

Clinicians' Newsletter



*“Make life easier,
always think generically”*

September 2011

Legislation changes impact on the Pharmaceutical Schedule

The Medicines Amendment Regulations 2011 and the Misuse of Drugs Amendment Act 2011 were gazetted recently which resulted in the following two changes to the Pharmaceutical Schedule.

1. Brand substitution

Pharmacists may now substitute an alternative brand of a prescribed medicine provided:

- There are no clinical reasons why substitution should not occur
- The prescriber has not marked the prescription with a statement such as “no brand substitution permitted”, and
- The pharmacist records details of the brand substitution on the prescription and informs the patient of the change of brand.

This means that if a clinician writes a prescription using a brand name, the pharmacist may substitute an alternative brand at their discretion. This will particularly apply where a script item is for an unsubsidised brand but an alternative fully subsidised brand is available. It is still preferable to write scripts using generic names wherever possible.

2. Thalidomide reclassification

Thalidomide has been reclassified as a prescription medicine. Prescriptions for thalidomide should now be on a standard prescription form and no longer needs to be prescribed on the triplicate controlled drug prescription form. This change makes no difference to access to the medication which will still have to be written by the appropriate specialist and dispensed through a DHB hospital pharmacy.

Brand Changes

Candesartan – Candestar brand now listed

A new brand of candesartan will be subsidised from 1 September 2011. Candestar 4 mg, 8 mg, 16 mg and 32 mg tablets will be subsidised subject to the same Special Authority and maximum daily dose restrictions as the Atacand brand of candesartan.

The Atacand brand will continue to be listed in Section B of the Pharmaceutical Schedule subject to its current subsidy restrictions.

Widening of Access

Generic brands of olanzapine listed and removal of Special Authorities

There are now three brands of olanzapine (Dr Reddy's Olanzapine, Olanzine, and Zyprexa), therefore if these drugs are prescribed generically the fully funded option will always be dispensed.

All brands of olanzapine listed in the Pharmaceutical Schedule will be accessible without a Special Authority for subsidy as the Special Authority for Subsidy for the Zyprexa brand of olanzapine tablets and the Zyprexa Zydis brand of olanzapine wafers is to be removed from 1 September 2011.

Note that the subsidy for all strengths of Zyprexa tablets and Zyprexa Zydis will be reduced from 1 September 2011 to the same level as the other funded brands of olanzapine and will therefore incur a manufacturer's part charge from 1 September 2011. This is because Eli Lilly has advised that it will not be decreasing the price of Zyprexa and Zyprexa Zydis.

Budesonide 3 mg capsules – wider access

Budesonide access will be widened to include patients with microscopic colitis, patients with Crohn's disease who have psychiatric problems or with relapse during pregnancy, and patients with Gut Graft vs Host disease (GVHD). The Special Authority approval period has also been lengthened from 3 to 6 months. The Special Authority that applies to budesonide 3 mg capsules (Entocort CIR) will be amended from 1 September 2011.

The restriction that permitted patients to have only 1 prior approval in the last year will be removed from 1 September 2011.

Restriction of access

Discontinuation of Ensure powder 400 g pack and Ensure Plus 237 ml can coffee latte flavour

There will be discontinuation of all flavours of the 400 g pack size of Ensure powder from 1 March 2012; however, Ensure powder 900 g pack size in chocolate and vanilla will remain available and fully subsidised via Special Authority. The 400 g pack size will be delisted from the Pharmaceutical Schedule as Abbott Nutrition is discontinuing this line.

Ensure Plus 237 ml can, coffee latte flavour, has also been discontinued by Abbott Nutrition and will be delisted from the Pharmaceutical Schedule from 1 March 2012.

Other Changes

Litak injection delist is now revoked

Litak (cladribine) 2 mg per ml, 5 ml injection was to be delisted from the Pharmaceutical Schedule from 1 September 2011. This decision has now been revoked to cover an out-of-stock on Leustatin injection 1 mg per ml, 10 ml. Litak will continue to be subsidised under its current subsidy restrictions of PCT only – Specialist. Litak is an unapproved medicine in New Zealand and is supplied under Section 29 of the Medicines Act 1981.

Items of Interest

Dantrolene sodium (Dantrium) funding for certain groups of patients

Dantrolene sodium 25mg and 50mg capsules are registered for use in controlling the manifestations of clinical spasticity. Dantrolene sodium has a patient part charge as a result of a supplier price increase, and subsequent clinical advice that most patients would be able to be switched to an alternative, fully funded muscle relaxant, baclofen.

However, we have become aware of a few patients with severe spasticity and were previously well-controlled on dantrolene sodium, who are not able to be controlled on maximal tolerated doses of baclofen alone. In these specific circumstances, we will consider continuing the full subsidisation of dantrolene for these patients. To request consideration of full subsidy for a patient, you should write to the Medical Director, PHARMAC. In your letter, please provide a brief review of clinical situation as described above as well as the following information:

- patient details
- the maximum dosage of dantrolene that your patient has been on and now requires
- the dosage of baclofen that has been trialled by your patient and outcome of this trial
- a pharmacy selected by your patient to provide supplies of dantrolene

Diabetes Nurse Prescribers' prescriptions

The demonstration site project for diabetes nurse prescribing moves into its evaluation phase after September 2011. However, the twelve named Diabetes Nurse Prescribers will continue to be able to write subsidised prescriptions after September. They will continue to prescribe under the collaborative framework with Diabetes Specialists. The current list of medicines they are able to prescribe will not change. We will publish further information on the result of the evaluation as it comes to hand.

Named Specialist for antiretrovirals

Below is a list of currently approved named Specialists that the Ministry of Health has approved to prescribe HIV antiretroviral agents in New Zealand

Auckland

Dr Sunita Azariah
 Dr Emma Best
 Dr Simon Briggs
 Dr Rod Ellis-Pegler
 Dr Rick Franklin
 Dr Rupert Handy
 Dr Jacqueline Hilton
 Dr David Holland
 Dr Joan Ingram
 Prof. Diana Lennon
 Dr Mitzi Nisbet
 Dr Nicky Perkins
 Dr Murray Reid
 Dr Stephen Ritchie
 Dr Sally Roberts
 Dr Simon Rowley
 Dr Mark Thomas
 Dr Leslie Voss
 Dr Liz Wilson

Hamilton

Dr Graeme Mills
 Dr Jane Morgan

Tauranga

Dr Massimo Giola
 Dr Katherine Grimwade

Napier

Dr Andrew Burns
 Dr Richard Meech

Palmerston North

Dr Anne Robertson

Wellington

Dr Tim Blackmore
 Dr Nigel Raymond
 Dr Richard Steele

Nelson

Dr Richard Everts

Christchurch

Dr Stephen Chambers
 Dr Sarah Metcalf
 Dr Alan Pithie
 Dr Tony Walls

Dunedin

Dr Geoffery Clover
 Dr Igor Melnychuk





PHARMAC Seminar Series – Upcoming Seminars

The PHARMAC Seminar Series provides high quality educational seminars for a range of health professionals. The seminars are held in Wellington and the cost to attend is \$100 + GST. PHARMAC covers the cost of travel, including flights, to and from the seminar and provides catering on the day.

For further information on the seminars below, and to register for a place, head to our website: www.seminarseries.pharmac.govt.nz



inPharmation

PHARMAC publishes a quarterly email newsletter, inPharmation, that includes news and updates on developments around PHARMAC and pharmaceutical issues. If you would like to receive inPharmation, contact simon.english@pharmac.govt.nz.

Dates (2011)	Topic	Description
2 December	Diabetes, Pre-Eclampsia and Pregnancy Complications	This seminar is a repeat and is aimed towards LMC practitioners or practitioners providing care to women during pregnancy.
5 December	Adolescent Health	All health workers involved in caring for young people, but especially relevant for GPs, practice nurses and counsellors working in the community. (This is a repeat seminar).
7 December	Rheumatic Fever (Part II – Invitation only)	Please note we will be identifying and inviting registrants for these seminars from the relevant high risk areas.

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Special Authority Queries: 0800 243 666
General Questions: 0800 66 00 50 (9am – 5pm Monday to Friday)
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Inpharmation newsletter:
<http://www.pharmac.govt.nz/patients/ourviews/inpharmation>.

Newsletter feedback: email susan.haniel@pharmac.govt.nz

Please note this is not a complete reference to all changes occurring from 1 September 2011, for the full reference; please consult your Update to the Pharmaceutical Schedule.

