

Pharmaceutical Management Agency
New Zealand
Pharmaceutical Schedule

Section H Update

for Hospital Pharmaceuticals

December 2024

The logo for PHARMAC, featuring the word "PHARMAC" in a bold, uppercase, sans-serif font, with "TE PĀTAKA WHAIORANGA" in a smaller, uppercase, sans-serif font below it. The logo is centered within a white circle that overlaps a large, stylized graphic of white and grey wavy lines on a grey background.

PHARMAC
TE PĀTAKA WHAIORANGA

Contents

Summary of decisions effective 1 December 2024	3
Section H changes to Part II	6
Index	15

Summary of decisions

EFFECTIVE 1 DECEMBER 2024

- Amoxicillin with clavulanic acid (Augmentin) grans for oral liq 25 mg with clavulanic acid 6.25 mg per ml, 100 ml – addition of PSS
- Beta-hCG low sensitivity urine test kit (CheckToP) midstream – new listing
- Betamethasone valerate (Betnovate) lotn 0.1%, 50 ml – price increase and addition of PSS
- Cisplatin (Cisplatin Accord) inj 1 mg per ml, 50 ml vial – new listing
- Compound electrolytes (Plasma-Lyte 148) inj sodium 140 mmol/l, potassium 5 mmol/l, magnesium 1.5 mmol/l, chloride 98 mmol/l, acetate 27 mmol/l, gluconate 23 mmol/l, 500 ml and 1,000 ml bag – price increase
- Compound electrolytes with glucose [dextrose] (Plasma-Lyte 148 & 5% Glucose) inj sodium 140 mmol/l, 5 mmol/l potassium, 1.5 mmol/l magnesium, 98 mmol/l chloride, 27 mmol/l acetate and 23 mmol/l gluconate, glucose 23 mmol/l (5%), 1,000 ml bag – price increase
- Compound sodium lactate [hartmann's solution] (Baxter) inj sodium 131 mmol/l with potassium 5 mmol/l, calcium 2 mmol/l, bicarbonate 29 mmol/l, chloride 111 mmol/l, 500 ml and 1,000 ml bag – price increase
- Dexamfetamine sulfate (Noumed Dexamfetamine) tab 5 mg – amended restriction criteria
- Efavirenz (Stocrin) tab 200 mg and tab 600 mg – delisted 1 December 2024
- Empagliflozin (Jardiance) tab 10 mg and 25 mg – removal of note
- Empagliflozin with metformin hydrochloride (Jardiamet) tab 5 mg with 500 mg and 1,000 mg metformin hydrochloride and tab 12.5 mg with 500 mg and 1,000 mg metformin hydrochloride – removal of note
- Everolimus (Afinitor) tab 5 mg and 10 mg – amended restriction criteria
- Fentanyl (Boucher and Muir) inj 50 mcg per ml, 2 ml ampoule – price increase and addition of PSS
- Fentanyl (Boucher and Muir) inj 50 mcg per ml, 10 ml ampoule – addition of PSS
- Flecainide acetate (Almarytm) inj 10 mg per ml, 15 ml ampoule – new listing
- Gentamicin sulphate (Cidomycin P/Free) inj 40 mg per ml, 2 ml ampoule – new listing
- Glucose [dextrose] inj 5%, 50 ml bag (Baxter Glucose 5%), inj 10%, 1,000 ml bag (Baxter Glucose 10%), inj 10%, 500 ml bag (Baxter Glucose 10%) and inj 50%, 500 ml bag (Baxter Glucose 50%) – price increase
- Glucose with potassium chloride and sodium chloride (Baxter) inj 4% glucose with potassium chloride 20 mmol/l and sodium chloride 0.18%, 1,000 ml bag, inj 5% glucose with potassium chloride 20 mmol/l and sodium chloride 0.45%, 1,000 ml bag and inj 5% glucose with potassium chloride 20 mmol/l and sodium chloride 0.9%, 1,000 ml bag – price increase

Summary of decisions – effective 1 December 2024 (continued)

- Glucose with sodium chloride (Baxter) inj glucose 2.5% with sodium chloride 0.45%, 500 ml bag – new listing
- Glucose with sodium chloride (Baxter) inj 4% glucose and sodium chloride 0.18%, 1,000 ml bag, inj 5% glucose and sodium chloride 0.45%, 1,000 ml bag and inj 5% glucose and sodium chloride 0.9%, 1,000 ml bag – price increase
- Heparin sodium (Wockhardt PSF) inj 1,000 iu per ml, 5 ml ampoule – new listing
- High protein oral feed 2.4 kcal/ml (e.g. Fortisip Compact Protein) liquid 14.6 g protein, 25.3 g carbohydrate and 9.6 g fat per 100 ml, 125 ml bottle – delisting delayed until 1 March 2025
- Hydroxychloroquine sulphate (Ipca-Hydroxychloroquine) tab 200 mg – new listing, addition of PSS, amended chemical name and restrictions removed
- Hydroxychloroquine sulphate (Plaquenil) tab 200 mg – to be delisted 1 May 2025
- Ipratropium bromide (Ipratropium IVAX) nebuliser soln 250 mcg per ml, 2 ml ampoule – to be delisted 1 February 2025
- Ipratropium bromide (Pharmascience) nebuliser soln 250 mcg per ml, 2 ml ampoule – to be delisted 1 May 2025
- Isoniazid (Noumed Isoniazid) tab 100 mg – new listing and addition of PSS
- Isoniazid (PSM) tab 100 mg – to be delisted 1 May 2025
- Lenvatinib (Lenvima) cap 4 mg and 10 mg – new listing
- Lisdexamfetamine dimesilate (Vyvanse) cap 30 mg, 50 mg and 70 mg – new listing
- Mannitol (Baxter) inj 10%, 1,000 ml bag and inj 20%, 500 ml bag – price increase
- Methylphenidate hydrochloride tab extended-release 18 mg, 27 mg, 36 mg and 54 mg (Concerta and Methylphenidate ER - Teva), tab immediate-release 5 mg, 10 mg and 20 mg (Rubifen), tab immediate-release 10 mg (Ritalin), tab sustained-release 20 mg (Rubifen SR) and cap modified-release 10 mg, 20 mg, 30 mg and 40 mg (Ritalin LA) – amended restriction criteria
- Methylthioninium chloride [methylene blue] (Proveblue) inj 5 mg per ml, 10 ml ampoule – price increase
- Modafinil (Modafinil Max Health) tab 100 mg – new listing, addition of PSS and amended restriction criteria
- Modafinil (Modavigil) tab 100 mg – to be delisted 1 May 2025
- Norethisterone (Noriday) tab 350 mcg – new listing
- Octreotide (Omega) inj 50 mcg per ml, 1 ml vial and inj 500 mcg per ml, 1 ml vial – new listing
- Pazopanib (Pazopanib Teva) tab 200 mg and 400 mg – new listing and addition of PSS
- Pazopanib (Votrient) tab 200 mg and 400 mg – to be delisted 1 May 2025

Summary of decisions – effective 1 December 2024 (continued)

- Potassium chloride with sodium chloride (Baxter) inj 10 mmol potassium chloride with 0.29% sodium chloride, 100 ml bag, inj 20 mmol potassium chloride with 0.9% sodium chloride, 1,000 ml bag, inj 40 mmol potassium chloride with 0.9% sodium chloride, 1,000 ml bag and inj 40 mmol potassium chloride with 0.9% sodium chloride, 100 ml bag – price increase
- Ringer’s solution (Baxter) inj sodium 147 mmol/l with potassium 4 mmol/l, calcium 2.2 mmol/l, chloride 156 mmol/l, 1,000 ml bag – new listing
- Salbutamol (Ventolin) oral liq 400 mcg per ml, 150 ml – price increase and addition of PSS
- Salbutamol with ipratropium bromide (Duolin Cipla) nebuliser soln 2.5 mg with ipratropium bromide 0.5 mg per 2.5 ml ampoule – to be delisted 1 April 2025
- SGLT2 Inhibitors – amended restriction criteria
- Sodium chloride (Baxter) inj 0.45%, 500 ml bag, inj 3%, 1,000 ml bag and inj 0.9%, 50 ml, 100 ml, 250 ml, 500 ml and 1,000 ml bag – price increase
- Sodium chloride (Baxter Sodium Chloride 0.9%) irrigation soln 0.9%, 1,000 ml bottle – price increase
- Water (Baxter) inj, 1,000 ml bag – price increase
- Water (Baxter Water for Irrigation) irrigation soln, 1,000 ml bottle – price increase

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

Section H changes to Part II

Effective 1 December 2024

ALIMENTARY TRACT AND METABOLISM

11 SGLT2 Inhibitors (amended restriction criteria)

Restricted

Initiation – heart failure reduced ejection fraction

All of the following:

- 1 Patient has heart failure; and**
- 2 Patient is in NYHA functional class II or III or IV; and**
- 3 Either:**

3.1 Patient has a documented left ventricular ejection fraction (LVEF) of less than or equal to 40%; or

3.2 An ECHO is not reasonably practicable, and in the opinion of the treating practitioner the patient would benefit from treatment; and

- 4 Patient is receiving concomitant optimal standard funded chronic heart failure treatment**

Initiation – Type 2 Diabetes

Any of the following:

- 1 For continuation use; or
- 2 Patient has previously had an initial approval for a GLP-1 agonist; or
- 3 All of the following:
 - 3.1 Patient has type 2 diabetes; and
 - 3.2 Any of the following:
 - 3.2.1 Patient is Māori or any Pacific ethnicity*; or
 - 3.2.2 Patient has pre-existing cardiovascular disease or risk equivalent (see note a)*; or
 - 3.2.3 Patient has an absolute 5-year cardiovascular disease risk of 15% or greater according to a validated Cardiovascular risk assessment calculator*; or
 - 3.2.4 Patient has a high lifetime cardiovascular risk due to being diagnosed with type 2 diabetes during childhood or as a young adult*; or
 - 3.2.5 Patient has diabetic kidney disease (see note b)*; and
 - 3.3 Target HbA1c (of 53 mmol/mol or less) has not been achieved despite the regular use of at least one blood-glucose lowering agent (e.g. metformin, vildagliptin, or insulin) for at least 3 months.

Notes: * Criteria intended to describe patients at high risk of cardiovascular or renal complications of diabetes.

- a) Pre-existing cardiovascular disease or risk equivalent defined as: prior cardiovascular disease event (i.e. angina, myocardial infarction, percutaneous coronary intervention, coronary artery bypass grafting, transient ischaemic attack, ischaemic stroke, peripheral vascular disease), congestive heart failure or familial hypercholesterolaemia.
- b) Diabetic kidney disease defined as: persistent albuminuria (albumin:creatinine ratio greater than or equal to 3 mg/mmol, in at least two out of three samples over a 3-6 month period) and/or eGFR less than 60 mL/min/1.73m² in the presence of diabetes, without alternative cause.
- c) **Funded [empagliflozin / empagliflozin with metformin hydrochloride] treatment is not to be given in combination with a funded GLP-1 unless receiving (empagliflozin / empagliflozin with metformin hydrochloride) for the treatment of heart failure.**

12 EMPAGLIFLOZIN (removal of note)

Note: Not to be given in combination with a funded GLP-1 agonist.

→ Tab 10 mg.....	58.56	30	Jardiance
→ Tab 25 mg.....	58.56	30	Jardiance

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

Changes to Section H Part II – effective 1 December 2024 (continued)

12	EMPAGLIFLOZIN WITH METFORMIN HYDROCHLORIDE (removal of note) Note: Not to be given in combination with a funded GLP-1 agonist.			
	→ Tab 5 mg with 1,000 mg metformin hydrochloride	58.56	60	Jardiamet
	→ Tab 5 mg with 500 mg metformin hydrochloride	58.56	60	Jardiamet
	→ Tab 12.5 mg with 1,000 mg metformin hydrochloride	58.56	60	Jardiamet
	→ Tab 12.5 mg with 500 mg metformin hydrochloride	58.56	60	Jardiamet

BLOOD AND BLOOD FORMING ORGANS

36	HEPARIN SODIUM (new listing) Inj 1,000 iu per ml, 5 ml ampoule.....	103.70	10	Wockhardt PSF
40	COMPOUND ELECTROLYTES (↑ price) Inj sodium 140 mmol/l, potassium 5 mmol/l, magnesium 1.5 mmol/l, chloride 98 mmol/l, acetate 27 mmol/l, gluconate 23 mmol/l, 500 ml bag	62.82	18	Plasma-Lyte 148
	Inj sodium 140 mmol/l, potassium 5 mmol/l, magnesium 1.5 mmol/l, chloride 98 mmol/l, acetate 27 mmol/l, gluconate 23 mmol/l, 1,000 ml bag	30.72	12	Plasma-Lyte 148
40	COMPOUND ELECTROLYTES WITH GLUCOSE [DEXTROSE] (↑ price) Inj sodium 140 mmol/l, 5 mmol/l potassium, 1.5 mmol/l magnesium, 98 mmol/l chloride, 27 mmol/l acetate and 23 mmol/l gluconate, glucose 23 mmol/l (5%), 1,000 ml bag	239.04	12	Plasma-Lyte 148 & 5% Glucose
40	COMPOUND SODIUM LACTATE [HARTMANN'S SOLUTION] (↑ price) Inj sodium 131 mmol/l with potassium 5 mmol/l, calcium 2 mmol/l, bicarbonate 29 mmol/l, chloride 111 mmol/l, 500 ml bag	27.90	18	Baxter
	Inj sodium 131 mmol/l with potassium 5 mmol/l, calcium 2 mmol/l, bicarbonate 29 mmol/l, chloride 111 mmol/l, 1,000 ml bag	19.32	12	Baxter
40	GLUCOSE [DEXTROSE] (↑ price) Inj 5%, 50 ml bag	162.00	60	Baxter Glucose 5%
	Inj 10%, 1,000 ml bag	162.00	12	Baxter Glucose 10%
	Inj 10%, 500 ml bag	126.00	18	Baxter Glucose 10%
	Inj 50%, 500 ml bag	423.00	18	Baxter Glucose 50%
40	GLUCOSE WITH POTASSIUM CHLORIDE AND SODIUM CHLORIDE (↑ price) Inj 4% glucose with potassium chloride 20 mmol/l and sodium chloride 0.18%, 1,000 ml bag	240.36	12	Baxter
	Inj 5% glucose with potassium chloride 20 mmol/l and sodium chloride 0.45%, 1,000 ml bag	189.00	12	Baxter
	Inj 5% glucose with potassium chloride 20 mmol/l and sodium chloride 0.9%, 1,000 ml bag	334.08	12	Baxter
40	GLUCOSE WITH SODIUM CHLORIDE (new listing) Inj glucose 2.5% with sodium chloride 0.45%, 500 ml bag	318.78	18	Baxter

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

Changes to Section H Part II – effective 1 December 2024 (continued)

40	GLUCOSE WITH SODIUM CHLORIDE († price)			
	Inj 4% glucose and sodium chloride 0.18%, 1,000 ml bag.....	192.96	12	Baxter
	Inj 5% glucose and sodium chloride 0.45%, 1,000 ml bag.....	192.84	12	Baxter
	Inj 5% glucose and sodium chloride 0.9%, 1,000 ml bag.....	204.84	12	Baxter
40	RINGER'S SOLUTION (new listing)			
	Inj sodium 147 mmol/l with potassium 4 mmol/l, calcium 2.2 mmol/l, chloride 156 mmol/l, 1,000 ml bag	227.52	12	Baxter
41	POTASSIUM CHLORIDE WITH SODIUM CHLORIDE († price)			
	Inj 10 mmol potassium chloride with 0.29% sodium chloride, 100 ml bag	563.52	48	Baxter
	Inj 20 mmol potassium chloride with 0.9% sodium chloride, 1,000 ml bag	192.72	12	Baxter
	Inj 40 mmol potassium chloride with 0.9% sodium chloride, 1,000 ml bag	299.40	12	Baxter
	Inj 40 mmol potassium chloride with 0.9% sodium chloride, 100 ml bag	912.96	48	Baxter
41	SODIUM CHLORIDE († price)			
	Inj 0.45%, 500 ml bag	84.42	18	Baxter
	Inj 3%, 1,000 ml bag	165.84	12	Baxter
	Inj 0.9%, 50 ml bag	124.20	60	Baxter
	Inj 0.9%, 100 ml bag	88.80	48	Baxter
	Inj 0.9%, 250 ml bag	50.40	24	Baxter
	Inj 0.9%, 500 ml bag	27.54	18	Baxter
	Inj 0.9%, 1,000 ml bag	18.96	12	Baxter
42	WATER († price)			
	Inj, 1,000 ml bag	24.12	12	Baxter

CARDIOVASCULAR SYSTEM

45	FLECAINIDE ACETATE (new listing)			
	Inj 10 mg per ml, 15 ml ampoule	102.79	5	Almarytm
49	MANNITOL († price)			
	Inj 10%, 1,000 ml bag	882.84	12	Baxter
	Inj 20%, 500 ml bag	1,296.00	18	Baxter

DERMATOLOGICALS

69	BETAMETHASONE VALERATE († price and addition of PSS)			
	Lotn 0.1% – 5% DV May-25 to 2027	30.00	50 ml	Betnovate

GENITO-URINARY SYSTEM

74	NORETHISTERONE (new listing)			
	Tab 350 mcg.....	12.25	84	Noriday

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

Changes to Section H Part II – effective 1 December 2024 (continued)

INFECTIONS

87	GENTAMICIN SULPHATE (new listing) Inj 40 mg per ml, 2 ml ampoule	36.70	5	Cidomycin P/Free
91	AMOXICILLIN WITH CLAVULANIC ACID (addition of PSS) Grans for oral liq 25 mg with clavulanic acid 6.25 mg per ml – 5% DV May-25 to 2027	8.50	100 ml	Augmentin
99	ISONIAZID (new listing and addition of PSS) → Tab 100 mg – 5% DV May-25 to 2027	327.41	100	Noumed Isoniazid
	Note – PSM tab 100 mg to be delisted from 1 May 2025.			
102	EFAVIRENZ (delisted) → Tab 200 mg	190.15	90	Stocrin
	→ Tab 600 mg	63.38	30	Stocrin
	Note – Stocrin tab 200 mg and 600 mg delisted 1 December 2024.			

MUSCULOSKELETAL SYSTEM

111	HYDROXYCHLOROQUINE SULPHATE (new listing, addition of PSS, amended chemical name and restrictions removed) → Tab 200 mg – 5% DV May-25 to 2027	7.80	100	Ipca-Hydroxychloroquine
	Restricted Initiation Any of the following: 1– Rheumatoid arthritis; or 2– Systemic or discoid lupus erythematosus; or 3– Malaria treatment or suppression; or 4– Relevant dermatological conditions (cutaneous forms of lupus and lichen planus, cutaneous vasculitides and mucosal ulceration); or 5– Sarcoidosis (pulmonary and non-pulmonary). Note – Plaquenil tab 200 mg to be from delisted 1 May 2025.			

NERVOUS SYSTEM

123	FENTANYL (↑ price and addition of PSS) Inj 50 mcg per ml, 2 ml ampoule – 5% DV May-25 to 2027	4.25	10	Boucher and Muir
123	FENTANYL (addition of PSS) Inj 50 mcg per ml, 10 ml ampoule – 5% DV May-25 to 2027	9.41	10	Boucher and Muir

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

Changes to Section H Part II – effective 1 December 2024 (continued)

142 LISDEXAMFETAMINE DIMESILATE (new listing)

→ Cap 30 mg	60.00	30	Vyvanse
→ Cap 50 mg	60.00	30	Vyvanse
→ Cap 70 mg	60.00	30	Vyvanse

Restricted

Initiation

Paediatrician or psychiatrist

Either:

1 Patient is currently on treatment with lisdexamfetamine dimesilate and met all remaining criteria prior to commencing treatment; or

2 All of the following

2.1 ADHD (Attention Deficit and Hyperactivity Disorder); and

2.2 Diagnosed according to DSM-V or ICD 11 criteria; and

2.3 Any of the following:

- 2.3.1 Patient is taking a currently subsidised formulation of atomoxetine or methylphenidate hydrochloride (extended-release) and has not received sufficient benefit or has experienced intolerable side effects; or
- 2.3.2 Patient is taking a currently subsidised formulation of dexamfetamine sulfate (immediate-release) which has not been effective due to significant administration and/or treatment adherence difficulties; or
- 2.3.3 There is significant concern regarding the risk of diversion or abuse of immediate release dexamfetamine sulfate; or
- 2.3.4 Patient is taking a currently subsidised formulation of methylphenidate hydrochloride (immediate-release or sustained release) which has not been effective due to significant administration and/or treatment adherence difficulties; or
- 2.3.5 There is significant concern regarding the risk of diversion or abuse of immediate release methylphenidate hydrochloride; or
- 2.3.6 Both:
 - 2.3.6.1 Patient would have been prescribed a subsidised formulation of methylphenidate hydrochloride (extended-release) but has been unable to access due to supply issues with methylphenidate hydrochloride (extended-release); and
 - 2.3.6.2 Other alternative stimulant presentations (methylphenidate or dexamfetamine) are not appropriate; and
- 2.4 Lisdexamfetamine dimesilate is not to be used in combination with another funded methylphenidate presentation.

142 DEXAMFETAMINE SULFATE (amended restriction criteria – affected criteria shown only)

→ Tab 5 mg – 5% DV Jun-24 to 2025	29.80	100	Noumed Dexamfetamine
---	-------	-----	-----------------------------

Restricted

Initiation – Narcolepsy

Neurologist or respiratory specialist

Re-assessment required after 24 months

Patient suffers from narcolepsy.

~~Continuation – Narcolepsy~~

~~Neurologist or respiratory specialist~~

~~Re-assessment required after 24 months~~

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

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

Changes to Section H Part II – effective 1 December 2024 (continued)

142	METHYLPHENIDATE HYDROCHLORIDE (amended restriction criteria – affected criteria shown only)			
	→ Tab extended-release 18 mg	58.96	30	Concerta
		7.75		Methylphenidate ER - Teva
	→ Tab extended-release 27 mg	65.44	30	Concerta
		11.45		Methylphenidate ER - Teva
	→ Tab extended-release 36 mg	71.93	30	Concerta
		15.50		Methylphenidate ER - Teva
	→ Tab extended-release 54 mg	86.24	30	Concerta
		22.25		Methylphenidate ER - Teva
	→ Tab immediate-release 5 mg	3.20	30	Rubifen
	→ Tab immediate-release 10 mg	3.00	30	Ritalin
				Rubifen
	→ Tab immediate-release 20 mg	7.85	30	Rubifen
	→ Tab sustained-release 20 mg	10.95	30	Rubifen SR
	→ Cap modified-release 10 mg	15.60	30	Ritalin LA
	→ Cap modified-release 20 mg	20.40	30	Ritalin LA
	→ Cap modified-release 30 mg	25.52	30	Ritalin LA
	→ Cap modified-release 40 mg	30.60	30	Ritalin LA

Restricted

Initiation – Narcolepsy (immediate-release and sustained-release formulations)

Neurologist or respiratory specialist

Re-assessment required after 24 months

Patient suffers from narcolepsy.

Continuation – Narcolepsy (immediate-release and sustained-release formulations)

Neurologist or respiratory specialist

Re-assessment required after 24 months

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

143	MODAFINIL (new listing, addition of PSS and amended restriction criteria)			
	→ Tab 100 mg – 5% DV May-25 to 2027	14.27	30	Modafinil Max Health

Restricted

Initiation – Narcolepsy

Neurologist or respiratory specialist

Re-assessment required after 24 months

All of the following:

- 1 The patient has a diagnosis of narcolepsy and has excessive daytime sleepiness associated with narcolepsy occurring almost daily for three months or more; and
- 2 Either:
 - 2.1 The patient has a multiple sleep latency test with a mean sleep latency of less than or equal to 10 minutes and 2 or more sleep onset rapid eye movement periods; or
 - 2.2 The patient has at least one of: cataplexy, sleep paralysis or hypnagogic hallucinations; and
- 3 Either:
 - 3.1 An effective dose of a listed formulation of methylphenidate or dexamphetamine has been trialed and discontinued because of intolerable side effects; or
 - 3.2 Methylphenidate and dexamphetamine are contraindicated.

Continuation – Narcolepsy

Neurologist or respiratory specialist

Re-assessment required after 24 months

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

Note – Modavigil tab 100 mg to be delisted 1 May 2025.

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

Changes to Section H Part II – effective 1 December 2024 (continued)

ONCOLOGY AGENTS AND IMMUNOSUPPRESSANTS

157	CISPLATIN (new listing) Inj 1 mg per ml, 50 ml vial	9.45	1	Cisplatin Accord
160	LENVATINIB (new listing) → Cap 4 mg	3,407.40	30	Lenvima
	→ Cap 10 mg	3,407.40	30	Lenvima
	Restricted			
	Initiation – thyroid cancer			
	<i>Re-assessment required after 6 months</i>			
	Either:			
	1 Patient is currently on treatment with lenvatinib and met all remaining criteria prior to commencing treatment; or			
	2 All of the following:			
	2.1 The patient has locally advanced or metastatic differentiated thyroid cancer; and			
	2.2 Either:			
	2.2.1 Patient must have symptomatic progressive disease prior to treatment; or			
	2.2.2 Patient must have progressive disease at critical anatomical sites with a high risk of morbidity or mortality where local control cannot be achieved by other measures; and			
	2.3 Any of the following:			
	2.3.1 A lesion without iodine uptake in a RAI scan; or			
	2.3.2 Receiving cumulative RAI greater than or equal to 600 mCi; or			
	2.3.3 Experiencing disease progression after a RAI treatment within 12 months; or			
	2.3.4 Experiencing disease progression after two RAI treatments administered within 12 months of each other; and			
	2.4 Patient has thyroid stimulating hormone (TSH) adequately suppressed; and			
	2.5 Patient is not a candidate for radiotherapy with curative intent; and			
	2.6 Surgery is clinically inappropriate; and			
	2.7 Patient has an ECOG performance status of 0-2.			
	Continuation – thyroid cancer			
	<i>Re-assessment required after 6 months</i>			
	There is no evidence of disease progression			
	Initiation – unresectable hepatocellular carcinoma			
	<i>Re-assessment required after 6 months</i>			
	All of the following:			
	1 Patient has unresectable hepatocellular carcinoma; and			
	2 Patient has preserved liver function (Childs-Pugh A); and			
	3 Transarterial chemoembolisation (TACE) is unsuitable; and			
	4 Patient has an ECOG performance status of 0-2; and			
	5 Patient has not received prior systemic therapy for their disease in the palliative setting.			
	Continuation – unresectable hepatocellular carcinoma			
	<i>Re-assessment required after 6 months</i>			
	There is no evidence of disease progression			
	Initiation – renal cell carcinoma			
	<i>Re-assessment required after 4 months</i>			
	Either:			
	1 All of the following:			
	1.1 The patient has metastatic renal cell carcinoma; and			
	1.2 The disease is of predominant clear-cell histology; and			

continued...

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

Changes to Section H Part II – effective 1 December 2024 (continued)

continued...

- 1.3 The patient has documented disease progression following one previous line of treatment; and
- 1.4 The patient has an ECOG performance status of 0-2; and
- 1.5 Lenvatinib is to be used in combination with everolimus; or
- 2 All of the following:
 - 2.1 Patient has received funded treatment with nivolumab for the second line treatment of metastatic renal cell carcinoma; and
 - 2.2 Patient has experienced treatment limiting toxicity from treatment with nivolumab; and
 - 2.3 Lenvatinib is to be used in combination with everolimus; and
 - 2.4 There is no evidence of disease progression.

Continuation – renal cell carcinoma

Re-assessment required after 4 months

There is no evidence of disease progression.

161	PAZOPANIB (new listing and addition of PSS)			
	→ Tab 200 mg – 5% DV May-25 to 2027	172.88	30	Pazopanib Teva
	→ Tab 400 mg – 5% DV May-25 to 2027	464.00	30	Pazopanib Teva
	Note – Votrient tab 200 mg and 400 mg to be delisted from 1 May 2025.			

167	OCTREOTIDE (new listing)			
	Inj 50 mcg per ml, 1 ml vial	27.58	5	Omega
	Inj 500 mcg per ml, 1 ml vial	113.10	5	Omega

245	EVEROLIMUS (amended restriction criteria – new criteria shown only)			
	→ Tab 5 mg.....	4,555.76	30	Afinitor
	→ Tab 10 mg.....	6,512.29	30	Afinitor

Restricted

Initiation – renal cell carcinoma

Re-assessment required after 4 months

Either:

1 All of the following:

- 1.1 The patient has metastatic renal cell carcinoma; and
- 1.2 The disease is of predominant clear-cell histology; and
- 1.3 The patient has documented disease progression following one previous line of treatment; and
- 1.4 The patient has an ECOG performance status of 0-2; and
- 1.5 Everolimus is to be used in combination with lenvatinib; or

2 All of the following:

- 2.1 Patient has received funded treatment with nivolumab for the second line treatment of metastatic renal cell carcinoma; and
- 2.2 Patient has experienced treatment limiting toxicity from treatment with nivolumab; and
- 2.3 Everolimus is to be used in combination with lenvatinib; and
- 2.4 There is no evidence of disease progression.

Continuation – renal cell carcinoma

Re-assessment required after 4 months

There is no evidence of disease progression.

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

Changes to Section H Part II – effective 1 December 2024 (continued)

RESPIRATORY SYSTEM AND ALLERGIES

251	IPRATROPIUM BROMIDE (delisting) Nebuliser soln 250 mcg per ml, 2 ml ampoule.....	11.73	20	Ipratropium IVAX
	Note – Ipratropium IVAX nebuliser soln 250 mcg per ml, 2 ml ampoule to be delisted from 1 February 2025.			
251	IPRATROPIUM BROMIDE (delisting) Nebuliser soln 250 mcg per ml, 2 ml ampoule.....	5.86	10	Pharmascience
	Note – Pharmascience nebuliser soln 250 mcg per ml, 2 ml ampoule to be delisted from 1 May 2025.			
252	SALBUTAMOL WITH IPRATROPIUM BROMIDE (delisting) Nebuliser soln 2.5 mg with ipratropium bromide 0.5 mg per 2.5 ml ampoule.....	11.04	20	Duolin Cipla
	Note – Duolin Cipla nebuliser soln 2.5 mg with ipratropium bromide 0.5 mg per 2.5 ml ampoule to be delisted from 1 April 2025.			
254	SALBUTAMOL (↑ price and addition of PSS) Oral liq 400 mcg per ml – 5% DV May-25 to 2027	50.00	150 ml	Ventolin

VARIOUS

271	METHYLTHIONINIUM CHLORIDE [METHYLENE BLUE] (↑ price) Inj 5 mg per ml, 10 ml ampoule	259.57	5	Proveblue
271	SODIUM CHLORIDE (↑ price) Irrigation soln 0.9%, 1,000 ml bottle.....	19.50	10	Baxter Sodium Chloride 0.9%
272	WATER (↑ price) Irrigation soln, 1,000 ml bottle	19.50	10	Baxter Water for Irrigation

SPECIAL FOODS

293	HIGH PROTEIN ORAL FEED 2.4 KCAL/ML (delisting delayed) Only to be used for patients currently on or would be using Fortisip or Fortisip Multi Fibre → Liquid 14.6 g protein, 25.3 g carbohydrate and 9.6 g fat per 100 ml, 125 ml bottle			<i>e.g. Fortisip Compact Protein</i>
	Note – e.g. Fortisip Compact Protein liquid 14.6 g protein, 25.3 g carbohydrate and 9.6 g fat per 100 ml, 125 ml bottle to be delisted from 1 December 2024 March 2025)			

OPTIONAL PHARMACEUTICALS

307	BETA-HCG LOW SENSITIVITY URINE TEST KIT (new listing) Note: for use in abortion services only. Midstream	16.28	1 test	CheckToP
-----	--	-------	--------	----------

Index

Pharmaceuticals and brands

A	
Afinitor	13
Almarytm	8
AMOXICILLIN WITH CLAVULANIC ACID	9
Augmentin	9
B	
Baxter Glucose 5%	7
Baxter Glucose 10%	7
Baxter Glucose 50%	7
Baxter Sodium Chloride 0.9%	14
Baxter Water for Irrigation	14
BETA-HCG LOW SENSITIVITY URINE TEST KIT	14
BETAMETHASONE VALERATE	8
Betnovate	8
C	
CheckToP	14
Cidomycin P/Free	9
CISPLATIN	12
Cisplatin Accord	12
COMPOUND ELECTROLYTES	7
COMPOUND ELECTROLYTES WITH GLUCOSE [DEXTROSE]	7
COMPOUND SODIUM LACTATE [HARTMANN'S SOLUTION]	7
Concerta	11
D	
DEXAMFETAMINE SULFATE	10
DEXTROSE	7
Duolin Cipla	14
E	
EFAVIRENZ	9
EMPAGLIFLOZIN	6
EMPAGLIFLOZIN WITH METFORMIN HYDROCHLORIDE ..	7
EVEROLIMUS	13
F	
FENTANYL	9
FLECAINIDE ACETATE	8
Fortisip Compact Protein	14
G	
GENTAMICIN SULPHATE	9
GLUCOSE [DEXTROSE]	7
GLUCOSE WITH POTASSIUM CHLORIDE AND SODIUM CHLORIDE	7
GLUCOSE WITH SODIUM CHLORIDE	7, 8
H	
HARTMANN'S SOLUTION	7
HEPARIN SODIUM	7
HIGH PROTEIN ORAL FEED 2.4 KCAL/ML	14
HYDROXYCHLOROQUINE	9
HYDROXYCHLOROQUINE SULPHATE	9
I	
Ipca-Hydroxychloroquine	9
IPRATROPIUM BROMIDE	14
Ipratropium IVAX	14
ISONIAZID	9
J	
Jardiamet	7
Jardiance	6
L	
LENVATINIB	12
Lenvima	12
LISDEXAMFETAMINE DIMESILATE	10
M	
MANNITOL	8
METHYLENE BLUE	14
Methylphenidate ER - Teva	11
METHYLPHENIDATE HYDROCHLORIDE	11
METHYLTHIONIUM CHLORIDE [METHYLENE BLUE] ..	14
MODAFINIL	11
Modafinil Max Health	11
N	
NORETHISTERONE	8
Noriday	8
Noumed Dexamfetamine	10
Noumed Isoniazid	9
O	
OCTREOTIDE	13
P	
PAZOPANIB	13
Pazopanib Teva	13
Plasma-Lyte 148	7
Plasma-Lyte 148 & 5% Glucose	7
POTASSIUM CHLORIDE WITH SODIUM CHLORIDE	8
Proveblue	14
R	
RINGER'S SOLUTION	8
Ritalin	11
Ritalin LA	11
Rubifen	11
Rubifen SR	11
S	
SALBUTAMOL	14
SALBUTAMOL WITH IPRATROPIUM BROMIDE	14
SODIUM CHLORIDE	8, 14
Stocrin	9
V	
Ventolin	14
Vyvanse	10
W	
WATER	8, 14

Pharmaceutical Management Agency
Level 9, 40 Mercer Street, PO Box 10254, Wellington 6143, New Zealand
Phone: 64 4 460 4990 - www.pharmac.govt.nz
Email: enquiry@pharmac.govt.nz

ISSN 1179-3708 (Online)

Te Kāwanatanga o Aotearoa New Zealand Government

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

