

3 July 2009

## Proposal for funding potassium iodate

### *Proposal summary*

PHARMAC is seeking feedback on a proposal to fund an iodine supplement for the treatment of iodine deficiency with effect from 1 September 2009.

Further details of the proposal can be found below and on the following page.

### Feedback sought

PHARMAC welcomes feedback on this proposal. To provide feedback, please submit it in writing by 5 pm on **Friday 17 July 2009** to:

Mike Bignall  
Therapeutic Group Manager  
PHARMAC

Email: [mike.bignall@pharmac.govt.nz](mailto:mike.bignall@pharmac.govt.nz)  
Fax: 04 460 4995  
Post: PO Box 10 254, Wellington 6143

All feedback received before the closing date will be considered by PHARMAC's Board (or Chief Executive acting under delegated authority) prior to making a decision on this proposal.

### Details of the proposal

We have entered into a provisional agreement with Alaron Products Limited to list potassium iodate in Section B of the Pharmaceutical Schedule without any restrictions from 1 September 2009 at the following price and subsidy (ex-manufacturer, excluding GST):

Pharmaceutical	Brand	Form and Strength	Pack Size	Proposed price and subsidy
Potassium Iodate	NeuroKare	Tablet 150 µg	90	\$7.55

NeuroKare is currently being evaluated by Medsafe and the listing would only occur if the product gains Medsafe approval.

The price of NeuroKare would be reduced, and remained at the reduced price based on the volume of potassium iodate that has been subsidised following the listing of NeuroKare on the Pharmaceutical Schedule, as follows (ex-manufacturer, excluding GST):

<b>Trigger Volume (Packs of 90 NeuroKare tablets)</b>	<b>Adjust Price for NeuroKare</b>
165,001	\$6.53 per pack
300,001	\$6.28 per pack
500,001	\$6.03 per pack
750,001	\$5.78 per pack
900,001	\$5.65 per pack
1,150,001	\$5.53 per pack

NeuroKare would have protection from delisting and subsidy reduction until 1 July 2012.

### **Background to the Proposal**

In 2008, the Pharmacology and Therapeutics Advisory Committee (PTAC) reviewed an application from the Ministry of Health for the listing of an iodine supplement on the Pharmaceutical Schedule for the treatment of iodine deficiency in pregnant and breastfeeding women.

The Committee noted that iodine deficiency and goitre was endemic in New Zealand until the iodisation of salt and the use of iodine containing sanitisation agents by the dairy industry. However, the Committee also noted that since the early 1990's iodine dietary intake has reduced, presumably due to a reduction in salt intake and the switch to non-iodine containing agents by the dairy industry.

The Committee noted several New Zealand studies which suggest that New Zealand pregnant and breastfeeding women and their infants are at least mildly if not moderately iodine deficient.

The Committee noted that the consequences of mild-to-moderate iodine deficiency in pregnancy are not as clear as those of severe iodine deficiency; however, they are likely to include sub-optimal neurological development and delayed psychomotor development.

The Committee considered that the current salt iodisation programme was not sufficient for pregnant and breastfeeding women and despite the upcoming mandatory fortification of bread with iodine from 1 September 2009, pregnant and breastfeeding women and their infants could still be at risk of iodine deficiency.

PTAC recommended that a tablet containing an iodine dose of 150 mcg to 200 mcg be listed on the Pharmaceutical Schedule with a high priority for pregnant and breast feeding women.

We estimate that approximately 65,000 people may receive funding of iodine should this proposal be approved.