (Novartis) |
| Epoetin alfa | inj 8,000 iu in 0.8 ml, syringe; 6 inj | Binocrit (Novartis) |
| Epoetin alfa | inj 10,000 iu in 1 ml, syringe; 6 inj | Binocrit (Novartis) |
| Epoetin alfa | inj 40,000 iu in 1 ml, syringe; 1 inj | Binocrit (Novartis) |
| Etoposide | Cap 50 mg; 20 cap | Vepesid (Bristol-Myers Squibb) |
| Etoposide | Cap 100 mg; 10 cap | Vepesid (Bristol-Myers Squibb) |
| Glycerin with sodium saccharin | Suspension; 473 ml bottle | Ora-Sweet SF (Midwest) |
| Glycerin with sucrose | Suspension; 473 ml bottle | Ora-Sweet (Midwest) |
| Latanoprost | Eye drops 0.005%; 2.5 ml OP | Teva (Teva) |
| Lidocaine [lignocaine] hydrochloride | Inj 1%, 20 ml vial; 5 inj | Lidocaine-Claris (Baxter) |
| Lidocaine [lignocaine] hydrochloride | Inj 2%, 20 ml vial; 5 inj | Lidocaine-Claris (Baxter) |
| Mercaptopurine | Tab 50 mg; 25 tab | Puri-nethol (Aspen Pharma) |
| Methylcellulose | Powder; 100 g | Midwest (Midwest) |
| Methylcellulose | Suspension; 473 ml bottle | Ora Plus (Midwest) |
| Methylcellulose with glycerin and sodium saccharin | Suspension; 473 ml bottle | Ora Blend SF (Midwest) |
| Methylcellulose with glycerin and sucrose | Suspension; 473 ml bottle | Ora Blend (Midwest) |
| Methyl hydroxybenzoate | Powder; 25 g | Midwest (Midwest) |
| Moclobemide | Tab 150 mg; 60 tab | Aurorix (Mylan) |
| Moclobemide | Tab 300 mg; 60 tab | Aurorix (Mylan) |
| Ritonavir | Tab 100 mg; 30 tab | Norvir (Abbvie) |

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 July 2019

- Abacavir sulphate (Ziagen) tab 300 mg – price and subsidy decrease
- Abacavir sulphate with lamivudine (Kivexa) tab 600 mg with lamivudine 300 mg – price and subsidy decrease
- Atomoxetine (Generic Partners) cap 10 mg, 18 mg, 25 mg, 40 mg, 60 mg, 80 mg and 100 mg – new listing and Special Authority removed
- Flecainide acetate (Flecainide Controlled Release Teva) cap long-acting 100 mg and 200 mg – new listing
- Interferon beta-1-alpha inj 6 million iu prefilled syringe (Avonex) and injection 6 million iu per 0.5 ml pen injector (Avonex Pen) – addition of no patient co-payment payable and removal of Xpharm
- Interferon beta-1-beta (Betaferon) inj 8 million iu per 1 ml – addition of no patient no-payment payable and removal of Xpharm
- Zoledronic acid (Aclasta) inj 5 mg per ml, 100 ml vial – price and subsidy decrease

Possible decisions for future implementation 1 July 2019

- Etanercept (Enbrel) inj 25 mg, 50 mg autoinjector and 50 mg prefilled syringe – amended Special Authority criteria

Sole Subsidised Supply Products – cumulative to June 2019

| Generic Name | Presentation | Brand Name | Expiry Date* |
|--|---|--|--------------|
| Acarbose | Tab 50 mg & 100 mg | Glucobay | 2021 |
| Acetazolamide | Tab 250 mg | Diamox | 2020 |
| Acetylcysteine | Inj 200 mg per ml, 10 ml ampoule | DBL Acetylcysteine | 2021 |
| Aciclovir | Eye oint 3%, 4.5 g OP Tab dispersible 200 mg, 400 mg & 800 mg | ViruPOS Lovir | 2019 |
| Acitretin | Cap 10 mg & 25 mg | Novatretn | 2020 |
| Adult diphtheria and tetanus vaccine | Inj 2 IU diphtheria toxoid with 20 IU tetanus toxoid in 0.5 ml | ADT Booster | 2020 |
| Alendronate sodium | Tab 70 mg | Fosamax | 2022 |
| Alendronate sodium with colecalciferol | Tab 70 mg with colecalciferol 5,600 | Fosamax Plus | 2022 |
| Alfacalcidol | Cap 0.25 mcg & 1 mcg Oral drops 2 mcg per ml, 20 ml OP | One-Alpha | 2020 |
| Allopurinol | Tab 100 mg & 300 mg | DP-Allopurinol | 2020 |
| Aminophylline | Inj 25 mg per ml, 10 ml ampoule | DBL Aminophylline | 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 | Sulpirix Solian | 2019 |
| Amitriptyline | Tab 10 mg, 25 mg and 50 mg | Arrow-Amitriptyline | 2020 |
| Amlodipine | Tab 2.5 mg, 5 mg & 10 mg | Apo-Amlodipine | 2020 |
| Amorolfine | Nail soln 5%, 5 ml OP | MycoNail | 2020 |
| Amoxicillin | Grans for oral liq 125 mg per 5 ml, 100 ml OP Grans for oral liq 250 mg per 5 ml, 100 ml OP Inj 250 mg, 500 mg and 1 g vials Cap 250 mg & 500 mg | Alphamox 125 Alphamox 250 Ibiamox Apo-Amoxi | 2020 2019 |
| Amoxicillin with clavulanic acid | Tab 500 mg with clavulanic acid 125 mg Grans for oral liq amoxicillin 50 mg with clavulanic acid 12.5 mg per ml, 100 ml OP | Augmentin Curam | 2020 2019 |
| Anastrozole | Tab 1 mg | Rolin | 2020 |
| Aprepitant | Cap 2 x 80 mg and 1 x 125 mg, 3 OP | Emend Tri-Pack | 2021 |
| Aqueous cream | Crm | Boucher | 2021 |
| Aripiprazole | Tab 5 mg, 10 mg, 15 mg, 20 mg & 30 mg | Aripiprazole Sandoz | 2021 |
| Ascorbic acid | Tab 100 mg | Cvite | 2019 |
| Aspirin | Tab 100 mg Tab dispersible 300 mg | Ethics Aspirin EC Ethics Aspirin | 2019 |

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Sole Subsidised Supply Products – cumulative to June 2019

| Generic Name | Presentation | Brand Name | Expiry Date* |
|---|---|--|--------------|
| Atenolol | Tab 50 mg & 100 mg | Mylan Atenolol | 2021 |
| Atorvastatin | Tab 10 mg, 20 mg, 40 mg & 80 mg | Lorstat | 2021 |
| Atropine sulphate | Inj 600 mcg per ml, 1 ml ampoule Eye drops 1%, 15 ml OP | Martindale Atrop | 2021 2020 |
| Azathioprine | Tab 25 mg & 50 mg Inj 50 mg vial | Imuran | 2019 |
| Azithromycin | Grans for oral liq 200 mg per 5 ml (40 mg per ml) Tab 250 mg & 500 mg | Zithromax Apo-Azithromycin | 2021 |
| Baclofen | Tab 10 mg | Pacifen | 2021 |
| Bendroflumethiazide [bendrofluazide] | Tab 2.5 mg & 5 mg | Arrow-Bendrofluazide | 2020 |
| Benzathine benzylpenicillin | Inj 900 mg (1.2 million units) in 2.3 ml syringe | Bicillin LA | 2021 |
| Benzylpenicillin sodium [penicillin G] | Inj 600 mg (1 million units) vial | Sandoz | 2020 |
| Betahistine dihydrochloride | Tab 16 mg | Vergo 16 | 2020 |
| Betamethasone dipropionate with calcipotriol | Gel 500 mcg with calcipotriol 50 mcg per g, 60 g OP Oint 500 mcg with calcipotriol 50 mcg per g, 30 g OP | Daivobet | 2021 |
| Betamethasone valerate | Lotn 0.1%, 50 ml OP Crm 0.1%, 50 g OP Oint 0.1%, 50 g OP Scalp app 0.1%, 100 ml OP | Betnovate Beta Cream Beta Ointment Beta Scalp | 2021 |
| Bezafibrate | Tab 200 mg Tab long-acting 400 mg | Bezalip Bezalip Retard | 2021 |
| Bicalutamide | Tab 50 mg | Binarex | 2020 |
| Bisacodyl | Tab 5 mg Suppos 10 mg | Lax-Tab Lax-Suppositories | 2021 |
| Bisoprolol fumarate | Tab 2.5 mg, 5 mg & 10 mg | Bosvate | 2020 |
| Blood glucose diagnostic test meter | Meter with 50 lancets, a lancing device and 10 diagnostic test strips, 1 OP | CareSens N CareSens N POP CareSens N Premier | 2022 |
| Blood glucose diagnostic test strip | Test strips, 50 test OP | CareSens N CareSens PRO | 2022 |
| Blood ketone diagnostic test strip | Test strips, 10 strip OP | KetoSens | 2022 |
| Bosentan | Tab 62.5 mg & 125 mg | Bosentan Dr Reddy's | 2021 |
| Brimonidine tartrate | Eye drops 0.2%, 5 ml OP | Arrow-Brimonidine | 2020 |
| Budesonide | Metered aqueous nasal spray, 50 mcg per dose & 100 mcg per dose, 200 dose OP | Steroclear | 2020 |

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| Generic Name | Presentation | Brand Name | Expiry Date* |
|-------------------------------------|---|--|--------------|
| Bupropion hydrochloride | Tab modified-release 150 mg | Zyban | 2020 |
| Buspirone hydrochloride | Tab 5 mg & 10 mg | Orion | 2021 |
| Cabergoline | Tab 0.5 mg, 2 & 8 tab | Dostinex | 2021 |
| Calamine | Crm, aqueous, BP | healthE Calamine Aqueous Cream BP | 2021 |
| Calcipotriol | Oint 50 mcg per g, 100 g OP | Daivonex | 2020 |
| Calcitriol | Cap 0.25 mcg & 0.5 mcg | Calcitriol-AFT | 2019 |
| Calcium carbonate | Tab 1.25 g (500 mg elemental) | Arrow-Calcium | 2020 |
| Candesartan cilexetil | Tab 4 mg, 8 mg, 16 mg & 32 mg | Candestar | 2021 |
| Capecitabine | Tab 150 mg & 500 mg | Brinov | 2019 |
| Carvedilol | Tab 6.25 mg, 12.5 mg & 25 mg | Carvedilol Sandoz | 2020 |
| Cefaclor monohydrate | Grans for oral liq 125 mg per 5 ml Cap 250 mg | Ranbaxy-Cefaclor | 2019 |
| Cefalexin | Grans for oral liq 25 mg per ml Grans for oral liq 50 mg per ml Cap 250 mg & 500 mg | Cefalexin Sandoz Cephalexin ABM | 2021 2019 |
| Cefazolin | Inj 500 mg & 1 g vials | AFT | 2020 |
| 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 | Crm BP, 500 g | healthE | 2021 |
| Cetomacrogol with glycerol | Crm 90% with glycerol 10%, 500 ml OP & 1,000 ml OP | Pharmacy Health Sorbitol with Glycerin | 2019 |
| Chloramphenicol | Eye oint 1%, 4 g OP | Chlorsig | 2019 |
| Ciclopirox olamine | Nail-soln 8%, 7 ml OP | Apo-Ciclopirox | 2021 |
| 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 |
| Cinacalcet | Tab 30 mg | Sensipar | 2021 |
| Ciprofloxacin | Eye drops 0.3%, 5 ml OP Tab 250 mg, 500 mg & 750 mg | Ciprofloxacin Teva Cipro | 2020 |
| Citalopram hydrobromide | Tab 20 mg | PSM Citalopram | 2021 |
| Clarithromycin | Tab 250 mg & 500 mg | Apo-Clarithromycin | 2020 |
| 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 |

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Sole Subsidised Supply Products – cumulative to June 2019

| Generic Name | Presentation | Brand Name | Expiry Date* |
|---|---|--|--------------|
| Clomipramine hydrochloride | Tab 10 mg & 25 mg | Apo-Clomipramine | 2021 |
| Clonazepam | Tab 500 mcg & 2 mg | Paxam | 2021 |
| Clonidine | Patch 2.5 mg, 100 mcg per day Patch 5 mg, 200 mcg per day Patch 7.5 mg, 300 mcg per day | Mylan | 2020 |
| Clonidine hydrochloride | Inj 150 mcg per ml, 1 ml ampoule Tab 25 mcg | Medsurge Clonidine BMN | 2021 |
| Clopidogrel | Tab 75 mg | Arrow - Clopid | 2019 |
| Clotrimazole | Crm 1%; 20 g OP Vaginal crm 1% with applicators, 35 g OP Vaginal crm 2% with applicators, 20 g OP | Clomazol | 2020 2019 |
| Coal tar | Soln BP | Midwest | 2019 |
| Codeine phosphate | Tab 15 mg, 30 mg & 60 mg | PSM | 2019 |
| Colchicine | Tab 500 mcg | Colgout | 2021 |
| Colecalciferol | Cap 1.25 mg (50,000 iu) | Vit.D3 | 2020 |
| Compound electrolytes | Powder for oral soln | Enerlyte | 2019 |
| Compound electrolytes with glucose [dextrose] | Soln with electrolytes (2 x 500 ml), 1,000 ml OP | Pedialyte – bubblegum | 2021 |
| Crotamiton | Crm 10%, 20 g OP | Itch-soothe | 2021 |
| Cyclizine hydrochloride | Tab 50 mg | Nausicalm | 2021 |
| Cyproterone acetate | Tab 50 mg & 100 mg | Siterone | 2021 |
| Cyproterone acetate with ethynodiol dienoate | Tab 2 mg with ethynodiol dienoate 35 mcg and 7 inert tabs | Ginet | 2020 |
| Darunavir | Tab 400 mg & 600 mg | Prezista | 2020 |
| Desferrioxamine mesilate | Inj 500 mg vial | DBL Desferrioxamine Mesylate for Injection BP | 2021 |
| Desmopressin acetate | Nasal spray 10 mcg per dose, 6 ml OP Tab 100 mcg & 200 mcg | Desmopressin-Ph&T Minirin | 2020 2019 |
| Dexamethasone | Tab 0.5 mg & 4 mg | Dexamethsone | 2021 |
| Dexamfetamine sulfate | Tab 5 mg | PSM | 2021 |
| Diazepam | Tab 2 mg & 5 mg | Arrow-Diazepam | 2020 |
| Diclofenac sodium | Tab EC 25 mg & 50 mg Tab long-acting 75 mg & 100 mg | Diclofenac Sandoz Apo-Diclo SR | 2021 |
| Digoxin | Tab 62.5 mcg Tab 250 mcg | Lanoxin PG Lanoxin | 2019 |
| Dihydrocodeine tartrate | Tab long-acting 60 mg | DHC Continus | 2019 |

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Sole Subsidised Supply Products – cumulative to June 2019

| Generic Name | Presentation | Brand Name | Expiry Date* |
|--|--|-------------------------------|--------------|
| Diltiazem hydrochloride | Cap long-acting 120 mg, 180 mg & 240 mg | Apo-Diltiazem CD | 2021 |
| Dimethicone | Crm 10% pump bottle, 500 ml OP | healthE Dimethicone 10% | 2021 |
| | Lotn 4%, 200 ml OP | healthE Dimethicone 4% Lotion | 2019 |
| | Crm 5%, pump bottle, 500 ml OP | healthE Dimethicone 5% | |
| Diphtheria, tetanus and 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, pertussis and 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 0.5 ml syringe | Infanrix-hexa | 2020 |
| Dipyridamole | Tab long-acting 150 mg | Pytazen SR | 2019 |
| Docusate sodium | Tab 50 mg & 120 mg | Coloxyl | 2020 |
| Docusate sodium with sennosides | Tab 50 mg with sennosides 8 mg | Laxsol | 2021 |
| Domperidone | Tab 10 mg | Pharmacy Health | 2021 |
| Donepezil hydrochloride | Tab 5 mg & 10 mg | Donepezil-Rex | 2020 |
| Doxazosin | Tab 2 mg & 4 mg | Apo-Doxazosin | 2020 |
| Dual blood glucose and blood ketone diagnostic test meter | Meter with 50 lancets, a lancing device and 10 blood glucose diagnostic test strips, 1 OP | CareSens Dual | 2022 |
| Emulsifying ointment | Oint BP; 500 g | AFT | 2020 |
| Entacapone | Tab 200 mg | Entapone | 2021 |
| Eplerenone | Tab 50 mg Tab 25 mg | Inspra | 2021 |
| Ergometrine maleate | Inj 500 mcg per ml, 1 ml ampoule | DBL Ergometrine | 2020 |
| Escitalopram | Tab 10 mg & 20 mg | Escitalopram-Apotex | 2020 |
| Ethinylestradiol | Tab 10 mcg | NZ Medical & Scientific | 2021 |

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Sole Subsidised Supply Products – cumulative to June 2019

| Generic Name | Presentation | Brand Name | Expiry Date* |
|--------------------------------------|---|---------------------------------|--------------|
| Ethinylestradiol with levonorgestrel | Tab 20 mcg with levonorgestrel 100 mcg and 7 inert tablets | Microgynon 20 ED Levlen ED | 2020 |
| | Tab 30 mcg with levonorgestrel 150 mcg and 7 inert tablets | | |
| Exemestane | Tab 25 mg | Pfizer Exemestane | 2020 |
| Ezetimibe | Tab 10 mg | Ezetimibe Sandoz | 2020 |
| Felodipine | Tab long-acting 5 mg | Felo 5 ER | 2021 |
| | Tab long-acting 10 mg | Felo 10 ER | |
| | Tab long-acting 2.5 mg | Plendil ER | |
| Fentanyl | Inj 50 mcg per ml, 2 ml ampoule | Boucher and Muir | 2021 |
| | Inj 50 mcg per ml, 10 ml ampoule | Fentanyl Sandoz | 2020 |
| | Patch 12.5 mcg per hour | | |
| | Patch 25 mcg per hour | | |
| | Patch 50 mcg per hour | | |
| | Patch 75 mcg per hour | | |
| | Patch 100 mcg per hour | | |
| Ferrous fumarate | Tab 200 mg (65 mg elemental) | Ferro-tab | 2021 |
| Ferrous fumarate with folic acid | Tab 310 mg (100 mg elemental) with folic acid 350 mcg | Ferro-F-Tabs | 2021 |
| Ferrous sulphate | Tab long-acting 325 mg (105 mg elemental) | Ferrograd | 2021 |
| | Oral liq 30 mg (6 mg elemental) per ml | Ferodan | 2019 |
| Finasteride | Tab 5 mg | Ricit | 2020 |
| Flucloxacillin | Grans for oral liq 25 mg per ml | AFT | 2021 |
| | Grans for oral liq 50 mg per ml | Staphlex Flucil Flucloxin | 2020 |
| | Cap 250 mg & 500 mg | | |
| | Inj 1 g vial | | |
| | Inj 250 mg & 500 mg vials | | |
| Fluconazole | Cap 50 mg, 150 mg and 200 mg | Mylan | 2020 |
| Fludarabine phosphate | Tab 10 mg | Fludara Oral | 2021 |
| Fluorouracil sodium | Crm 5%, 20 g OP | Efudix | 2021 |
| Fluoxetine hydrochloride | Cap 20 mg | Arrow-Fluoxetine | 2019 |
| | Tab dispersible 20 mg, scored | | |
| Fluticasone propionate | Metered aqueous nasal spray, 50 mcg per dose, 120 dose OP | Flixonase Hayfever & Allergy | 2021 |
| Folic acid | Tab 0.8 mg & 5 mg | Apo-Folic Acid | 2021 |
| Furosemide [frusemide] | Tab 500 mg | Urex Forte | 2021 |
| | Inj 10 mg per ml, 2 ml ampoule | Frusemide-Claris | 2019 |
| Gabapentin | Cap 100 mg, 300 mg & 400 mg | Apo-Gabapentin | 2021 |
| Gemfibrozil | Tab 600 mg | Lipazil | 2019 |
| Glibenclamide | Tab 5 mg | Daonil | 2021 |
| Gliclazide | Tab 80 mg | Glizide | 2020 |
| Glipizide | Tab 5 mg | Minidiab | 2021 |

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Sole Subsidised Supply Products – cumulative to June 2019

| Generic Name | Presentation | Brand Name | Expiry Date* |
|---|---|--|----------------------|
| Glucose [dextrose] | Inj 50%, 10 ml ampoule Inj 50%, 90 ml bottle | Biomed | 2020 |
| Glycerol | Suppos 3.6 g Liquid | PSM healthE Glycerol BP | 2021 2020 |
| 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 |
| Heparin sodium | Inj 1,000 iu per ml, 5 ml ampoule Inj 5,000 iu per ml, 5 ml ampoule | Pfizer | 2021 |
| 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 40 mcg per 1 ml vial | HBvaxPRO | 2020 |
| 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 |
| Hydrocortisone | Tab 5 mg & 20 mg Powder Crm 1%, 30 g OP Crm 1%, 500 g Inj 100 mg vial | Douglas ABM DermAssist Pharmacy Health Solu-Cortef | 2021 2020 2019 |
| Hydrocortisone and paraffin liquid and lanolin | Lotn 1% with paraffin liquid 15.9% and lanolin 0.6%, 250 ml | DP Lotn HC | 2020 |
| Hydrocortisone butyrate | Milky emul 0.1%, 100 g OP Oint 0.1%, 100 g OP Scalp lotn 0.1%, 100 ml OP | Locoid Crelo Locoid | 2021 |
| Hydrocortisone with miconazole | Crm 1% with miconazole nitrate 2%, 15 g OP | Micreme H | 2021 |
| Hydroxocobalamin | Inj 1 mg per ml, 1 ml ampoule | Neo-B12 | 2021 |
| Hydroxychloroquine | Tab 200 mg | Plaquenil | 2021 |
| Hyoscine butylbromide | Tab 10 mg | Buscopan | 2020 |
| Ibuprofen | Tab 200 mg | Relieve | 2020 |
| Imatinib mesilate | Cap 100 mg & 400 mg | Imatinib-AFT | 2020 |
| Imiquimod | Crm 5%, 250 mg sachet | Perrigo | 2020 |
| Indapamide | Tab 2.5 mg | Dapa-Tabs | 2019 |

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Sole Subsidised Supply Products – cumulative to June 2019

| Generic Name | Presentation | Brand Name | Expiry Date* |
|--------------------------------------|--|-------------------------------------|--------------|
| Ipratropium bromide | Aqueous nasal spray 0.03%, 15 ml OP Nebuliser soln, 250 mcg per ml, 1 ml ampoule Nebuliser soln, 250 mcg per ml, 2 ml ampoule | Univent | 2020 |
| | | | 2019 |
| Isoniazid | Tab 100 mg | PSM | 2021 |
| Isoniazid with rifampicin | Tab 100 mg with rifampicin 150 mg & 150 mg with rifampicin 300 mg | Rifinah | 2021 |
| Isosorbide mononitrate | Tab 20 mg Tab long-acting 60 mg Tab long-acting 40 mg | Ismo 20 Duride Ismo 40 Retard | 2020 2019 |
| Isotretinoin | Cap 10 mg & 20 mg Cap 5 mg | Oratane | 2021 |
| Ispaghula (psyllium) husk | Powder for oral soln, 500 g OP | Konsyl-D | 2020 |
| Itraconazole | Cap 100 mg | Itrazole | 2019 |
| Ketoconazole | Shampoo 2%, 100 ml OP | Sebizole | 2020 |
| Lactulose | Oral liq 10 g per 15 ml | Laevolac | 2019 |
| Lamivudine | Tab 100 mg | Zetlam | 2020 |
| Lansoprazole | Cap 15 mg & 30 mg | Lanzol Relief | 2021 |
| Leflunomide | Tab 10 mg & 20 mg | Apo-Leflunomide | 2020 |
| Letrozole | Tab 2.5 mg | Letrole | 2021 |
| Levetiracetam | Oral liq 100 mg per ml, 300 ml OP | Levetiracetam-AFT | 2020 |
| Levodopa with carbidopa | Tab 250 mg with carbidopa 25 mg Tab long-acting 200 mg with carbidopa 50 mg | Sinemet Sinemet CR | 2020 |
| Levomepromazine hydrochloride | Inj 25 mg per ml, 1 ml ampoule | Wockhardt | 2019 |
| Levonorgestrel | Subdermal implant (2 x 75 mg rods) Tab 1.5 mg Intra-uterine system 20 mcg per day | Jadelle Postinor-1 Mirena | 2020 2019 |
| Lidocaine [lignocaine] hydrochloride | Oral (gel) soln 2% | Mucosothe | 2020 |
| Lisinopril | Tab 5 mg, 10 mg & 20 mg | Ethics Lisinopril | 2021 |
| Loperamide hydrochloride | Tab 2 mg Cap 2 mg | Nodia Diamide Relief | 2019 |
| Lopinavir with ritonavir | Tab 200 mg with ritonavir 50 mg | Kaletra | 2020 |
| Oral antihistamine | Oral liq 1 mg per ml, 120 ml Tab 10 mg | Lorfast Lorafax | 2019 |
| Lorazepam | Tab 1 mg & 2.5 mg | Ativan | 2021 |
| Losartan potassium | Tab 12.5 mg, 25 mg, 50 mg and 100 mg | Losartan Actavis | 2020 |

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Sole Subsidised Supply Products – cumulative to June 2019

| Generic Name | Presentation | Brand Name | Expiry Date* |
|---|---|---|----------------------|
| Losartan potassium with hydrochlorothiazide | Tab 50 mg with hydrochlorothiazide 12.5 mg | Arrow-Losartan & Hydrochlorothiazide | 2021 |
| Macrogol 3350 with potassium chloride, sodium bicarbonate and sodium chloride | Powder for oral soln 13.125 g with potassium chloride 46.6 mg, sodium bicarbonate 178.5 mg and sodium chloride 350.7 mg | Molaxole | 2020 |
| Magnesium sulphate | Inj 2 mmol per ml, 5 ml ampoule | DBL | 2020 |
| 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 ml | 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 | 2021 |
| 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 0.5 ml vial | Menactra | 2020 |
| Metformin hydrochloride | Tab immediate-release 500 mg & 850 mg | Apotex | 2021 |
| Methadone hydrochloride | Oral liq 2 mg per ml Oral liq 5 mg per ml Oral liq 10 mg per ml | Biodone Biodone Forte Biodone Extra Forte | 2021 |
| Methotrexate | Tab 2.5 mg & 10 mg Inj 100 mg per ml, 50 ml vial Inj 25 mg per ml, 2 ml & 20 ml vials | Trexate Methotrexate Ebewe DBL Methotrexate Onco-Vial | 2021 2020 2019 |
| Methylprednisolone | Tab 4 mg & 100 mg | Medrol | 2021 |
| Methylprednisolone acetate | Inj 40 mg per ml, 1 ml vial | Depo-Medrol | 2021 |
| Methylprednisolone (as sodium succinate) | Inj 1 g vial Inj 40 mg, 125 mg & 500 mg vial | Solu-Medrol Solu-Medrol-Act-O-Vial | 2021 |
| Metoclopramide hydrochloride | Tab 10 mg | Metoclopramide Actavis 10 | 2020 |
| Metoprolol succinate | Tab long-acting 23.75 mg, 47.5 mg, 95 mg & 190 mg | Betaloc CR | 2020 |
| Metoprolol tartrate | Inj 1 mg per ml, 5 ml vial Tab 50 mg & 100 mg | Metoprolol IV Mylan Apo-Metoprolol | 01/02/2022 2021 |
| Miconazole | Oral gel 20 mg per g, 40 g OP | Decozol | 2021 |

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Sole Subsidised Supply Products – cumulative to June 2019

| Generic Name | Presentation | Brand Name | Expiry Date* |
|--------------------------|--|---|--------------|
| Miconazole nitrate | Crm 2%; 15 g OP Vaginal crm 2% with applicator, 40 g OP | Multichem Micreme | 2020 |
| Mirtazapine | Tab 30 mg & 45 mg | Apo-Mirtazapine | 2021 |
| Misoprostol | Tab 200 mcg | Cytotec | 2019 |
| Mitomycin C | Inj 5 mg vial | Arrow | 2019 |
| Mometasone furoate | Crm 0.1%, 15 g OP & 50 g OP Lotn 0.1%, 30 ml OP Oint 0.1%, 15 g OP & 50 g OP | Elocon Alcohol Free Elocon | 2021 |
| Montelukast | Tab 4 mg, 5 mg & 10 mg | Apo-Montelukast | 2019 |
| Morphine hydrochloride | Oral liq 1 mg per ml, 2 mg per ml, 5 mg per ml & 10 mg per ml | RA-Morph | 2021 |
| Morphine sulphate | Tab immediate-release 10 mg & 20 mg Inj 5 mg per ml, 1 ml ampoule Inj 10 mg per ml, 1 ml ampoule Inj 15 mg per ml, 1 ml ampoule Inj 30 mg per ml, 1 ml ampoule Tab long-acting 10 mg, 30 mg, 60 mg & 100 mg | Sevredol DBL Morphine Sulphate Arrow-Morphine LA | 2020 2019 |
| Morphine tartrate | Inj 80 mg per ml, 1.5 ml ampoule | DBL Morphine Tartrate | 2019 |
| Nadolol | Tab 40 mg & 80 mg | Apo-Nadolol | 2021 |
| Naloxone hydrochloride | Inj 400 mcg per ml, 1 ml ampoule | DBL Naloxone Hydrochloride | 2021 |
| Naltrexone hydrochloride | Tab 50 mg | Naltraccord | 2020 |
| 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 | 2021 |
| Neostigmine metisulfate | Inj 2.5 mg per ml, 1 ml ampoule | AstraZeneca | 2020 |
| Nevirapine | Tab 200 mg | Nevirapine Alphapharm | 2021 |
| Nicotine | Gum 2 mg & 4 mg (Fruit & Mint) Lozenge 1 mg & 2 mg Patch 7 mg, 14 mg & 21 mg Gum 2 mg & 4 mg (Fruit & Mint) for direct distribution only Lozenge 1 mg & 2 mg for direct distribution only Patch 7 mg, 14 mg & 21 mg for direct distribution only | Habitrol | 2020 |
| Nicotinic acid | Tab 50 mg & 500 mg | Apo-Nicotinic Acid | 2020 |
| Nifedipine | Tab long-acting 60 mg | Adalat Oros | 2020 |
| Norethisterone | Tab 350 mcg | Noriday 28 | 2021 |

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Sole Subsidised Supply Products – cumulative to June 2019

| Generic Name | Presentation | Brand Name | Expiry Date* |
|-----------------------------------|--|---|--------------------------|
| Nortriptyline hydrochloride | Tab 10 mg & 25 mg | Norpresa | 2019 |
| Nystatin | Oral liq 100,000 u per ml, 24 ml OP Vaginal crm 100,000 u per 5 g with applicator(s), 75 g OP | Nilstat | 2020 |
| Octreotide | Inj 50 mcg per ml, 1 ml vial Inj 100 mcg per ml, 1 ml vial Inj 500 mcg per ml, 1 ml vial | DBL Octreotide | 2020 |
| 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 | 2021 |
| Oestriol | Crm 1 mg per g with applicator, 15 g OP Pessaries 500 mcg | Ovestin | 2020 |
| Oil in water emulsion | Crm | O/W Fatty Emulsion Cream | 2021 |
| Olanzapine | Inj 210 mg, 300 mg & 405 mg vial Tab 2.5 mg, 5 mg & 10 mg Tab orodispersible 5 mg & 10 mg | Zyprexa Relprevv Zypine Zypine ODT | 2021 2020 |
| Omeprazole | Cap 10 mg Cap 20 mg Cap 40 mg Inj 40 mg ampoule with diluent | Omeprazole actavis 10 Omeprazole actavis 20 Omeprazole actavis 40 Dr Reddy's Omeprazole | 2020 2019 |
| Ondansetron | Tab disp 4 mg & 8 mg Tab 4 mg & 8 mg | Ondansetron ODT-DRLA Apo-Ondansetron | 2020 2019 |
| Ornidazole | Tab 500 mg | Arrow-Ornidazole | 2019 |
| Orphenadrine citrate | Tab 100 mg | Norflex | 2021 |
| Oxazepam | Tab 10 mg & 15 mg | Ox-Pam | 2020 |
| Oxybutynin | Oral liq 5 mg per 5 ml Tab 5 mg | Apo-Oxybutynin | 2019 |
| Oxycodone hydrochloride | Cap immediate-release 5 mg, 10 mg & 20 mg Inj 10 mg per ml, 1 ml & 2 ml ampoule Inj 50 mg per ml, 1 ml ampoule | OxyNorm | 2021 |
| Oxytocin | Inj 5 iu per ml, 1 ml ampoule Inj 10 iu per ml, 1 ml ampoule | Oxytocin BNM | 2021 |
| Oxytocin with ergometrine maleate | Inj 5 iu with ergometrine maleate 500 mcg per ml, 1 ml | Syntometrine | 2021 |

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Sole Subsidised Supply Products – cumulative to June 2019

| Generic Name | Presentation | Brand Name | Expiry Date* |
|---|--|------------------------------------|--------------|
| Pancreatic enzyme | Cap pancreatin 150 mg (amylase 8,000 PH Eur U, lipase 10,000 Ph Eur U, total protease 600 Ph Eur U) | Creon 10000 | 2021 |
| | Cap pancreatin 300 mg (amylase 18,000 PH Eur U, lipase 25,000 PH Eur U, total protease 1,000 Ph Eur U) | Creon 25000 | |
| Pamidronate disodium | Inj 3 mg per ml, 10 ml vial Inj 6 mg per ml, 10 ml vial Inj 9 mg per ml, 10 ml vial | Pamisol | 2020 |
| Pantoprazole | Tab EC 20 mg & 40 mg | Panzop Relief | 2019 |
| Paracetamol | Suppos 500 mg | Gacet | 2021 |
| | Suppos 125 mg & 250 mg | Gacet | 2021 |
| | Oral liq 250 mg per 5 ml | Paracare Double Strength | 2020 |
| | Oral liq 120 mg per 5 ml Tab 500 mg – bottle pack Tab 500 mg – blister pack | Paracare Pharmacare | |
| Paracetamol with codeine | Tab paracetamol 500 mg with codeine phosphate 8 mg | Paracetamol + Codeine (Relieve) | 2020 |
| Paraffin | Oint liquid paraffin 50% with white soft paraffin 50%, 500 ml OP | healthE | 2021 |
| Paroxetine | Tab 20 mg | Apo-Paroxetine | 2019 |
| Pegylated interferon alpha-2a | Inj 180 mcg prefilled syringe | Pegasys | 2020 |
| Perhexiline maleate | Tab 100 mg | Pexsig | 2019 |
| Perindopril | Tab 2 mg & 4 mg | Apo-Perindopril | 2020 |
| Permethrin | Crm 5%, 30 g OP Lotn 5%, 30 ml OP | Lyderm A-Scabies | 2020 |
| Pethidine hydrochloride | Tab 50 mg Inj 50 mg per ml, 1 ml & 2 ml ampoules | PSM DBL Pethidine Hydrochloride | 2021 2020 |
| Phenobarbitone | Tab 15 mg & 30 mg | PSM | 2021 |
| Phenoxymethylpenicillin (penicillin V) | Cap 250 mg & 500 mg Grans for oral liq 125 mg per 5 ml Grans for oral liq 250 mg per 5 ml | Cilicaine VK AFT | 2021 2019 |
| Pindolol | Tab 5 mg, 10 mg & 15 mg | Apo-Pindolol | 2021 |
| Pine tar with trolamine laurilsulfate and fluorescein | Soln 2.3% with trolamine laurilsulfate and fluorescein sodium, 500 ml | Pinetarsol | 2020 |
| Pioglitazone | Tab 15 mg, 30 mg & 45 mg | Vexazone | 2021 |

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Sole Subsidised Supply Products – cumulative to June 2019

| Generic Name | Presentation | Brand Name | Expiry Date* |
|---|--|---|--------------|
| 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 |
| Poloxamer | Oral drops 10%, 30 ml OP | Coloxyl | 2020 |
| Polyvinyl alcohol | Eye drops 1.4%, 15 ml OP Eye drops 3%, 15 ml OP | Vistil Vistil Forte | 2019 |
| Potassium chloride | Tab long-acting 600 mg (8 mmol) | Span-K | 2021 |
| Potassium citrate | Oral liq 3 mmol per ml, 200 ml OP | Biomed | 2021 |
| Potassium iodate | Tab 253 mcg (150 mcg elemental iodine) | NeuroTabs | 2020 |
| Pramipexole hydrochloride | Tab 0.25 mg & 1 mg | Ramipex | 2019 |
| Pravastatin | Tab 20 mg and 40 mg | Apo-Pravastatin | 2020 |
| Prednisolone | Oral liq 5 mg per ml, 30 ml OP | Redipred | 2021 |
| Prednisone | Tab 1 mg, 2.5 mg, 5 mg & 20 mg | Apo-Prednisone | 2020 |
| Pregabalin | Cap 25 mg, 75 mg, 150 mg & 300 mg | Pregabalin Pfizer | 2021 |
| Pregnancy tests - HCG urine | Cassette, 40 test OP | Smith BioMed Rapid Pregnancy Test | 2020 |
| Procaine penicillin | Inj 1.5 g in 3.4 ml syringe | Cilicaine | 2020 |
| Prochlorperazine | Tab 5 mg | Nausafix | 2020 |
| Progesterone | Cap 100 mg | Ultragestan | 2019 |
| Promethazine hydrochloride | Tab 10 mg & 25 mg Oral liq 1 mg per 1 ml Inj 25 mg per ml, 2 ml ampoule | Allersoothe Hospira | 2021 2019 |
| Propranolol | Tab 10 mg & 40 mg | Apo-Propranolol | 2021 |
| Pyridostigmine bromide | Tab 60 mg | Mestinon | 2019 |
| Pyridoxine hydrochloride | Tab 25 mg Tab 50 mg | Vitamin B6 25 Apo-Pyridoxine | 2020 |
| Quetiapine | Tab 25 mg, 100 mg, 200 mg & 300 mg | Quetapel | 2020 |
| Quinapril | Tab 5 mg Tab 10 mg Tab 20 mg | Arrow-Quinapril 5 Arrow-Quinapril 10 Arrow-Quinapril 20 | 2021 |

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Sole Subsidised Supply Products – cumulative to June 2019

| Generic Name | Presentation | Brand Name | Expiry Date* |
|-------------------------------------|--|------------------------------|--------------|
| Quinapril with hydrochlorothiazide | Tab 10 mg with hydrochlorothiazide 12.5 mg | Accuretic 10 | 2021 |
| | Tab 20 mg with hydrochlorothiazide 12.5 mg | Accuretic 20 | |
| Ranitidine | Tab 150 mg & 300 mg Oral liq 150 mg per 10 ml | Ranitidine Relief Peptisothe | 2020 |
| Rifabutin | Cap 150 mg | Mycobutin | 2019 |
| Rifampicin | Cap 150 mg & 300 mg Oral liq 100 mg per 5 ml | Rifadin | 2020 |
| Rifaximin | Tab 550 mg | Xifaxan | 2020 |
| Riluzole | Tab 50 mg | Rilutek | 2021 |
| Risedronate sodium | Tab 35 mg | Risedronate Sandoz | 2019 |
| Risperidone | Tab 0.5 mg, 1 mg, 2 mg, 3 mg and 4 mg | Actavis | 2020 |
| | Oral liq 1 mg per ml | Risperon | |
| Rizatriptan | Tab orodispersible 10 mg | Rizamelt | 2020 |
| 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 | Oral liq 400 mcg per ml Nebuliser soln, 1 mg per ml, 2.5 ml ampoule | Ventolin Asthalin | 2021 |
| | 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 | 2021 |
| Sertraline | Tab 50 mg & 100 mg | Arrow-Sertraline | 2019 |
| Sildenafil | Tab 100 mg | Vedafil | 2021 |
| | Tab 25 mg & 50 mg | | |
| Simvastatin | Tab 10 mg, 20 mg, 40 mg and 80 mg | Simvastatin Mylan | 2020 |
| 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 | |
| Sodium citro-tartrate | Grans eff 4 g sachets | Ural | 2020 |
| Sodium fusidate [fusidic acid] | Tab 250 mg | Fucidin | 2020 |
| Sodium polystyrene sulphonate | Powder, 454 g OP | Resonium-A | 2021 |
| Solifenacin succinate | Tab 5 mg & 10 mg | Solifenacin Mylan | 2021 |

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| Generic Name | Presentation | Brand Name | Expiry Date* |
|--------------------------|--|---|--------------|
| Somatropin | Inj 5 mg, 10 mg & 15 mg | Omnitrope | 2021 |
| Sotalol | Tab 80 mg & 160 mg | Mylan | 2019 |
| Spironolactone | Tab 25 mg & 100 mg | Spiractin | 2019 |
| Sulfadiazine silver | Crm 1%, 50 g OP | Flamazine | 2020 |
| Sulfasalazine | Tab 500 mg Tab EC 500 mg | Salazopyrin Salazopyrin EN | 2019 |
| Sumatriptan | Tab 50 mg & 100 mg | Apo-Sumatriptan | 2019 |
| Taliglucerase alfa | Inj 200 unit vial | Eleyso | 2023 |
| Tamoxifen citrate | Tab 10 mg & 20 mg | Tamoxifen Sandoz | 2020 |
| Tamsulosin hydrochloride | Cap 400 mcg | Tamsulosin-Rex | 2019 |
| Temazepam | Tab 10 mg | Normison | 2020 |
| Temozolomide | Cap 5 mg, 20 mg, 100 mg & 250 mg | Orion Temozolomide | 2019 |
| Tenofovir disoproxil | Tab 245 mg (300.6 mg as a succinate) | Tenofovir Disoproxil Teva | 2021 |
| Tenoxicam | Tab 20 mg | Tilcotil | 2019 |
| Terazosin | Tab 1 mg Tab 2 mg & 5 mg | Actavis Apo-Terazosin | 2019 |
| Terbinafine | Tab 250 mg | Deolate | 2020 |
| Testosterone cipionate | Inj 100 mg per ml, 10 ml vial | Depo-Testosterone | 2020 |
| Testosterone undecanoate | Cap 40 mg | Andriol Testocaps | 2021 |
| Tetrabenazine | Tab 25 mg | Motelis | 2019 |
| Thiamine hydrochloride | Tab 50 mg | Max Health | 2020 |
| Thymol glycerin | Compound, BPC | PSM | 2019 |
| Timolol | Eye drops 0.25% & 0.5%, 5 ml OP Eye drops 0.25%, gel forming, 2.5 ml OP Eye drops 0.5%, gel forming, 2.5 ml OP | Arrow-Timolol Timoptol XE | 2020 2019 |
| Tobramycin | Inj 40 mg per ml, 2 ml vial | Tobramycin Mylan | 2021 |
| Tolcapone | Tab 100 mg | Tasmar | 2019 |
| Tramadol hydrochloride | Cap 50 mg Tab sustained-release 100 mg Tab sustained-release 150 mg Tab sustained-release 200 mg | Arrow-Tramadol Tramal SR 100 Tramal SR 150 Tramal SR 200 | 2020 |
| Tranexamic acid | Tab 500 mg | Cyklolapron | 2019 |
| Tretinoin | Crm 0.5 mg per g, 50 g OP | ReTrieve | 2021 |

*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 June 2019

| Generic Name | Presentation | Brand Name | Expiry Date* |
|--|---|--|--------------|
| Triamcinolone acetonide | Inj 10 mg per ml, 1 ml ampoule Inj 40 mg per ml, 1 ml ampoule Crm 0.02%, 100 g OP Oint 0.02%, 100 g OP Paste 0.1%, 5 g OP | Kenacort-A 10 Kenacort-A 40 Aristocort Kenalog in Orabase | 2020 |
| Trimethoprim | Tab 300 mg | TMP | 2021 |
| Trimethoprim with sulphamethoxazole [Co-trimoxazole] | Oral liq 8 mg with sulphamethoxazole 40 mg per ml, 100 ml | Deprim | 2020 |
| Tuberculin PPD [Mantoux] test | Inj 5 TU per 0.1 ml, 1 ml vial | Tubersol | 2020 |
| Urea | Crm 10%, 100 g OP | healthE Urea Cream | 2019 |
| Ursodeoxycholic acid | Cap 250 mg | Ursosan | 2020 |
| Valaciclovir | Tab 500 mg & 1,000 mg | Vaclovir | 2021 |
| Vancomycin | Inj 500 mg vial | Mylan | 2020 |
| Varenicline tartrate | Tab 0.5 mg x 11 and 1 mg x 42, 53 OP Tab 1 mg | Varenicline Pfizer | 2021 |
| 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 |
| Vitamins | Tab (BPC cap strength) | Mvite | 2019 |
| Voriconazole | Powder for oral suspension 40 mg per ml Tab 50 mg & 200 mg | Vfend Vtack | 2021 |
| 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 |
| Zidovudine [AZT] with lamivudine | Tab 300 mg with lamivudine 150 mg | Alphapharm | 2020 |
| Zinc and castor oil | Oint, 500 g | Boucher | 2020 |
| Ziprasidone | Cap 20 mg Cap 40 mg, 60 mg & 80 mg | Zusdone | 2021 |
| Zopiclone | Tab 7.5 mg | Zopiclone Actavis | 2021 |

June 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 June 2019

| | | | | |
|-----|---|--------|----------|---|
| 11 | ACARBOSE * Tab 100 mg | 20.23 | 90 | ✓ Accarb |
| 43 | HEPARIN SODIUM Inj 25,000 iu per ml, 0.2 ml | 190.00 | 50 | ✓ Pfizer S29 |
| | Wastage claimable | | | |
| 49 | LABETALOL Tab 100 mg | 11.36 | 100 | ✓ Presolol S29 |
| | Tab 200 mg | 29.74 | 100 | ✓ Presolol S29 |
| | Wastage claimable | | | |
| 51 | METHYLDOPA * Tab 250 mg | 52.85 | 500 | ✓ Methyldopa Mylan S29 |
| | Wastage claimable | | | |
| 122 | METHADONE HYDROCHLORIDE a) Only on a controlled drug form b) No patient co-payment payable c) Safety medicine; prescriber may determine dispensing frequency d) Extemporaneously compounded methadone will only be reimbursed at the rate of the cheapest form available (methadone powder, not methadone tablets). e) For methadone hydrochloride oral liquid refer Standard Formulae Tab 5 mg | 1.40 | 10 | ✓ Methatabs |
| | Note – this is a new blister pack presentation | | | |
| 130 | METOCLOPRAMIDE HYDROCHLORIDE * Inj 5 mg per ml, 2 ml ampoule – Up to 5 inj available on a PSO | 13.56 | 10 | ✓ Link Healthcare S29 |
| | Wastage claimable | | | |
| 156 | ARSENIC TRIOXIDE – PCT only – Specialist Inj 10 mg for ECP | 481.70 | 10 mg OP | ✓ Baxter |

Effective 1 May 2019

| | | | | |
|----|---|----------|----|---|
| 11 | ACARBOSE * Tab 50 mg | 10.47 | 90 | ✓ Accarb S29 |
| | Wastage claimable | | | |
| 39 | EFTRONACOG ALFA [RECOMBINANT FACTOR IX] – [Xpharm] For patients with haemophilia B receiving prophylaxis treatment. Access to funded treatment is managed by the Haemophilia Treaters Group in conjunction with the National Haemophilia Management Group. | | | |
| | Inj 250 iu vial..... | 612.50 | 1 | ✓ Alprolix |
| | Inj 500 iu vial..... | 1,225.00 | 1 | ✓ Alprolix |
| | Inj 1,000 iu vial..... | 2,450.00 | 1 | ✓ Alprolix |
| | Inj 2,000 iu vial..... | 4,900.00 | 1 | ✓ Alprolix |
| | Inj 3,000 iu vial..... | 7,350.00 | 1 | ✓ Alprolix |

▲ 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 May 2019 (continued)

| | | | | | | |
|-----|---|---|--|----------|-----|-----------------------------------|
| 40 | RURIOCTOCOG ALFA PEGOL [RECOMBINANT FACTOR VIII] – [Xpharm] | For patients with haemophilia A receiving prophylaxis treatment. Access to funded treatment is managed by the Haemophilia Treaters Group in conjunction with the National Haemophilia Management Group. | Inj 250 iu vial..... | 300.00 | 1 | ✓ Adynovate |
| | | | Inj 500 iu vial..... | 600.00 | 1 | ✓ Adynovate |
| | | | Inj 1,000 iu vial..... | 1,200.00 | 1 | ✓ Adynovate |
| | | | Inj 2,000 iu vial..... | 2,400.00 | 1 | ✓ Adynovate |
| 43 | HEPARIN SODIUM | | Inj 5,000 iu per ml, 1 ml | 28.40 | 5 | ✓ Pfizer |
| 78 | TETRACOSACTRIN | | * Inj 250 mcg per ml, 1 ml ampoule | 75.00 | 1 | ✓ AU Synacthen S29 S29 |
| | | | Wastage claimable | | | |
| | | Note – this is a new Pharmacode listing, 2566494. | | | | |
| 94 | DOXYCYCLINE | | * Tab 100 mg – Up to 30 tab available on a PSO | 64.43 | 500 | ✓ Doxine |
| 97 | CYCLOSERINE – Retail pharmacy-Specialist | a) No patient co-payment payable b) Prescriptions must be written by, or on the recommendation of, an infectious disease physician, clinical microbiologist or respiratory physician. | Cap 250 mg | 344.00 | 60 | ✓ Cyclorin S29 S29 |
| | | Wastage claimable | | | | |
| 109 | CELECOXIB | | Cap 200 mg | 2.30 | 30 | ✓ Celebrex |
| 122 | LEVODOPA WITH CARBIDOPA | | * Tab long-acting 100 mg with carbidopa 25 mg | 23.84 | 100 | ✓ Mylan S29 S29 |
| | | Wastage claimable | | | | |
| 123 | CLOMIPRAMINE HYDROCHLORIDE – Safety medicine; prescriber may determine dispensing frequency | | Tab 25 mg | 4.73 | 50 | ✓ Apo-Cloamipramine |
| 124 | PHENELZINE SULPHATE | | * Tab 15 mg | 70.80 | 60 | ✓ Nardil S29 S29 |
| | | Wastage claimable | | | | |
| 155 | IRINOTECAN HYDROCHLORIDE – PCT only – Specialist | | Inj 20 mg per ml, 5 ml vial..... | 71.44 | 1 | ✓ Irinotecan Accord S29 |

| Check your Schedule for full details Schedule page ref | Subsidy (Mnfr's price) \$ | Brand or Generic Mnfr <input checked="" type="checkbox"/> fully subsidised |
|---|---------------------------------|--|
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Changes to Restrictions, Chemical Names and Presentations

Effective 1 June 2019

| | | | | |
|-----|--|--------------|--------------|---|
| 11 | ACARBOSE (S29 and wastage claimable removed) * Tab 50 mg Wastage claimable | 10.47 | 90 | <input checked="" type="checkbox"/> Accarb S29 |
| 14 | INSULIN PEN NEEDLES – Maximum of 100 dev per prescription (amended brand name) * 31 g × 6 mm..... | 9.50 | 100 | <input checked="" type="checkbox"/> ABM Berpu |
| 31 | TALIGLUCERASE ALFA – Special Authority see SA1734 – Retail pharmacy (Brand switch fee removed) Brand switch fee payable (Pharmacode 2561972) Inj 200 unit vial..... | 1,072.00 | 1 | <input checked="" type="checkbox"/> Elelyso |
| 98 | PARA-AMINO SALICYLIC ACID – Retail pharmacy-Specialist (amended note) a) No patient co-payment payable b) Prescriptions must be written by, or on the recommendation of, Specialist must be an infectious disease specialist, clinical microbiologist or respiratory specialist. Grans for oral liq 4 g sachet..... | 280.00 | 30 | <input checked="" type="checkbox"/> Paser S29 |
| 98 | PROTIONAMIDE – Retail pharmacy-Specialist (amended note) a) No patient co-payment payable b) Prescriptions must be written by, or on the recommendation of, Specialist must be an infectious disease specialist, clinical microbiologist or respiratory specialist. Tab 250 mg | 305.00 | 100 | <input checked="" type="checkbox"/> Peteha S29 |
| 121 | PARACETAMOL (restrictions removed and stat dispensing reinstated) * Tab 500 mg - blister pack..... | 0.71 7.12 | 100 1,000 | <input checked="" type="checkbox"/> Priceline <input checked="" type="checkbox"/> Paracetamol Pharmacare <input checked="" type="checkbox"/> Pharmacare <input checked="" type="checkbox"/> Pharmacy Health |
| | a) Maximum of 300 tab per prescription; can be waived by endorsement b) Up to 30 tab available on a PSO c) 1) Subsidy by endorsement for higher quantities is available for patients with long term conditions who require regular daily dosing for one month or greater who do not use compliance packaging, and the prescription is annotated accordingly. Pharmacists may annotate the prescription as endorsed where dispensing history supports a long term condition. 2) Maximum of 100 tab per dispensing for non-endorsed patients. If quantities prescribed for more than 100 tabs (for non-endorsed patients), then dispense in repeat dispensings not exceeding 100 tab per dispensing. | | | |
| 122 | METHADONE HYDROCHLORIDE (amended presentation description) a) Only on a controlled drug form b) No patient co-payment payable c) Safety medicine; prescriber may determine dispensing frequency d) Extemporaneously compounded methadone will only be reimbursed at the rate of the cheapest form available (methadone powder, not methadone tablets). e) For methadone hydrochloride oral liquid refer Standard Formulae Tab 5 mg – bottle pack | 1.40 | 10 | <input checked="" type="checkbox"/> Methatabs |
| | Note – this applies to Pharmacode 765503. | | | |

▲ 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)
\$

Brand or
Generic Mnfr
 fully subsidised

Changes to Restrictions – effective 1 June 2019 (continued)

| | | | |
|-----|---|---|-----|
| 124 | DOSULEPIN [DOTHIEPIN] HYDROCHLORIDE – Subsidy by endorsement (subsidy by endorsement added) | a) Safety medicine; prescriber may determine dispensing frequency | |
| | b) Subsidy by endorsement – Subsidised for patients who were taking dosulepin [dothiepin] hydrochloride prior to 1 June 2019 and the prescription is endorsed accordingly. Pharmacists may annotate the prescription as endorsed where there exists a record of prior dispensing of dosulepin [dothiepin] hydrochloride. | | |
| | Tab 75 mg | 11.19 | 100 |
| | Cap 25 mg | 6.45 | 100 |
| 162 | DASATINIB – Xpharm – Special Authority see SA1805 0976 – Retail pharmacy (amended Special Authority, removal of Xpharm and addition of wastage claimable) | | |
| | Tab 20 mg | 3,774.06 | 60 |
| | Tab 50 mg | 6,214.20 | 60 |
| | Tab 70 mg | 7,692.58 | 60 |

Wastage claimable

► SA1805 0976 Special Authority for Subsidy

Special Authority approved by the CML/GIST Co-ordinator

Notes: Application details may be obtained from PHARMAC's website <http://www.pharmac.govt.nz>, and prescriptions should be sent to:

The CML/GIST Co-ordinator Phone: (04) 460 4990
PHARMAC Facsimile: (04) 916 7571
PO Box 10 254 Email: cmlgistoordinator@pharmac.govt.nz
Wellington

Special Authority criteria for CML – access by application

- a) Funded for patients with diagnosis (confirmed by a haematologist) of a chronic myeloid leukaemia (CML) in-blast crisis, accelerated phase, or in chronic phase.
- b) Maximum dose of 140 mg/day for accelerated or blast phase, and 100 mg/day for chronic phase CML.
- c) Subsidised for use as monotherapy only.
- d) Initial approvals valid seven months.
- e) Subsequent approval(s) are granted on application and are valid for six months. The first reapplication (after seven months) should provide details of the haematological response. The third reapplication should provide details of the cytogenetic response after 14–18 months from initiating therapy. All other reapplications should provide details of haematological response, and cytogenetic response if such data is available. Applications to be made and subsequent prescriptions can be written by a haematologist or an oncologist.

Note: Dasatinib is indicated for the treatment of adults with chronic, accelerated or blast phase CML with resistance or intolerance to prior therapy including imatinib.

Guideline on discontinuation of treatment for patients with CML

- a) Prescribers should consider discontinuation of treatment if, after 6 months from initiating therapy, a patient did not obtain a haematological response as defined as any one of the following three levels of response:
 - 1) complete haematologic response (as characterised by an absolute neutrophil count (ANC) $> 1.5 \times 10^9/L$, platelets $> 100 \times 10^9/L$, absence of peripheral blood (PB) blasts, bone marrow (BM) blasts $< 5\%$ (or FISH Ph + 0–35% metaphases), and absence of extramedullary disease); or
 - 2) no evidence of leukaemia (as characterised by an absolute neutrophil count (ANC) $> 1.0 \times 10^9/L$, platelets $> 20 \times 10^9/L$, absence of peripheral blood (PB) blasts, bone marrow (BM) blasts $< 5\%$ (or FISH Ph + 0–35% metaphases), and absence of extramedullary disease); or
 - 3) return to chronic phase (as characterised by BM and PB blasts $< 15\%$, BM and PB blasts and promyelocytes $< 30\%$, PB basophils $< 20\%$ and absence of extramedullary disease other than spleen and liver).
- b) Prescribers should consider discontinuation of treatment if, after 18 months from initiating therapy, a patient did not obtain a major cytogenetic response defined as 0–35% Ph + metaphases.

continued...

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| Check your Schedule for full details Schedule page ref | Subsidy (Mnfr's price) \$ | Brand or Generic Mnfr <input checked="" type="checkbox"/> fully subsidised |
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Changes to Restrictions – effective 1 June 2019 (continued)

continued...

- Initial application only from a haematologist or Practitioner on the recommendation of a haematologist.**
Approvals valid for 6 months for applications meeting the following criteria:
- Any of the following:**
- 1 Both:**
 - 1.1 The patient has a diagnosis of chronic myeloid leukaemia (CML) in blast crisis or accelerated phase; and**
 - 1.2 Maximum dose of 140 mg/day; or**
 - 2 Both:**
 - 2.1 The patient has a diagnosis of Philadelphia chromosome-positive acute lymphoid leukaemia (Ph+ ALL); and**
 - 2.2 Maximum dose of 140 mg/day; or**
 - 3 All of the following:**
 - 3.1 The patient has a diagnosis of CML in chronic phase; and**
 - 3.2 Maximum dose of 100 mg/day; and**
 - 3.3 Any of the following:**
 - 3.3.1 Patient has documented treatment failure* with imatinib; or**
 - 3.3.2 Patient has experienced treatment-limiting toxicity with imatinib precluding further treatment with imatinib; or**
 - 3.3.3 Patient has high-risk chronic-phase CML defined by the Sokal or EURO scoring system; or**
 - 3.3.4 Patients is enrolled in the KISS study** and requires dasatinib treatment according to the study protocol.**

Renewal only from a haematologist or Practitioner on the recommendation of a haematologist. Approvals valid for 6 months for applications meeting the following criteria:

All of the following:

- 1 Lack of treatment failure while on dasatinib*; and**
- 2 Dasatinib treatment remains appropriate and the patient is benefiting from treatment; and**
- 3 Maximum dasatinib dose of 140 mg/day for accelerated or blast phase CML and Ph+ ALL, and 100 mg/day for chronic phase CML.**

Note: *treatment failure for CML as defined by Leukaemia Net Guidelines. **Kinase-Inhibition Study with Sprycel Start-up <https://www.cancertrialsnz.ac.nz/kiss/>

| | | |
|-----|---|---|
| 228 | CHLOROFORM (note added) | |
| | a) Only in combination | |
| | b) Maximum of 100 ml per prescription | |
| | c) Only in aspirin and chloroform application. | |
| | d) Note: This product is no longer being manufactured by the supplier and will be delisted from the Schedule at a date to be determined. | |
| | Chloroform BP..... | 25.50 500 ml <input checked="" type="checkbox"/> PSM |
| 228 | COLLODION FLEXIBLE (note added) | |
| | Note: This product is no longer being manufactured by the supplier and will be delisted from the Schedule at a date to be determined. | |
| | Collodion flexible | 19.30 100 ml <input checked="" type="checkbox"/> PSM |

▲ 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

Changes to Restrictions – effective 1 May 2019

| | | | | | |
|----|--|---|----------|-----------------------|---------------------------|
| 14 | INSULIN PUMP – Special Authority see SA1603 – Retail pharmacy (amended presentation description) | a) Maximum of 1 dev per prescription b) Only on a prescription c) Maximum of 1 insulin pump per patient each four year period. Min basal rate 0.004 0.1 U/h | 4,500.00 | 1 | ✓ Tandem t:slim X2 |
| 39 | EPTACOG ALFA [RECOMBINANT FACTOR VIIA] – [Xpharm] (amended restriction) | For patients with haemophilia, whose funded treatment is managed by the Haemophilia Treaters Group in conjunction with the National Haemophilia Management Group. For patients with haemophilia. Access to funded treatment is managed by the Haemophilia Treaters Group in conjunction with the National Haemophilia Management Group. | | | |
| | Inj 1 mg syringe | 1,178.30 | 1 | ✓ NovoSeven RT | |
| | Inj 2 mg syringe | 2,356.60 | 1 | ✓ NovoSeven RT | |
| | Inj 5 mg syringe | 5,891.50 | 1 | ✓ NovoSeven RT | |
| | Inj 8 mg syringe | 9,426.40 | 1 | ✓ NovoSeven RT | |
| 39 | FACTOR EIGHT INHIBITOR BYPASSING FRACTION – [Xpharm] (amended restriction) | For patients with haemophilia, whose funded treatment is managed by the Haemophilia Treaters Group in conjunction with the National Haemophilia Management Group. For patients with haemophilia. Access to funded treatment is managed by the Haemophilia Treaters Group in conjunction with the National Haemophilia Management Group. | | | |
| | Inj 500 U | 1,315.50 | 1 | ✓ FEIBA NF | |
| | Inj 1,000 U | 2,630.00 | 1 | ✓ FEIBA NF | |
| | Inj 2,500 U | 6,575.00 | 1 | ✓ FEIBA NF | |
| 39 | MOROCTOCOG ALFA [RECOMBINANT FACTOR VIII] – [Xpharm] (amended restriction) | Preferred Brand of recombinant factor VIII for patients with haemophilia from 1 March 2016. Access to funded treatment is managed by the Haemophilia Treaters Group in conjunction with the National Haemophilia Management Group. For patients with haemophilia. Access to funded treatment is managed by the Haemophilia Treaters Group in conjunction with the National Haemophilia Management Group. | | | |
| | Inj 250 iu prefilled syringe..... | 210.00 | 1 | ✓ Xyntha | |
| | Inj 500 iu prefilled syringe..... | 420.00 | 1 | ✓ Xyntha | |
| | Inj 1,000 iu prefilled syringe..... | 840.00 | 1 | ✓ Xyntha | |
| | Inj 2,000 iu prefilled syringe..... | 1,680.00 | 1 | ✓ Xyntha | |
| | Inj 3,000 iu prefilled syringe..... | 2,520.00 | 1 | ✓ Xyntha | |
| 40 | NONACOG GAMMA, [RECOMBINANT FACTOR IX] – [Xpharm] (amended restriction) | For patients with haemophilia, whose funded treatment is managed by the Haemophilia Treaters Group in conjunction with the National Haemophilia Management Group. For patients with haemophilia. Access to funded treatment is managed by the Haemophilia Treaters Group in conjunction with the National Haemophilia Management Group. | | | |
| | Inj 500 iu vial..... | 435.00 | 1 | ✓ RIXUBIS | |
| | Inj 1,000 iu vial..... | 870.00 | 1 | ✓ RIXUBIS | |
| | Inj 2,000 iu vial..... | 1,740.00 | 1 | ✓ RIXUBIS | |
| | Inj 3,000 iu vial..... | 2,610.00 | 1 | ✓ RIXUBIS | |

| Check your Schedule for full details Schedule page ref | Subsidy (Mnfr's price) \$ | Brand or Generic Mnfr ✓ fully subsidised |
|---|---------------------------------|---|
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Changes to Restrictions – effective 1 May 2019 (continued)

| | | |
|-----|---|--|
| 40 | OCTOCOG ALFA [RECOMBINANT FACTOR VIII] (ADVATE) – [Xpharm] (amended restriction) Rare Clinical Circumstances Brand of recombinant factor VIII for patients with haemophilia from 1 March 2016. Access to funded treatment by application to the Haemophilia Treatments Panel. Application details may be obtained from PHARMAC's website http://www.pharmac.govt.nz or: The Co-ordinator, Haemophilia Treatments Panel Phone: 0800 023 588 Option 2 PHARMAC PO Box 10 254 Facsimile: (04) 974 4881 Wellington Email: haemophilia@pharmac.govt.nz For patients with haemophilia. Access to funded treatment is managed by the Haemophilia Treaters Group in conjunction with the National Haemophilia Management Group. | Inj 250 iu vial..... 210.00 1 ✓Advate Inj 500 iu vial..... 420.00 1 ✓Advate Inj 1,000 iu vial..... 840.00 1 ✓Advate Inj 1,500 iu vial..... 1,260.00 1 ✓Advate Inj 2,000 iu vial..... 1,680.00 1 ✓Advate Inj 3,000 iu vial..... 2,520.00 1 ✓Advate |
| 40 | OCTOCOG ALFA [RECOMBINANT FACTOR VIII] (KOGENATE FS) – [Xpharm] (amended restriction) Second Brand of recombinant factor VIII for patients with haemophilia from 1 March 2016. Access to funded treatment by application to the Haemophilia Treatments Panel. Application details may be obtained from PHARMAC's website http://www.pharmac.govt.nz or: The Co-ordinator, Haemophilia Treatments Panel Phone: 0800 023 588 Option 2 PHARMAC PO Box 10 254 Facsimile: (04) 974 4881 Wellington Email: haemophilia@pharmac.govt.nz For patients with haemophilia. Access to funded treatment is managed by the Haemophilia Treaters Group in conjunction with the National Haemophilia Management Group. | Inj 250 iu vial..... 237.50 1 ✓Kogenate FS Inj 500 iu vial..... 475.00 1 ✓Kogenate FS Inj 1,000 iu vial..... 950.00 1 ✓Kogenate FS Inj 2,000 iu vial..... 1,900.00 1 ✓Kogenate FS Inj 3,000 iu vial..... 2,850.00 1 ✓Kogenate FS |
| 43 | RIVAROXABAN (PSO restriction added) Tab 15 mg – Up to 14 tab available on a PSO | 77.56 28 ✓Xarelto |
| 112 | DICLOFENAC SODIUM (reinstate stat dispensing) * Tab long-acting 75 mg | 22.80 500 ✓Apo-Diclo SR |
| 129 | PIZOTIFEN (removal of S29 and wastage) * Tab 500 mcg..... | 23.21 100 ✓Sandomigran S29 Wastage claimable |

▲ 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 June 2019

| | | | | |
|-----|--|--|----------|--|
| 14 | INSULIN PEN NEEDLES – Maximum of 100 dev per prescription (↓ subsidy) * 31 g × 6 mm..... | 9.50 | 100 | <input checked="" type="checkbox"/> Berpu |
| 39 | FACTOR EIGHT INHIBITOR BYPASSING FRACTION – [Xpharm] (↓ subsidy) For patients with haemophilia. Access to funded treatment is managed by the Haemophilia Treaters Group in conjunction with the National Haemophilia Management Group. Inj 500 U..... | 1,315.00 | 1 | <input checked="" type="checkbox"/> FEIBA NF |
| 89 | ROXITHROMYCIN (↑ subsidy) Tab 150 mg Tab 300 mg | 8.28 16.33 | 50 50 | <input checked="" type="checkbox"/> Arrow-Roxithromycin <input checked="" type="checkbox"/> Arrow-Roxithromycin |
| 102 | EMTRICITABINE WITH TENOFOVIR DISOPROXIL – Subsidy by endorsement; can be waived by Special Authority see SA1714 (↓ subsidy) Endorsement for treatment of HIV: Prescription is deemed to be endorsed if emtricitabine with tenofovir disoproxil is co-prescribed with another antiretroviral subsidised under Special Authority SA1651 and the prescription is annotated accordingly by the Pharmacist or endorsed by the prescriber. Note: Emtricitabine with tenofovir disoproxil prescribed under endorsement for the treatment of HIV is included in the count of up to 4 subsidised antiretrovirals, and counts as two antiretroviral medications, for the purposes of Special Authority SA1651. There is an approval process to become a named specialist to prescribe antiretroviral therapy in New Zealand. Further information is available on the PHARMAC website. Tab 200 mg with tenofovir disoproxil 245 mg (300 mg as a fumarate) | 61.15 (190.02) | 30 | Truvada |
| 105 | EFAVIRENZ WITH EMTRICITABINE AND TENOFOVIR DISOPROXIL – Special Authority see – Retail pharmacy (↓ subsidy) Note: Efavirenz with emtricitabine and tenofovir disoproxil counts as three anti-retroviral medications for the purposes of the anti-retroviral Special Authority Tab 600 mg with emtricitabine 200 mg and tenofovir disoproxil 245 mg (300 mg as a fumarate) | 106.88 (237.52) | 30 | Atripla |
| 105 | ATAZANAVIR SULPHATE – Special Authority see SA1651 – Retail pharmacy (↓ subsidy) Cap 150 mg Cap 200 mg | 141.68 (568.34) 188.91 (757.79) | 60 60 | Reyataz Reyataz |
| 119 | LIDOCAINE [LIGNOCAINE] (↓ subsidy) Gel 2%, 10 ml urethral syringe – Subsidy by endorsement 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. | 105.00 | 25 | <input checked="" type="checkbox"/> Cathejell |

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| Check your Schedule for full details Schedule page ref | Subsidy (Mnfr's price) \$ | Brand or Generic Mnfr <input checked="" type="checkbox"/> fully subsidised |
|---|---------------------------------|--|

Changes to Subsidy and Manufacturer's Price – effective 1 June 2019 (continued)

| | | | | | |
|-----|--|---|-------|------|---|
| 122 | METHADONE HYDROCHLORIDE (↓ subsidy) | a) Only on a controlled drug form b) No patient co-payment payable c) Safety medicine; prescriber may determine dispensing frequency d) Extemporaneously compounded methadone will only be reimbursed at the rate of the cheapest form available (methadone powder, not methadone tablets). e) For methadone hydrochloride oral liquid refer Standard Formulae Tab 5 mg – bottle pack..... | 1.40 | 10 | <input checked="" type="checkbox"/> Methatabs |
| 131 | LEVOMEPRAMAZINE MALEATE – Safety medicine; prescriber may determine dispensing frequency (↓ subsidy) | Tab 25 mg | 16.10 | 100 | <input checked="" type="checkbox"/> Nozinan |
| | | Tab 100 mg | 41.75 | 100 | <input checked="" type="checkbox"/> Nozinan |
| 152 | CARBOPLATIN – PCT only – Specialist (↑ subsidy) | Inj 1 mg for ECP | 0.10 | 1 mg | <input checked="" type="checkbox"/> Baxter |

Effective 1 May 2019

| | | | | | | |
|----|---|---|------------------------|----------|--------|--|
| 39 | FACTOR EIGHT INHIBITOR BYPASSING FRACTION – [Xpharm] (↓ subsidy) | For patients with haemophilia. Access to funded treatment is managed by the Haemophilia Treaters Group in conjunction with the National Haemophilia Management Group. | Inj 500 U | 1,315.50 | 1 | <input checked="" type="checkbox"/> FEIBA NF |
| | | | Inj 1,000 U | 2,630.00 | 1 | <input checked="" type="checkbox"/> FEIBA NF |
| | | | Inj 2,500 U | 6,575.00 | 1 | <input checked="" type="checkbox"/> FEIBA NF |
| 40 | NONACOG GAMMA, [RECOMBINANT FACTOR IX] – [Xpharm] (↓ subsidy) | For patients with haemophilia. Access to funded treatment is managed by the Haemophilia Treaters Group in conjunction with the National Haemophilia Management Group. | Inj 500 iu vial..... | 435.00 | 1 | <input checked="" type="checkbox"/> RIXUBIS |
| | | | Inj 1,000 iu vial..... | 870.00 | 1 | <input checked="" type="checkbox"/> RIXUBIS |
| | | | Inj 2,000 iu vial..... | 1,740.00 | 1 | <input checked="" type="checkbox"/> RIXUBIS |
| | | | Inj 3,000 iu vial..... | 2,610.00 | 1 | <input checked="" type="checkbox"/> RIXUBIS |
| 40 | OCTOCOG ALFA [RECOMBINANT FACTOR VIII] (ADVATE) – [Xpharm] (↓ subsidy) | For patients with haemophilia. Access to funded treatment is managed by the Haemophilia Treaters Group in conjunction with the National Haemophilia Management Group. | Inj 250 iu vial..... | 210.00 | 1 | <input checked="" type="checkbox"/> Advate |
| | | | Inj 500 iu vial..... | 420.00 | 1 | <input checked="" type="checkbox"/> Advate |
| | | | Inj 1,000 iu vial..... | 840.00 | 1 | <input checked="" type="checkbox"/> Advate |
| | | | Inj 1,500 iu vial..... | 1,260.00 | 1 | <input checked="" type="checkbox"/> Advate |
| | | | Inj 2,000 iu vial..... | 1,680.00 | 1 | <input checked="" type="checkbox"/> Advate |
| | | | Inj 3,000 iu vial..... | 2,520.00 | 1 | <input checked="" type="checkbox"/> Advate |
| 44 | FILGRASTIM – Special Authority see SA1259 – Retail pharmacy (↓ subsidy) | Inj 300 mcg per 0.5 ml prefilled syringe | 48.11 (270.00) | 5 | Zarzio | |
| | | Inj 480 mcg per 0.5 ml prefilled syringe | 80.75 (432.00) | 5 | Zarzio | |

▲ 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)
\$

Brand or
Generic Mnfr
✓ fully subsidised

Changes to Subsidy and Manufacturer's Price – effective 1 May 2019 (continued)

| | | | | | |
|-----|---|------------------------------------|----------------------|--------|------------------|
| 76 | ZOLEDRONIC ACID (↓ subsidy) Inj 4 mg per 5 ml, vial – Special Authority see SA1687 – | Retail pharmacy..... | 38.03 (550.00) | 1 | Zometa |
| 94 | TRIMETHOPRIM WITH SULPHAMETHOXAZOLE [CO-TRIMOXAZOLE] (↑ subsidy) * Tab trimethoprim 80 mg and sulphamethoxazole 400 mg – Up to 30 tab available on a PSO..... | | 53.96 | 500 | ✓ Trisul |
| 100 | VALGANCICLOVIR – Special Authority see SA1404 – Retail pharmacy (↓ subsidy) Tab 450 mg | | 225.00 (1,050.00) | 60 | Valcyte |
| 109 | IBUPROFEN (↓ subsidy) * Oral liq 20 mg per ml..... | | 1.88 | 200 ml | ✓ Fenpaed |
| 123 | OXYCODONE HYDROCHLORIDE (↓ subsidy) a) Only on a controlled drug form b) No patient co-payment payable c) Safety medicine; prescriber may determine dispensing frequency | Tab controlled-release 5 mg | 2.15 (2.63) | 20 | BNM |
| | | Tab controlled-release 10 mg | 2.15 (2.76) | 20 | BNM |
| | | Tab controlled-release 20 mg | 2.15 (4.72) | 20 | BNM |
| | | Tab controlled-release 40 mg | 3.20 (7.69) | 20 | BNM |
| | | Tab controlled-release 80 mg | 10.98 (14.11) | 20 | BNM |
| 127 | LAMOTRIGINE (↓ subsidy) ▲ Tab dispersible 25 mg | | 2.76 | 56 | ✓ Logem |
| | ▲ Tab dispersible 50 mg | | 3.31 | 56 | ✓ Logem |
| | ▲ Tab dispersible 100 mg | | 4.40 | 56 | ✓ Logem |
| 127 | LEVETIRACETAM (↓ subsidy) | Tab 250 mg | 4.99 | 60 | ✓ Everet |
| | | Tab 500 mg | 8.79 | 60 | ✓ Everet |
| | | Tab 750 mg | 14.39 | 60 | ✓ Everet |
| | | Tab 1,000 mg | 18.59 | 60 | ✓ Everet |
| 162 | VINORELBINE – PCT only – Specialist (↑ subsidy) | Inj 1 mg for ECP | 1.25 | 1 mg | ✓ Baxter |

Check your Schedule for full details
Schedule page ref

Subsidy
(Mnfr's price)
\$

Per

Brand or
Generic Mnfr
✓ fully subsidised

Delisted Items

Effective 1 June 2019

| | | | | | | |
|--|--|---------|---------|--------------------|--|--|
| 48 | PROPAFENONE HYDROCHLORIDE – Retail pharmacy-Specialist | | | | | |
| | ▲ Tab 150 mg | 40.90 | 50 | ✓ Rytmonorm | | |
| Note – this delist applies to Pharmacode 791326. A new Pharmacode was listed 1 December 2018. | | | | | | |
| 53 | CHOLESTYRAMINE | | | | | |
| | Powder for oral liq 4 g | 19.25 | 50 | | | |
| | | (52.68) | | | | |
| | | (52.68) | | | | |
| | | | | Questran-Lite | | |
| | | | | Questran-Lite S29 | | |
| | | | | S29 | | |
| 59 | HYDROGEN PEROXIDE | | | | | |
| | * Crm 1% | 8.56 | 10 g OP | ✓ Crystaderm | | |
| Note – delisting delayed until further notice. | | | | | | |
| 65 | POVIDONE IODINE | | | | | |
| | Skin preparation, povidone iodine 10% with 70% alcohol..... | 1.63 | 100 ml | | | |
| | | (6.04) | | | | |
| | | 8.13 | 500 ml | Orion | | |
| | | (18.63) | | Orion | | |
| 88 | AZITHROMYCIN – Maximum of 5 days treatment per prescription; can be waived by Special Authority see SA1683 | | | | | |
| | A maximum of 24 months of azithromycin treatment for non-cystic fibrosis bronchiectasis will be subsidised on Special Authority. | | | | | |
| | Tab 250 mg | 8.50 | 6 | ✓ Zithromax | | |
| | Tab 500 mg – Up to 8 tab available on a PSO | 0.93 | 2 | ✓ Apo-Azithromycin | | |
| Note – the delist for Apo-Azithromycin tab 500 mg applies to Pharmacode 2550059. | | | | | | |
| 127 | LAMOTRIGINE | | | | | |
| | ▲ Tab dispersible 25 mg | 2.76 | 56 | ✓ Logem | | |
| | ▲ Tab dispersible 50 mg | 3.31 | 56 | ✓ Logem | | |
| | ▲ Tab dispersible 100 mg | 4.40 | 56 | ✓ Logem | | |
| Note – this delist applies to Pharmacodes 2271761, tab dispersible 25 mg; 2271788, tab dispersible 50 mg and 2271796, tab dispersible 100 mg. New Pharmacodes were listed 1 December 2018. | | | | | | |
| 130 | DOMPERIDONE | | | | | |
| | * Tab 10 mg | 2.25 | 100 | | | |
| | | (3.20) | | Prokinex | | |
| 131 | CLOZAPINE – Hospital pharmacy [HP4] | | | | | |
| | Safety medicine; prescriber may determine dispensing frequency | | | | | |
| | Tab 25 mg | 5.69 | 50 | ✓ Clozaril | | |
| Note – this delist applies to Pharmacode 454680. A new Pharmacode was listed 1 December 2018. | | | | | | |

▲ 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 June 2019 (continued)

| | | | | | |
|-----|--|---|--|---------------------------------------|--|
| 133 | 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 Inj 50 mg per ml, 2 ml – Up to 5 inj available on a PSO 353.32 | 10 10 | ✓ Piportil ✓ Piportil |
| 143 | PHENOBARBITONE SODIUM – Special Authority see SA1386 – Retail pharmacy | Inj 200 mg per ml, 1 ml ampoule | 46.20 | 10 | ✓ Martindale S29 |
| 149 | VARENICLINE TARTRATE – Special Authority see SA1771 – Retail pharmacy | a) A maximum of 12 weeks' varenicline will be subsidised on each Special Authority approval, including the starter pack b) Varenicline will not be funded in amounts less than 4 weeks of treatment. | Tab 1 mg | 13.55 (67.74) 27.10 (135.48) | 28 56 |
| | | | Tab 0.5 mg × 11 and 1 mg × 14 | 12.09 (60.48) | 25 OP |
| 154 | GEMCITABINE HYDROCHLORIDE – PCT only – Specialist | Inj 200 mg | 8.36 | 1 | ✓ Gemcitabine Ebewe |
| 158 | EPIRUBICIN HYDROCHLORIDE – PCT only – Specialist | Inj 2 mg per ml, 50 ml vial | 32.50 | 1 | ✓ Epirubicin Ebewe |
| 162 | DASATINIB – Retail pharmacy-Specialist – Special Authority see SA0976 | Tab 100 mg | 6,214.20 | 30 | ✓ Sprycel |
| 222 | LEVOBUNOLOL | * Eye drops 0.5%..... | 7.00 | 5 ml OP | ✓ Betagan |
| 224 | PARAFFIN LIQUID WITH SOFT WHITE PARAFFIN | * Eye oint with soft white paraffin | 3.63 | 3.5 g OP | ✓ Refresh Night Time |
| 225 | PHARMACY SERVICES | May only be claimed once per patient. * Brand switch fee..... | 4.50 | 1 fee | ✓ BSF Elelyso |
| | | The Pharmacode for BSF Elelyso is 2561972 | | | |
| 226 | DEFERIROXAMINE MESILATE | * Inj 500 mg vial | 51.52 | 10 | ✓ Desferal |

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

Delisted Items – effective 1 May 2019

| | | | | |
|-----|--|------------------|----------|---------------------|
| 11 | METFORMIN HYDROCHLORIDE * Tab immediate-release 500 mg..... | 8.63 (9.59) | 1,000 | |
| | * Tab immediate-release 850 mg..... | 7.04 (7.82) | 500 | Metformin Mylan |
| 25 | PANCREATIC ENZYME Cap pancreatin 150 mg (amylase 8,000 Ph Eur U, lipase 10,000 Ph Eur U, total protease 600 Ph Eur U) | 34.93 | 100 | ✓ Creon 10000 |
| | Note – this delist applies to Pharmacode 954322. A new Pharmacode was listed 1 December 2018. | | | |
| 40 | NONACOG GAMMA, [RECOMBINANT FACTOR IX] – [Xpharm] For patients with haemophilia. Access to funded treatment is managed by the Haemophilia Treaters Group in conjunction with the National Haemophilia Management Group. Inj 250 iu vial..... | 287.50 | 1 | ✓ RIXUBIS |
| 45 | PHOSPHORUS Tab eff 500 mg (16 mmol) | 82.50 | 100 | ✓ Phosphate-Sandoz |
| 88 | CLARITHROMYCIN – Maximum of 500 mg per prescription; can be waived by Special Authority see SA1131 Grans for oral liq 250 mg per 5 ml – Wastage claimable..... | 23.12 | 50 ml | ✓ Klacid |
| | Note – this delist applies to Pharmacode 2494973. A new Pharmacode was listed 1 November 2018. | | | |
| 106 | INTERFERON ALFA-2B – PCT – Retail pharmacy-Specialist a) See prescribing guideline b) Prescriptions must be written by, or on the recommendation of, an internal medicine physician or ophthalmologist Inj 18 m iu, 1.2 ml multidose pen..... | 206.71 | 1 | ✓ Intron-A |
| | Inj 30 m iu, 1.2 ml multidose pen..... | 344.52 | 1 | ✓ Intron-A |
| | Inj 60 m iu, 1.2 ml multidose pen..... | 689.04 | 1 | ✓ Intron-A |
| 110 | ALENDRONATE SODIUM – Special Authority see SA0949 – Retail pharmacy * Tab 40 mg | 133.00 | 30 | ✓ Fosamax |
| 121 | PARACETAMOL * Suppos 500 mg | 12.40 (12.60) | 50 | |
| | | | | Paracare |
| 223 | BIMATOPROST * Eye drops 0.03% | 3.30 (3.65) | 3 ml OP | |
| | | | | Bimatoprost Actavis |
| 246 | AMINO ACID FORMULA – Special Authority see SA1210 – Hospital pharmacy [HP3] Powder | 53.00 | 400 g OP | ✓ Neocate LCP |
| | Note – this delist has been delayed until 1 August 2019. | | | |

▲ 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)
\$

Brand or
Generic Mnfr
✓ fully subsidised

Items to be Delisted

Effective 1 August 2019

| | | | | | |
|-----|---|------------|----------|---|-------------|
| 44 | FILGRASTIM – Special Authority see SA1259 – Retail pharmacy | | | | |
| | Inj 300 mcg per 0.5 ml prefilled syringe | 48.11 | 5 | | Zarzio |
| | | (270.00) | | | |
| | Inj 480 mcg per 0.5 ml prefilled syringe | 80.75 | 5 | | Zarzio |
| | | (432.00) | | | |
| 76 | ZOLEDRONIC ACID | | | | |
| | Inj 4 mg per 5 ml, vial – Special Authority see SA1687 – | | | | |
| | Retail pharmacy..... | 38.03 | 1 | | Zometa |
| | | (550.00) | | | |
| 79 | MEDROXYPROGESTERONE ACETATE – See prescribing guideline | | | | |
| | * Tab 2.5 mg | 7.00 | 56 | ✓ | Prevera |
| | Note – delisting delayed until 1 December 2019. | | | | |
| 100 | VALGANCICLOVIR – Special Authority see SA1404 – Retail pharmacy | | | | |
| | Tab 450 mg | 225.00 | 60 | | Valcyte |
| | | (1,050.00) | | | |
| 109 | IBUPROFEN | | | | |
| | * Oral liq 20 mg per ml | 1.88 | 200 ml | ✓ | Fenpaed |
| 123 | OXYCODONE HYDROCHLORIDE | | | | |
| | a) Only on a controlled drug form | | | | |
| | b) No patient co-payment payable | | | | |
| | c) Safety medicine; prescriber may determine dispensing frequency | | | | |
| | Tab controlled-release 5 mg | 2.15 | 20 | | |
| | | (2.63) | | | BNM |
| | Tab controlled-release 10 mg | 2.15 | 20 | | BNM |
| | | (2.76) | | | |
| | Tab controlled-release 20 mg | 2.15 | 20 | | BNM |
| | | (4.72) | | | |
| | Tab controlled-release 40 mg | 3.20 | 20 | | BNM |
| | | (7.69) | | | |
| | Tab controlled-release 80 mg | 10.98 | 20 | | BNM |
| | | (14.11) | | | |
| 228 | COMPOUND HYDROXYBENZOATE – Only in combination | | | | |
| | Only in extemporaneously compounded oral mixtures. | | | | |
| | Soln | 34.18 | 100 ml | ✓ | David Craig |
| 246 | AMINO ACID FORMULA – Special Authority see SA1219 – Hospital pharmacy [HP3] | | | | |
| | Powder | 53.00 | 400 g OP | ✓ | Neocate LCP |

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

Items to be Delisted – effective 1 September 2019

| | | | | |
|-----|---|---|----|---------|
| 102 | EMTRICITABINE WITH TENOFOVIR DISOPROXIL – Subsidy by endorsement; can be waived by Special Authority see SA1714 | Endorsement for treatment of HIV: Prescription is deemed to be endorsed if emtricitabine with tenofovir disoproxil is co-prescribed with another antiretroviral subsidised under Special Authority SA1651 and the prescription is annotated accordingly by the Pharmacist or endorsed by the prescriber. Note: Emtricitabine with tenofovir disoproxil prescribed under endorsement for the treatment of HIV is included in the count of up to 4 subsidised antiretrovirals, and counts as two antiretroviral medications, for the purposes of Special Authority SA1651. There is an approval process to become a named specialist to prescribe antiretroviral therapy in New Zealand. Further information is available on the PHARMAC website. Tab 200 mg with tenofovir disoproxil 245 mg (300 mg as a fumarate) 61.15 (190.02) | 30 | Truvada |
| 105 | EFAVIRENZ WITH EMTRICITABINE AND TENOFOVIR DISOPROXIL – Special Authority see SA1651 – Retail pharmacy | Note: Efavirenz with emtricitabine and tenofovir disoproxil counts as three anti-retroviral medications for the purposes of the anti-retroviral Special Authority Tab 600 mg with emtricitabine 200 mg and tenofovir disoproxil 245 mg (300 mg as a fumarate) 106.88 (237.52) | 30 | Atripla |
| 105 | ATAZANAVIR SULPHATE – Special Authority see SA1651 – Retail pharmacy | Cap 150 mg 141.68 (568.34) Cap 200 mg 188.91 (757.79) | 60 | Reyataz |

Effective 1 October 2019

| | | | | |
|-----|-------------|---|----|-----------------------------------|
| 127 | LAMOTRIGINE | ▲ Tab dispersible 25 mg 20.40 29.09 | 56 | ✓ Arrow-Lamotrigine ✓ Lamictal |
| | | ▲ Tab dispersible 50 mg 34.70 47.89 | 56 | ✓ Arrow-Lamotrigine ✓ Lamictal |
| | | ▲ Tab dispersible 100 mg 59.90 79.16 | 56 | ✓ Arrow-Lamotrigine ✓ Lamictal |

Effective 1 November 2019

| | | |
|----|---|---|
| 40 | NONACOG ALFA [RECOMBINANT FACTOR IX] – [Xpharm] | For patients with haemophilia, whose funded treatment is managed by the Haemophilia Treaters Group in conjunction with the National Haemophilia Management Group. |
| | Inj 250 iu vial..... | 310.00 |
| | Inj 500 iu vial..... | 620.00 |
| | Inj 1,000 iu vial..... | 1,240.00 |
| | Inj 2,000 iu vial..... | 2,480.00 |
| | Inj 3,000 iu vial..... | 3,720.00 |

▲ 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 November 2019 (continued)

| | | | | |
|-----|--|----------|-----|---------------|
| 91 | DOXYCYCLINE | | | |
| | * Tab 100 mg – Up to 30 tab available on a PSO | 6.75 | 250 | ✓ Doxine |
| | Note – this delist applies to the 250 tab pack | | | |
| 97 | CYCLOCERINE – Retail pharmacy-Specialist | | | |
| | a) No patient co-payment payable | | | |
| | b) Prescriptions must be written by, or on the recommendation of, an infectious disease physician, clinical microbiologist or respiratory physician. | | | |
| | Cap 250 mg | 1,294.50 | 100 | ✓ King S29 |
| 119 | LIDOCAINE [LIGNOCAINE] | | | |
| | Gel 2%, 10 ml urethral syringe – Subsidy by endorsement | 81.50 | 10 | ✓ Pfizer |
| | 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. | | | |
| 129 | PIZOTIFEN | | | |
| | * Tab 500 mcg..... | 23.21 | 100 | ✓ Sandomigran |
| | Note – this delist applies to Pharmacode 251666. Pharmacode 2492954 remains listed. | | | |

Effective 1 December 2019

| | | | | |
|-----|--|------|----|-------------|
| 79 | MEDROXYPROGESTERONE ACETATE – See prescribing guideline | | | |
| | * Tab 2.5 mg | 7.00 | 56 | ✓ Provera |
| 122 | METHADONE HYDROCHLORIDE | | | |
| | a) Only on a controlled drug form | | | |
| | b) No patient co-payment payable | | | |
| | c) Safety medicine; prescriber may determine dispensing frequency | | | |
| | d) Extemporaneously compounded methadone will only be reimbursed at the rate of the cheapest form available (methadone powder, not methadone tablets). | | | |
| | e) For methadone hydrochloride oral liquid refer Standard Formulae | | | |
| | Tab 5 mg – bottle pack..... | 1.40 | 10 | ✓ Methatabs |

Effective 1 January 2020

| | | | | |
|-----|--|-------|-----|---------------------|
| 78 | TETRACOSACTRIN | | | |
| | * Inj 250 mcg per ml, 1 ml ampoule | 75.00 | 1 | ✓ Synacthen S29 S29 |
| | Note – this delist applies to Pharmacode 2564300. | | | |
| 124 | DOSULEPIN [DOTHIEPIN] HYDROCHLORIDE – Subsidy by endorsement | | | |
| | a) Safety medicine; prescriber may determine dispensing frequency | | | |
| | b) Subsidy by endorsement – Subsidised for patients who were taking dosulepin [dothiepin] hydrochloride prior to 1 June 2019 and the prescription is endorsed accordingly. Pharmacists may annotate the prescription as endorsed where there exists a record of prior dispensing of dosulepin [dothiepin] hydrochloride. | | | |
| | Cap 25 mg | 6.45 | 100 | ✓ Didepress |

| | | | |
|---|---------------------------------|-----|---|
| 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 2020

| | | | |
|-----|-----------------------------------|--------|---------------------|
| 110 | SODIUM AUROTHIOMALATE | | |
| | Inj 10 mg in 0.5 ml ampoule | 76.87 | 10 ✓ Myocrisin |
| | Inj 20 mg in 0.5 ml ampoule | 113.17 | 10 ✓ Myocrisin |
| | Inj 50 mg in 0.5 ml ampoule | 217.23 | 10 ✓ Myocrisin |

Effective 1 August 2020

| | | | |
|-----|--|--|--|
| 124 | DOSULEPIN [DOTHIEPIN] HYDROCHLORIDE – Subsidy by endorsement | | |
| | a) Safety medicine; prescriber may determine dispensing frequency | | |
| | b) Subsidy by endorsement – Subsidised for patients who were taking dosulepin [dothiepin] hydrochloride prior to 1 June 2019 and the prescription is endorsed accordingly. Pharmacists may annotate the prescription as endorsed where there exists a record of prior dispensing of dosulepin [dothiepin] hydrochloride. | | |

Tab 75 mg 11.19 100 ✓ Dopress

▲ 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

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