

**New Zealand
Pharmaceutical Schedule**

UPDATE

Effective 1 August 2002

**Cumulative Update for May,
June, July & August 2002**



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Summary of PHARMAC decisions

EFFECTIVE 1 AUGUST 2002

New Listing (page 15)

- Naproxen long-acting tablets 750 mg (Naprosyn SR 750) and 1000 mg (Naprosyn SR 1000) – temporary listing of 28 tablet pack size
- Resource Thicken Up 250 g OP – replaces 227 g pack

Increased subsidy (page 26)

- Amoxicillin clavulanate tablets 500/125 mg and oral liquid 125/31.25 mg and 250/62.5 mg per 5 ml (Synermox)
- Colchicine tablets 600 µg (Abbott)

Decreased subsidy (page 25–26)

- Bromocriptine mesylate tablets 2.5 mg and 10 mg (Alpha-Bromocriptine)
- Clobetasol propionate scalp application 0.05 % (Dermol)
- Clonidine tablets 25 µg (Dixarit)
- Clonidine tablets 150 µg (Catapres)
- Ethynodiol diacetate tablets 500 µg (Femulen)
- Glibenclamide tablets 2.5 mg and 5 mg (Gliben)
- Ipratropium bromide aqueous nasal spray 0.03 % (Atrovent Nasal Aqueous)
- Morphine hydrochloride oral liquid 1 mg per ml, 2 mg per ml, 5 mg per ml and 10 mg per ml (RA- Morph)
- Olsalazine capsules 250 mg and tablets 500 mg (Dipentum)
- Prednisone tablets 1 mg, 2.5 mg, 5 mg and 20 mg (Apo-Prednisone)
- Sulphasalazine tablets 500 mg (Salazopyrin) and EC tablets 500 mg (Salazopyrin EN)

Colchicine tablets to be fully funded from 1 August 2002

Colchicine is currently the only treatment available on the Pharmaceutical Schedule for patients with acute gout who cannot use non-steroidal anti-inflammatory drugs (NSAIDs). Following a series of price increases over the last few years, colchicine has not been fully subsidised. Following discussions with clinicians, PHARMAC has increased the subsidy to enable colchicine tablets to become fully subsidised from 1 August 2002.

Continued funding for Green Prescriptions

Following the success of the Green Prescription programme over the last three years, PHARMAC has decided to continue funding for the programme.

The initiative, jointly funded by PHARMAC and SPARC (Sport and Recreation NZ) aims to encourage people to improve their health by being more active, in consultation with their doctor.

Under the programme, Regional Sports Trusts (RSTs) contact patients who have been given Green Prescriptions and establish an activity programme for them. The RSTs usually contact the patient three times over a three-month period with support and follow up. Contact can be ongoing if the patient is given a further green prescription.

Surveys conducted over the last three years show more than half of people remain more active six to eight months after receiving their Green Prescription than they were before. More than 70% of patients also report noticing health changes since starting on a Green Prescription.

More detailed research on the effects of the programme, both on people's health and on pharmaceutical usage, is being undertaken in the three-year Heart, Health and Activity study. First results from this study are expected later this year.

Until now, the programme has been solely for adults, however following requests from clinicians, SPARC will shortly pilot a Green Prescription programme for children.

Further information can be obtained from SPARC's website: www.sparc.org.nz

Section 29 Medicines

Section 29 of the Medicines Act 1981 allows for the supply of unregistered medicines to a medical practitioner for use by a named patient under their care. The following details must be notified by the importer or distributor of the unregistered medicine;

- Name and dose form of medicine
- Month and year of supply
- Name and address of supplier.

These details must be notified to Medsafe at the end of every month in which the medicine has been supplied. Patient details must be kept by the supplier, including patient and prescriber name, name of medicine, dose form and date. Pharmacists dispensing unregistered medicines are required to supply the New Zealand importer/ distributor with these patient details.

Some of the medicines currently available under Section 29 are:

- Dapsone tablets 100 mg, available from Pacific Pharmaceuticals.
- Propylthiouracil tablets 50 mg, available from Health Support Limited.
- Phenylbutazone tablets 100 mg, available from Alpha Pharmaceuticals

Unregistered medicines are not funded via the Pharmaceutical Schedule. Funding may be available in some cases through Exceptional Circumstances.

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Exceptional Circumstances Panel
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Expiry date for AFT phenoxymethylpenicillin oral liquid now 10 days

We have been advised by AFT Pharmaceuticals that they have received Medsafe approval to extend the expiry date of reconstituted phenoxymethylpenicillin oral liquid. The reconstituted liquid is now approved as stable for 10 days, when refrigerated and protected from light.

Methadone injection

Baxter Health Care Ltd has advised PHARMAC that it is temporarily unable to supply its usual brand of methadone injection 10 mg per ml. In order to maintain supply for patients, Baxter has imported the Martindale brand of methadone injection from the United Kingdom. However, this brand is not registered in New Zealand and is not listed on the Pharmaceutical Schedule.

PHARMAC is going to utilise the Exceptional Circumstances Scheme to enable the Martindale product to be supplied, fully funded, to patients until the DBL product is again available (expected to be late August).

After discussions with the Pharmacy Guild, Baxter, and HealthPAC, the following arrangements have been made:

1. Pharmacists will be supplied the Martindale product directly from Baxter (freephone 0800 229 837). When placing an order, Baxter will require both doctor and patient details to comply with Section 29. Pharmacists will be charged for the product by their usual wholesaler. The Martindale product is in a pack size of 10 (pharmacode 2084783) and the product will be supplied at the same price per ampoule.
2. In order to claim reimbursement for each dispensing of the product, pharmacists will need to obtain an Exceptional Circumstances number. Pharmacists will need to complete an EC application form, and fax it to the EC Coordinator. Pharmacists who have dispensed methadone injection in the last year will receive an EC form by post. If you require a form and have not received one, please contact PHARMAC on 0800 66 00 50.
3. The EC Coordinator will check and approve the application form within 48 hours or sooner, and pass the application to HealthPAC who will assign a unique EC number.
4. HealthPAC will then advise the pharmacist of the EC number.
5. Pharmacists will then forward their claim with the EC number to HealthPAC for reimbursement.

We acknowledge that these short term arrangements will inevitably create additional work for all parties, and appreciate the cooperation of pharmacists in the interests of patients.

Sole Supply expiry

On 30 June each year, the Sole Supply status for a number of products expires. Products for which Sole Supply status expired on 30 June 2002 were identified in the July 2002 Update to the Pharmaceutical Schedule. Please note the following points:

- These products will continue to be subsidised on the Pharmaceutical Schedule until such time as PHARMAC notifies otherwise.
- Expiry of sole supply status does not mean that other brands (brands not listed on the Pharmaceutical Schedule) will be subsidised from that date.
- Only brands listed on the Pharmaceutical Schedule will be subsidised.
- Any changes to subsidy or subsidised brands will be provided in the usual way via the Pharmaceutical Schedule Update

Tender results

Subsidy changes

Chemical Name	Presentation; Pack size	Current subsidy	New tender subsidy	Date of new subsidy	Sole Supply brand (and supplier)	Date of sole supply	Brands affected by reference pricing and delisting
Amitriptyline	50 mg tablets; 100 tablets	\$6.98	\$4.75	1 September 2002	Amitrip (Pacific)	1 December 2002	
Apomorphine Hydrochloride	Inj 10 mg per ml, 1 ml; 5 injections	\$50.43	\$50.43	1 September 2002	Baxter (Baxter)	1 December 2002	
Atropine Sulphate	Inj 400 µg 1 ml; 50 injections	\$34.80	\$29.95	1 September 2002	Atropine sulphate (AstraZeneca)	1 December 2002	
Atropine Sulphate	Inj 600 µg 1 ml; 50 injections	\$28.40	\$24.00	1 September 2002	Atropine sulphate (AstraZeneca)	1 December 2002	
Atropine Sulphate	Inj 1200 µg 1 ml; 50 injections	\$34.30	\$29.95	1 September 2002	Atropine sulphate (AstraZeneca)	1 December 2002	
Atropine Sulphate	Eye drops 0.5%; 15 ml bottle	\$4.02	\$4.02	1 September 2002	Atropt Sigma	1 December 2002	
Atropine Sulphate	Eye drops 1.0%; 15 ml bottle	\$4.02	\$4.02	1 September 2002	Atropt Sigma	1 December 2002	
Cefamandole Nafate	Inj 1 g; 10 vials	\$72.00	\$43.00	1 September 2002	Mandol (Eli Lilly)	1 December 2002	Baxter
Ceftriaxone Sodium	Inj 500 mg; 5 vials	\$88.01	\$39.60	1 September 2002	Ceftriaxone Injection (Novartis)	1 December 2002	Rocephin
Ceftriaxone Sodium	Inj 1 g; 5 vials	\$169.66	\$62.50	1 September 2002	Ceftriaxone Injection (Novartis)	1 December 2002	Rocephin IM and IV
Cefuroxime Sodium	Inj 750 mg; 5 vials	\$30.84	\$24.00	1 September 2002	Zinacef (GSK)	1 December 2002	Baxter
Cephalexin Monohydrate	500 mg tablets; 20 tablets	\$13.63	\$10.90	1 September 2002	Keflex (Eli Lilly)	1 December 2002	
Cephalexin Monohydrate	250 mg capsules; 20 capsules	\$6.91	\$6.00	1 September 2002	Keflex (Eli Lilly)	1 December 2002	
Cephalexin Monohydrate	125 mg per 5 ml granules for oral liquid 100 ml	\$8.24	\$7.00	1 September 2002	Keflex (Eli Lilly)	1 December 2002	
Cephalexin Monohydrate	250 mg per 5 ml granules for oral liquid 100 ml	\$11.48	\$9.50	1 September 2002	Keflex (Eli Lilly)	1 December 2002	
Cephazolin Sodium	Inj 500 mg; 1 vial	\$3.38	\$2.03	1 September 2002	Cephazolin Injection (Novartis)	1 December 2002	Baxter Kefzol
Cephazolin Sodium	Inj 1 g; 1 vial	\$6.94	\$4.16	1 September 2002	Cephazolin Injection (Novartis)	1 December 2002	Baxter Kefzol
Charcoal	50 g per 300 ml oral liquids; 300 ml	\$20.00	\$19.95	1 September 2002	Carbosorb (Pharmacia)	1 December 2002	

All decisions related to news items are effective from 1 August unless otherwise indicated

Chemical Name	Presentation; Pack size	Current subsidy	New tender subsidy	Date of new subsidy	Sole Supply brand (and supplier)	Date of sole supply	Brands affected by reference pricing and delisting
Chloramphenicol	0.5% eye drops; 10 ml bottle	\$1.10	\$1.02	1 September 2002	Chlorsig (Sigma)	1 December 2002	Isopto-Fenicol
Chloramphenicol	Eye oint 1%; 4 g tube	\$1.85	\$1.80	1 September 2002	Chlorsig (Sigma)	1 December 2002	
Clotrimazole	Crn 1%; 20 g tube	\$1.00	\$0.80	1 September 2002	Clocreme (Pacific)	1 December 2002	AFT Canesten
Co-Trimoxazole	Oral liq sugar-free trimethoprim 40 mg and sulphamethoxazole 200 mg per 5 ml; 500 ml	\$7.95	\$7.20	1 September 2002	Trisul Paediatric Sugar Free (Pacific)	1 December 2002	
Cyclophosphamide	50 mg tablets; 50 tablets	\$26.00	\$25.71	1 September 2002	Cycloblastin (Pharmacia)	1 December 2002	
Dicyclomine Hydrochloride	10 mg tablets; 100 tablets	\$4.81	\$4.95	1 September 2002	Merbentyl (Sigma)	1 December 2002	
Diphenoxylate Hydrochloride with Atropine Sulphate	2.5 mg tablets with 25 µg atropine sulphate; 100 tablets	\$6.68	\$6.00	1 September 2002	Diastop (Pacific)	1 December 2002	Lomotil
Erythromycin Ethyl Succinate	200 mg per 5 ml granules for oral liquid; 100 ml	\$2.75	\$2.75	1 September 2002	E-Mycin (Pacific)	1 December 2002	
Erythromycin Ethyl Succinate	400 mg per 5 ml granules for oral liquid; 100 ml	\$4.99	\$4.99	1 September 2002	E-Mycin (Pacific)	1 December 2002	
Erythromycin Ethyl Succinate	400 mg tablets 100 tablets	\$14.99	\$14.99	1 September 2002	E-Mycin (Pacific)	1 December 2002	
Folic Acid	50 µg per ml oral liquid; 25 ml	\$18.50	\$20.05	1 September 2002	Folic Acid (Biomed)	1 December 2002	
Heparinised Saline	Inj 10 iu per ml, 5 ml; 50 injections	\$23.00	\$20.00	1 September 2002	Heparinised Saline (AstraZeneca)	1 December 2002	Pharmacia Baxter
Hypromellose	Eye drops 0.3%; 15 ml bottle	\$2.86	\$2.65	1 September 2002	Poly-Tears (Pacific)	1 December 2002	Tears Naturale
Magnesium Sulphate	Inj 49.3%; 50 injections	\$161.40	\$161.40	1 September 2002	Baxter (Baxter)	1 December 2002	
Medroxyprogesterone Acetate	100 mg tablets; 100 tablets	\$130.33	\$104.26	1 September 2002	Provera HD (Pharmacia)	1 December 2002	
Menadione Sodium Bisulphite	10 mg tablets; 100 tablets	\$4.75	\$4.75	1 September 2002	K Thrombin (Sigma)	1 December 2002	
Methotrexate	10 mg tablets; 50 tablets	\$41.00	\$40.93	1 September 2002	Methoblastin (Pharmacia)	1 December 2002	

All decisions related to news items are effective from 1 August unless otherwise indicated

Chemical Name	Presentation; Pack size	Current subsidy	New tender subsidy	Date of new subsidy	Sole Supply brand (and supplier)	Date of sole supply	Brands affected by reference pricing and delisting
Methotrexate	2.5 mg tablets; 30 tablets	\$6.15	\$5.80	1 September 2002	Methoblastin (Pharmacia)	1 December 2002	Baxter Ledertrexate
Metoclopramide Hydrochloride	5 mg tablets with 500 mg paracetamol; 60 tablets	\$7.00	\$3.25	1 September 2002	Paramax (GSK)	1 December 2002	
Miconazole Nitrate	Crm 2%; 20 g tube	\$1.00	\$0.90	1 September 2002	Micreme (Pacific)	1 December 2002	AFT
Midazolam	Inj 1 mg per ml, 5 ml; 10 Vials	\$22.60	\$15.00	1 September 2002	Hypnovel (Roche)	1 December 2002	Baxter
Midazolam	Inj 5 mg per ml, 3 ml; 5 Vials	\$24.25	\$16.00	1 September 2002	Hypnovel (Roche)	1 December 2002	Baxter
Misoprostol	200 µg tablets; 120 tablets	\$52.70	\$52.70	1 September 2002	Cytotec (Pharmacia)	1 December 2002	
Morphine Tartrate	Inj 80 mg per ml, 1.5 ml; 5 injections	\$20.20	\$20.20	1 September 2002	Baxter (Baxter)	1 December 2002	
Morphine Tartrate	Inj 80 mg per ml 5 ml; 5 injections	\$67.37	\$67.37	1 September 2002	Baxter (Baxter)	1 December 2002	
Naphazoline Hydrochloride	Eye drops 0.1%; 15 ml bottle	\$4.20	\$4.15	1 September 2002	Naphcon Forte (Pacific)	1 December 2002	Albalon
Nortriptyline Hydrochloride	25 mg tablets; 500 tablets	\$46.85	\$30.00	1 September 2002	Norpress (Pacific)	1 December 2002	Allegron
Nystatin	Oral liq 100,000 u per ml; 24 ml	\$4.90	\$4.28	1 September 2002	Mycostatin (Bristol-Myers)	1 December 2002	Nilstat
Oily Phenol	Inj 5%, 5 ml; 5 injections	\$71.71	\$71.71	1 September 2002	Baxter (Baxter)	1 December 2002	
Paracetamol	125 mg Suppositories; 20 Suppositories	\$3.36	\$4.51	1 September 2002	Panadol (GSK)	1 December 2002	
Paracetamol	250 mg Suppositories; 20 Suppositories	\$6.20	\$9.38	1 September 2002	Panadol (GSK)	1 December 2002	
Potassium Chloride	Inj 75 mg per ml, 10 ml; 50 injections	\$30.16	\$26.00	1 September 2002	Potassium Chloride (AstraZeneca)	1 December 2002	Pharmacia
Potassium Chloride	Inj 150 mg per ml, 10 ml; 50 injections	\$30.50	\$26.00	1 September 2002	Potassium Chloride (AstraZeneca)	1 December 2002	Pharmacia
Procaine Penicillin	Inj 1.5 mega u; 5 injections	\$47.60	\$47.60	1 September 2002	Cilicaine (Sigma) 2002	1 December 2002	
Sodium Acid Phosphate	16% enema with 8% sodium phosphate; 1 enema	\$2.50	\$2.50	1 September 2002	Baxter (Baxter) 2002	1 December 2002	

All decisions related to news items are effective from 1 August unless otherwise indicated

Chemical Name	Presentation; Pack size	Current subsidy	New tender subsidy	Date of new subsidy	Sole Supply brand (and supplier)	Date of sole supply	Brands affected by reference pricing and delisting
Spironolactone	5 mg per ml oral liquid; 25 ml bottle	\$23.50	\$25.50	1 September 2002	Spironolactone (Biomed)	1 December 2002	
Sulphacetamide Sodium	Eye drops 10%; 15 ml bottle	\$4.13	\$3.60	1 September 2002	Acetopt (Sigma)	1 December 2002	Bleph 10
Trimethoprim	300 mg tablets; 50 tablets	\$6.50	\$6.50	1 September 2002	TMP (Pacific)	1 December 2002	
Urea	Crn 10%; 100 g tube	\$2.96	\$2.52	1 September 2002	Nutraplus (Pacific) 2002	1 December 2002	Aquacare HP Calmurid
Zinc and Castor Oil	Ointment BP; 500 g	\$6.55	\$6.20	1 September 2002	Sigma Zinc and Castor Oil Cream (Sigma)	1 December 2002	Douglas IPW Orion PSM

Note: Not all tender subsidies have changed. These products have been included as they will have Sole Supply status from 1 December 2002.

Sole Supply changes

Chemical	Presentation	Pack size	New tender subsidy	Date of new subsidy and reference pricing	Sole supply brand (and supplier)	Date of sole supply and delisting of affected brands	Brands to be delisted
Ipratropium Bromide	Nebuliser solution, 500 µg per 2 ml	20	\$7.55	1 June 2002	Ipra 250 (Pacific)	1 September 2002	Steri-Nebs
Ipratropium Bromide	Nebuliser solution, 250 µg per 1 ml or 2 ml	20	\$5.90	1 June 2002	Ipra 500 (Pacific)	1 September 2002	Steri-Nebs

All decisions related to news items are effective from 1 August unless otherwise indicated

Looking forward

This section is designed to alert both pharmacists and prescribers to possible future changes. It may assist pharmacists to manage stock levels and keep prescribers up-to-date with proposals to change the Pharmaceutical Schedule.

Proposals under consideration

The following areas of health care funding are currently under consideration. The PHARMAC Board will be reviewing these proposals, and the decisions taken will be published in future Updates. The dates represented below are the earliest date that these proposals may be implemented.

Possible decisions for implementation 1 September 2002

- Methadone oral liquid 2 mg per ml, 5 mg per ml and 10 mg per ml (Biodone, Biodone Forte, Biodone Extra Forte) – subsidy increase
- Docusate sodium with sennosides tablets (Coloxyl with senna, Laxsol) – subsidy reduction
- Felodipine long-acting tablets 2.5 mg, 5 mg and 10 mg (Plendil) – subsidy reduction
- Nifedipine long-acting tablets 10 mg and 60 mg and amlodipine tablets 10 mg – subsidy reduction
- Ondansetron tablets and tropisetron capsules – increased access
- Lansoprazole capsules (Solox) – new listing
- Lansoprazole capsules (Zoton) – removal of Special Authority and subsidy reduction
- Pantoprazole tablets (Somac) – subsidy reduction
- Mycophenolate mofetil tablets 500 mg (Cellcept) – new listing
- Interferon alpha-2a (Roferon-A) – new listing
- Levonorgestrel 750 µg tablets (Postinor-2) – subsidy and price increase
- Testosterone enanthate 250 mg long-acting injection (Primoteston Depot) – price and subsidy decrease
- Buspirone tablets 5 mg and 10 mg (Pacific) – new listing
- Fluoxetine 20 mg dispersible tablets (Pacific) – new listing

All decisions related to news items are effective from 1 August unless otherwise indicated

Sole Supply Products – cumulative to August 2002

Generic Name	Presentation	Brand Name	Expiry Date*
Acipimox	Cap 250 mg	Olbetam	2004
Acitretin	Cap 10 mg & 25 mg	Neotigason	2004
Aciclovir	Tab 200 mg Tab 400 mg & 800 mg Tab dispersible 200 mg, 400 mg & 800 mg	Apo-Aciclovir Alpha-Aciclovir Acicvir	2003
Allopurinol	Tab 100 mg & 300 mg	Progout	2003
Amiloride with hydrochlorothiazide	Tab 5 mg with hydrochlorothiazide 50 mg	Amizide	2003
Amoxicillin	Cap 250 mg & 500 mg Grans for oral liq 125 mg per 5 ml & 250 mg per 5 ml	Ospamox Ospamox Ospamox	2003
Atenolol	Tab 50 mg & 100 mg	Loten	2003
Baclofen	Tab 10 mg	Pacifen	2003
Beclomethasone dipropionate	Metered aqueous nasal spray, 50 µg per dose & 100 µg per dose	Alanase Aqueous	2003
Betahistine dihydrochloride	Tab 16 mg	Vergo	2003
Bisacodyl	Suppos 10 mg	Fleet	2004
Budesonide	Metered aqueous nasal spray, 50 µg per dose & 100 µg per dose	Butacort Aqueous	2003
Captopril	Tab 12.5 mg, 25 mg & 50 mg	Captohexal	2004
Cefaclor monohydrate	Cap 250 mg Grans for oral liq 125 mg per 5 ml	Clorotir Clorotir	2004
Celiprolol	Tab 200 mg	Celol	2004
Clobetasol propionate	Crn 0.05% Oint 0.05%	Dermol Dermol	2003
Clomipramine hydrochloride	Tab 25 mg	Clopress	2003
Clotrimazole	Vaginal crm 1% with applicators Vaginal crm 2% with applicators Pessaries 100 mg with applicator Pessary 500 mg with applicator	Clocreme Clotrimaderm 2% Clotrihexal Clotrihexal	2004
Colestipol hydrochloride	Sachets 5 g	Colestid	2004
Cyclizine lactate	Inj 50 mg per ml, 1 ml	Valoid	2004
Cyproterone acetate	Tab 50 mg	Siterone	2003
Cyproterone acetate with ethinyloestradiol	Tab 2 mg with ethinyloestradiol 35 µg and 7 inert tabs	Estelle 35	2004
Danthron with poloxamer	Oral liq 25 mg with poloxamer 200 mg per 5 ml Oral liq 75 mg with poloxamer 1g per 5 ml	Conthram Conthram Forte	2004
Desferrioxamine mesylate	Inj 500 mg per 10 ml vial	Desferal	2004
Diazepam	Tab 5 mg & 10 mg	Pro-Pam	2003
Diltiazem hydrochloride	Tab 30 mg & 60 mg Cap long-acting 120 mg	Dilzem Dilzem SR	2004

*Expiry date of the Sole Supply period is 30 June of the year indicated.

Sole Supply Products – cumulative to August 2002

Generic Name	Presentation	Brand Name	Expiry Date*
Doxazosin mesylate	Tab 2 mg & 4 mg	Dosan	2004
Doxycycline hydrochloride	Tab 100 mg	Doxine	2003
Enalapril	Tab 5 mg, 10 mg & 20 mg	Enahexal	2004
Erythromycin estolate	Tab 500 mg	Eromycin	2004
Etidronate disodium	Tab 200 mg	Etidrate	2003
Etoposide	Cap 50 mg & 100 mg	Vepesid	2004
Flucloxacillin sodium	Cap 250 mg & 500 mg Inj 250 mg, 500 mg & 1 g	Staphlex Flucloxin	2003
Fluorouracil sodium	Inj 500 mg per 10 ml Inj 500 mg per 20 ml	Baxter Baxter	2004
Fluoxetine hydrochloride	Cap 20 mg	Fluox	2004
Folic acid	Tab 5 mg	Apo-Folic Acid	2003
Frusemide	Tab 40 mg Tab 500 mg	Diurin 40 Diurin	2003
Glyceryl trinitrate	TDDS 5 mg & TDDS 10 mg	Nitroderm TTS	2004
Hydrocortisone	Inj 50 mg per ml, 2 ml Inj 125 mg per ml, 2 ml Inj 125 mg per ml, 4 ml	Solu-Cortef Solu-Cortef Solu-Cortef	2003
Hydrocortisone with cinchocaine	Oint 5 mg with cinchocaine hydrochloride 5 mg per g Suppos 5 mg with cinchocaine hydrochloride 5 mg per g	Proctosedyl Proctosedyl	2004
Hydrocortisone with miconazole	Crn 1% with miconazole nitrate 2%	Micreme H	2004
Hydrocortisone with wool fat and mineral oil	Lotn 1% with wool fat hydrous 3% and mineral oil	DP Lotn HC	2003
Hydroxyurea	Cap 500 mg	Hydrea	2004
Hypromellose	Eye drops 0.5% Eye drops 1%	Methopt Methopt Forte	2003
Indapamide	Tab 2.5 mg	Naplin	2003
Isosorbide mononitrate	Tab 20 mg Tab long-acting 60 mg	Ismo 20 Duride	2003
Lactulose	Oral liq 10 g per 15 ml	Lactulose	2003
Loperamide hydrochloride	Cap 2 mg	Dicap	2004
Loratadine	Tab 10 mg	Lora-tabs	2004
Lorazepam	Tab 1 mg & 2.5 mg	Lorapam	2003
Medroxyprogesterone acetate	Inj 150 mg per ml, 1 ml syringe	Depo-Provera	2004
Megestrol acetate	Tab 160 mg	Megace	2004
Metformin hydrochloride	Tab 500 mg & 850 mg	Metomin	2003
Methotrexate	Inj 5 mg per 2 ml vial Inj 20 mg per 2 ml vial Inj 50 mg per 2 ml vial Inj 100 mg per 4 ml vial	Baxter Baxter Baxter Baxter	2004

*Expiry date of the Sole Supply period is 30 June of the year indicated.

Sole Supply Products – cumulative to August 2002

Generic Name	Presentation	Brand Name	Expiry Date*
Methyldopa	Tab 125 mg, 250 mg & 500 mg	Prodopa	2003
Methylphenidate hydrochloride	Tab 10 mg	Rubifen	2003
Miconazole	Oral gel 20 mg per g	Daktarin	2004
Nadolol	Tab 40 mg & 80 mg	Apo-Nadolol	2004
Nicotinic acid	Tab 25 mg, 50 mg, 100 mg & 500 mg	Apo-Nicotinic Acid	2004
Nifedipine	Tab long-acting 20 mg	Nyefax Retard	2003
Ornidazole	Tab 500 mg	Tiberal	2004
Phenoxymethylpenicillin (Penicillin V)	Grans for oral liquid benzathine 125 mg per 5 ml Grans for oral liquid benzathine 250 mg per 5 ml	AFT AFT	2004
Pindolol	Tab 5 mg	Pindol	2004
Piroxicam	Tab dispersible 10 mg & 20 mg	Piram-D	2003
Prazosin hydrochloride	Tab 1 mg, 2 mg & 5 mg	Hyprosin	2004
Prochlorperazine	Tab 5 mg	Antinaus	2004
Quinine sulphate	Tab 200 mg Tab 300 mg	Q 200 Q 300	2003
Salbutamol	Nebuliser soln, 1 mg per ml, 2.5 ml Nebuliser soln, 2 mg per ml, 2.5 ml	Ventolin Nebules Ventolin Nebules	2004
Salbutamol with ipratropium bromide	Nebuliser soln, 2.5 mg with ipratropium bromide 0.5 mg per 2.5 ml vial, 2.5 ml	Duolin	2004
Selegiline hydrochloride	Tab 5 mg	Selgene	2003
Spirolactone	Tab 25 mg & 100 mg	Spirotone	2003
Sodium chloride	Inj 0.9% 5 ml, 10 ml & 20 ml	Pharmacia	2004
Tamoxifen citrate	Tab 10 mg & 20 mg	Genox	2003
Timolol maleate	Eye drops 0.25% & 0.5%	Apo-Timop	2004
Tranexamic acid	Tab 500 mg	Cyklokapron	2004
Triamterene with hydrochlorothiazide	Tab 50 mg with hydrochlorothiazide 25 mg	Triamizide	2003
Vancomycin hydrochloride	Cap 125 mg & 250 mg Inj 50 mg per ml, 10 ml	Vancocin Vancocin	2004
Verapamil hydrochloride	Tab 40 mg & 80 mg Tab long-acting 240 mg	Verpamil Verpamil SR	2003
Vitamins	Tab (BPC cap strength)	Healtheries Multi-vitamin tablets	2004
Vitamin B Complex	Tab, strong, BPC	Apo-B-Complex	2003
Water	Purified for inj 5 ml, 10 ml & 20 ml	Pharmacia	2004

No changes August

*Expiry date of the Sole Supply period is 30 June of the year indicated.

Check your Schedule for full details
Schedule page ref

Subsidy
(Mnfr's Price)
\$ Per

Brand or
Generic Mnfr
✓ fully subsidised

New Listings

Effective 1 August 2002

110 NAPROXEN

Tab long-acting 750 mg	5.77	28	✓Naprosyn SR 750
Tab long-acting 1,000 mg	6.55	28	✓Naprosyn SR 1000

Note: Temporary listing of 28 pack tablet size. This pack size to be delisted 1 February 2003.

179 RESOURCE THICKEN UP - Special Authority [HP3]

4.00	250 g OP	✓
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Note: Replaces 227 g pack size.

Effective 1 July 2002

34 DOCUSATE SODIUM WITH SENNOSIDES

Tab 50 mg with total sennosides 8 mg	8.09	200	✓Laxsol
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66 BETAMETHASONE DIPROPIONATE

Crm 0.05% in propylene glycol base	4.33	30 g OP	Diprosone OV
	(12.20)		

Note: Name change only – replaces Diprolene cream

91 CEFTRIAXONE SODIUM - Hospital pharmacy [HP3]-specialist

- a) Subsidised only if prescribed for a dialysis or cystic fibrosis patient; and
b) The prescription is endorsed accordingly.

Inj 500 mg	88.01	5	✓Novartis
Inj 1 g	169.66	5	✓Novartis

92 CEPHAZOLIN SODIUM - Hospital pharmacy [HP3]

- a) Only if prescribed for a dialysis or cystic fibrosis patient; and
b) The prescription is endorsed accordingly.

Inj 500 mg	3.38	1	✓Novartis
Inj 1 g	6.94	1	✓Novartis

157 CHLORAMPHENICOL

Eye drops 0.5%	1.10	10 ml OP	✓Chlorsig
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Effective 1 June 2002

61 GLYCERYL TRINITRATE

Aerosol spray, 400 µg per dose CFC-free	6.99	200 dose OP	✓Glytrin
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71 COAL TAR WITH SALICYCLIC ACID AND SULPHUR

Solution 12% with salicylic acid 2% and sulphur 4% ointment	7.95	40 g OP	✓Cocois
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72 DITHRANOL

Crm 1%	27.50	50 g OP	✓Micanol
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Patients pay a manufacturer's surcharge when
the Manufacturer's Price is greater than the Subsidy

‡ safety cap reimbursed
Sole supplier

Check your Schedule for full details Schedule page ref	Subsidy (Mnfr's Price) \$	Per	Brand or Generic Mnfr ✓ fully subsidised
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New Listings – effective 1 June 2002 (continued)

113 PROBENECID

Tab 500 mg	55.00	100	✓AFT
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Effective 1 May 2002

40 ERYTHROPOIETIN BETA - Special Authority

Inj 6,000 u, pre-filled syringe	456.12	6	✓Recormon
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Special Authority - Hospital pharmacy [HP3]

a) Erythropoietin alpha and beta are indicated in the treatment of anaemia associated with chronic renal failure.

b) Erythropoietin alpha and beta are to be given only to patients with the anaemia of end-stage renal failure (other treatable causes of anaemia being excluded) who have been on haemodialysis or continuous ambulatory peritoneal dialysis (CAPD) for at least three months, who are not under evaluation for, or awaiting, a live donor kidney transplant and who meet one or more of the following criteria:

1. Anephric patients
2. Patients who are dependent on regular blood transfusion (1 unit each 4–8 weeks) to maintain haemoglobin > 60 g per litre
3. Patients as in (2) who cannot be transfused because of severe transfusion reactions
4. Transfusion induced haemosiderosis (clinical manifestations, serum ferritin >1,500 ug per ltr)
5. Patients with haemoglobin < 70 g per litre (mean of at least 4 haemoglobin concentrations over 4 months)
6. Patients with haemoglobin < 90 g per litre who have heart failure (low cardiac output, LV ejection fraction <40%) or persistent angina.

c) Specialist must make application – renal physicians.

111 LEFLUNOMIDE - Special Authority - Retail pharmacy

Tab 10 mg	176.70	30	✓Arava
Tab 20 mg	242.10	30	✓Arava
Tab 100 mg	121.35	3	✓Arava

Special Authority – Retail Pharmacy

a) Patient has rheumatoid arthritis.

b) If the patient is a woman of child-bearing age she has adequate contraception and is not pregnant.

c) Patient has been unable to tolerate or has a contraindication to or has had an inadequate response to sulphasalazine and methotrexate (individually or in combination).

d) Initial application and re-applications to be made by a rheumatologist. Re-application criteria are:

1. compliance (prescriber determined) with medication; and
2. improved rheumatoid arthritis symptom control.

e) Prescriptions may be written by any medical practitioner.

f) Initial approval is valid for six months. Subsequent approvals are valid indefinitely.

Note: patient should have full blood count and liver function tests regularly monitored.

159 BETAXOLOL HYDROCHLORIDE – Retail pharmacy specialist

▲ Eye drops 0.5%	15.08	5 ml OP	✓Apo-Betaxolol
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▲ Three months supply may be dispensed at one time if endorsed “certified exemption” by the prescriber.

“IMM” Interchangeable Multi-source Medicines

Changes to Restrictions

Effective 1 July 2002

46 ATORVASTATIN - Special Authority

Tab 10 mg	28.40	30	✓Lipitor
Tab 20 mg	41.39	30	✓Lipitor
Tab 40 mg	57.40	30	✓Lipitor

Special Authority - Retail pharmacy

- Applications can be made by a general practitioner or relevant specialist.
- Approvals will be granted if the patient fulfills at least one of the criteria outlined in (h) or (i).
- Prescriptions for all patients can be written either by the general practitioner or the relevant specialist.
- All information requested on the application must be supplied.
- Prescribers are required to certify on the Special Authority application that the patient has been offered 3–6 months of counselling and an opportunity to modify lifestyle in the direction which current knowledge suggests would further reduce their risks of cardiovascular morbidity and mortality.
- Attach the results of at least two laboratory tests completed within 12 months of the Special Authority application. At least one of these tests must be fasting (with the exception of patients with IDDM). If a computerised record of cholesterol levels is used, it must be signed by the prescriber.
- Approvals are valid indefinitely.
- General practitioners or relevant specialists may make applications for patients who are in the following risk groups:
 - NHF A1: Patients with proven cardiovascular disease
 - A1:1 – Patients with clinically proven ischaemic heart disease total cholesterol > 5.5
 - A1:2 – Patients post coronary artery bypass graft (CABG) or angioplasty total cholesterol > 4.5
 - Patients post heart transplant, regardless of cholesterol level.
 - NHF B: Patients with > 20% 5-year cardiovascular disease risk total cholesterol > 9.0
 - NHF C: 15-20% 5-year cardiovascular disease risk total cholesterol > 9.0
 - NHF D: 10-15% 5-year cardiovascular disease risk total cholesterol > 9.0
 - NHF E: Patients with < 10% 5-year cardiovascular disease risk total cholesterol > 9.0
- Relevant specialists may make applications for patients in the following risk groups:
 - NHF A1: A1:3 – Patients with proven ischaemic stroke or unequivocal history of transient ischaemic attack due to atherosclerosis total cholesterol > 6.0
 - A1:4 – Patients with unequivocal history of intermittent claudication total cholesterol > 6.0
 - NHF A2: Patients with Genetic Lipid Disorders: total cholesterol > 6.0
 - Familial Hypercholesterolaemia, Familial Defective Apo B,
 - Familial Combined, Dyslipidaemia, Combined
 - Dyslipidaemia (Type III)

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Check your Schedule for full details Schedule page ref	Subsidy (Mnfr's Price) \$	Per	Brand or Generic Mnfr ✓ fully subsidised
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Changes to Restrictions – effective 1 July 2002 (continued)

NHF A3: Patients with insulin and non-insulin dependant diabetes, total cholesterol > 6.0 and established nephropathy (albumin excretion greater than 300 mg/day)

j) Risk Groups sourced from the 1996 NHF Guidelines for the assessment and management of dyslipidaemia, NZ MED J 1996; 109: 224–32.

Note: Patients with a total cholesterol level greater than 9 mmol/l should have their initial assessment undertaken by a specialist.

72 & 141

CYCLOSPORIN A - Special Authority - Hospital pharmacy [HP3]

Oral liq 100 mg per ml 377.38 50 ml OP ✓Neoral

Changes to Restrictions – effective 1 June 2002

63 FRAMYCETIN SULPHATE WITH GRAMICIDIN

a) Only on a prescription,

b) Not in combination.

Oint 1.5% with gramicidin 0.005% 6.60 15 g OP
(9.20) Soframycin

63 FUSIDIC ACID

a) Only on a prescription,

b) Not in combination,

c) Maximum 15 g per prescription.

Crm 2% 6.60 15 g OP ✓Fucidin
Oint 2% 6.60 15 g OP ✓Fucidin
Gel 2% 6.60 15 g OP ✓Fucidin

63 MUPIROCIN

a) Only on a prescription,

b) Not in combination.

Oint 2% 6.60 15 g OP
(8.24) Bactroban

63 POLYNOXYLIN

a) Only on a prescription,

b) Not in combination.

Gel 3.50 15 g OP
(5.87) Ponoxylin

▲ Three months supply may be dispensed at one time if endorsed "certified exemption" by the prescriber.

"IMM" Interchangeable Multi-source Medicines

Check your Schedule for full details Schedule page ref	Subsidy (Mnfr's Price) \$	Per	Brand or Generic Mnfr ✓ fully subsidised
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Changes to Restrictions – effective 1 June 2002 (continued)

63 SILVER SULPHADIAZINE			
a) Only on a PSO,			
b) Not in combination.			
Crm 1% with chlorhexidine digluconate 0.2%	8.45 (11.30)	50 g OP	Silvazine
Crm 1% with chlorhexidine digluconate 0.2%	10.80 (14.64)	100 g OP	Silvazine
Crm 1% with chlorhexidine digluconate 0.2%	32.40 (45.88)	500 g OP	Silvazine
63 AMOROLFINE – Not in combination			
Nail soln 5%	37.86 (60.07)	5 ml OP	Loceryl
63 CICLOPIROXOLAMINE – Not in combination			
Crm 1%	1.00 (9.63)	20 g OP	Batrafen
Soln 1%	4.36 (9.08)	20 ml OP	Batrafen
Nail soln 8%	37.81	3.5 ml OP	✓Batrafen
64 CLOTRIMAZOLE – Not in combination			
Crm 1%	1.00 (1.83)	15 g OP	AFT
Crm 1%	1.00 (4.60)	20 g OP	✓Clocreme ^{IMM} Canesten ^{IMM}
Soln 1%	4.36 (7.35)	20 ml OP	Canesten ^{IMM}
64 ECONAZOLE NITRATE – Not in combination			
Crm 1%	1.00 (5.77)	15 g OP	✓Ecreme Pevaryl
Crm 1%	1.00 (9.60)	30 g OP	Pevaryl
Foaming soln 1%, 10 ml sachets	9.89 (11.30)	3	Pevaryl
Soln 1%	4.36 (6.70)	10 ml OP	Pevaryl
Soln 1%	4.36 (10.22)	30 ml OP	Pevaryl
64 KETOCONAZOLE – Not in combination			
Crm 2%	1.00 (10.00)	15 g OP	Nizoral

Check your Schedule for full details Schedule page ref	Subsidy (Mnfr's Price) \$	Per	Brand or Generic Mnfr ✓ fully subsidised
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Changes to Restrictions – effective 1 June 2002 (continued)

64 MICONAZOLE NITRATE – Not in combination			
Crm 2%	1.00 (1.83)	15 g OP	AFT
Crm 2%	1.00	20 g OP	✓ Micreme
Lotn 2%	4.36 (9.88)	30 ml OP	Daktarin
Tincture 2%	4.36 (11.33)	30 ml OP	Daktarin
64 NYSTATIN – Not in combination			
Crm 100,000 u per g	1.00 (4.10) (4.64)	15 g OP	Nilstat Mycostatin
Oint 100,000 u per g	1.00 (4.10) (4.91)	15 g OP	Nilstat Mycostatin
Paste 100,000 u per g, 30 g	1.00 (7.30)	30 g OP	Mycostatin
64 TIOCONAZOLE – Not in combination			
Crm 1%	1.00 (8.60)	30 g OP	Trosyd
Lotn 1%	4.36 (8.70)	30 ml OP	Trosyd
65 TOLCICLATE – Not in combination			
Crm 1%	1.00 (5.76)	30 g OP	Tolmicen
65 TOLNAFTATE – Not in combination			
Crm 1%	1.00 (8.35)	20 g OP	Tinaderm
Soln 1%	4.36 (6.67)	10 ml OP	Tinaderm
65 CALAMINE – Not in combination			
Crm, aqueous, BP	17.10 (21.75)	500 g	PSM
Lotn, BP	21.60 (24.50)	2,000 ml	PSM

▲ Three months supply may be dispensed at one time if endorsed "certified exemption" by the prescriber.

"IMM" Interchangeable Multi-source Medicines

Check your Schedule for full details Schedule page ref	Subsidy (Mnfr's Price) \$	Per	Brand or Generic Mnfr ✓ fully subsidised
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Changes to Restrictions – effective 1 June 2002 (continued)

65 CROTAMITON – Not in combination			
Crm 10%	4.26	20 g OP	
	(4.45)		Eurax
Lotn 10%	7.56	50 ml	
	(7.70)		Eurax
68 BETAMETHASONE DIPROPIONATE WITH CLOTRIMAZOLE – Only on a prescription			
Crm 0.05% with clotrimazole 1%	4.90	15 g OP	
	(7.95)		Lotricomb
68 BETAMETHASONE DIPROPIONATE WITH SALICYLIC ACID – Only on a prescription			
Oint 0.05% with salicylic acid 3%	8.10	30 g OP	
	(10.95)		Diprosalic
Lotn 0.05% with salicylic acid 2%	9.74	50 ml OP	
	(13.80)		Diprosalic
116 PARACETAMOL			
‡ Oral liq 120 mg per 5 ml	8.10	1,000 ml	✓ Paracare Junior Suspension
a) Available on a PSO	(9.15)		PSM Paracetamol
b) Not in combination			Elixir Paediatric
	(14.80)		Douglas
‡ Oral liq 250 mg per 5 ml – Not in combination	8.10	1,000 ml	✓ Paracare Double Strength Suspension
	(9.15)		Douglas
	(19.00)		Pamol

Patients pay a manufacturer's surcharge when the Manufacturer's Price is greater than the Subsidy

‡ safety cap reimbursed
Sole supplier

Check your Schedule for full details Schedule page ref	Subsidy (Mnfr's Price) \$	Per	Brand or Generic Mnfr ✓ fully subsidised
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Changes to Restrictions – effective 1 June 2002 (continued)

128 QUETIAPINE—~~Special Authority~~ **Subsidy by endorsement**

Tab 25 mg	55.00	60	✓Seroquel
Tab 100 mg	110.00	60	✓Seroquel
Tab 150 mg	159.00	60	✓Seroquel
Tab 200 mg	210.00	60	✓Seroquel

~~Special Authority – Retail pharmacy~~

~~a) Not subject to limited patient numbers.~~

~~b) Subsidised for:~~

- ~~i) patients presenting with first episode schizophrenia or related psychoses; and~~
- ~~ii) patients suffering from schizophrenia and related psychoses who are likely to benefit from anti-psychotic treatment after trial of an effective dose of risperidone that has been discontinued because of unacceptable side effects or inadequate response.~~

~~e) Initial application and application for renewal of Special Authority to be made by a psychiatrist.~~

~~d) First prescription to be written by a psychiatrist or psychiatric registrar.~~

~~e) Subsequent prescriptions may be written by a General Practitioner.~~

~~f) Approvals valid for two years~~

Retail pharmacy – subsidy by endorsement

a) Subsidised for:

- i) patients presenting with first episode schizophrenia or related psychoses; and**
- ii) patients suffering from schizophrenia or related psychoses after a trial of an effective dose of risperidone that has been discontinued because of unacceptable side effects or inadequate response.**

b) Initial prescription must be written by a relevant specialist.

c) Subsequent prescriptions may be written by a general practitioner.

d) The prescription must be endorsed “certified condition”.

Inhaled beta-adrenoceptor agonists - long acting

Metered dose inhalers

149 SALMETEROL - Special Authority

Aerosol inhaler, 25 µg per dose 33.75 120 dose OP ✓Serevent

Breath activated devices

149 EFORMOTEROL FUMARATE

Powder for inhalation, 6 µg per dose, breath activated - Subsidy
by endorsement 21.50 60 dose OP ✓ **Oxis Turbuhaler**

Subsidy is available for patients with poorly controlled asthma where:

- a) at least three months of 750 µg or more daily of inhaled beclomethasone or budesonide (or 400 µg of fluticasone) for adults has been used; or
- b) at least three months of 400 µg or more daily of inhaled beclomethasone or budesonide (or 200 µg of fluticasone) for children 12 years or older has been used;

The prescription must be endorsed accordingly. We recommend that the words used to indicate eligibility are “poor control with ICS” or “certified condition”.

▲ Three months supply may be dispensed at one time if endorsed “certified exemption” by the prescriber.

“IMM” Interchangeable Multi-source Medicines

Check your Schedule for full details Schedule page ref	Subsidy (Mnfr's Price) \$	Per	Brand or Generic Mnfr ✓ fully subsidised
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Changes to Restrictions – effective 1 June 2002 (continued)

150 BUDESONIDE WITH EFORMOTEROL - Special Authority			
Powder for inhalation 100 µg with eformoterol fumarate 6 µg	74.10	120 dose OP	✓ Symbicort Turbuhaler 100/6
Powder for inhalation 200 µg with eformoterol fumarate 6 µg	90.80	120 dose OP	✓ Symbicort Turbuhaler 200/6
150 EFORMOTEROL FUMARATE - Special Authority			
Powder for inhalation, 12 µg per dose, and monodose device	35.80	60 doses	✓ Foradil
Powder for inhalation, 12 µg per dose, breath activated	35.80	60 dose OP	✓ Oxis Turbuhaler
150 SALMETEROL - Special Authority			
Powder for inhalation, 50 µg per dose, 4 doses per disk	35.80	15 disks	✓ Serevent
Powder for inhalation, 50 µg per dose, breath activated	35.80	60 dose OP	✓ Serevent Accuhaler
Special Authority - Retail pharmacy for eformoterol fumarate (12 µg per dose), eformoterol fumarate with budesonide and salmeterol .			
a) Special Authority criteria either under point I (in its entirety), or point II (in its entirety), or point III (in its entirety) must apply before patients have access to subsidy.			
b) Special Authority approvals (CHEM numbers) are interchangeable among all presentations of inhaled long-acting beta agonists and eformoterol fumarate with budesonide.			
c) Applications for Special Authority to be made by general practitioners or an appropriate specialist.			
d) Approvals valid for two years.			
e) Patients are to be reviewed at least at six months to assess compliance and effectiveness of therapy.			
f) Applications to be made on a PHARMAC approved form.			
g) The re-application criteria under each point below (I, II or III) are:			
1) compliance (prescriber determined) with medication; and (2) improved asthma symptom control.			
h) Children who turn 12, and are stabilised on an inhaled LABA, are not required to try Oxis Turbuhaler 6 µg in order to have continued access to their original inhaled LABA.			
i. Serevent MDI, Serevent Diskhaler, Serevent Accuhaler, Foradil, Oxis Turbuhaler 12 µg [‡] , Symbicort Turbuhaler			
Subsidy is available for:			
- children with poorly controlled asthma under the age of 12 who required at least three months of 400 µg or more daily inhaled beclomethasone or budesonide (or 200 µg or more of fluticasone); or			
- adults with poorly controlled asthma who required at least three months of 1,500 µg or more daily of inhaled beclomethasone or budesonide (or 750 µg or more of fluticasone).			
<i>continued...</i>			

Patients pay a manufacturer's surcharge when the Manufacturer's Price is greater than the Subsidy

‡ safety cap reimbursed
Sole supplier

Check your Schedule for full details Schedule page ref	Subsidy (Mnfr's Price) \$	Per	Brand or Generic Mnfr ✓ fully subsidised
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Changes to Restrictions – effective 1 June 2002 (continued)

[†]Note that as of 1 October 2001 only Serevent MDI, Serevent Diskhaler, Serevent Accuhaler, Foradil and Symbicort Turbuhaler 100/6 and 200/6 are approved by Medsafe for the use in paediatric patients under the age of 12 years. Please refer to the relevant data sheets for details.

II. Serevent MDI, Serevent Diskhaler, Serevent Accuhaler

Subsidy is available for patients with poorly controlled asthma aged 12 years and over, under the following criteria:

- at least three months of 750 µg or more daily of inhaled beclomethasone or budesonide (or 400 µg of fluticasone) for adults, or 400 µg or more daily inhaled beclomethasone or budesonide (or 200 µg of fluticasone) for children 12 years or older has been used; and
- patients either:
 - are hypersensitive to eformoterol; or
 - have developed a product related adverse event that resolved on cessation and recurred on re-challenge with Oxis Turbuhaler 6 µg; or
 - after a six week trial of Oxis Turbuhaler 6 µg (with doses of 12–24 µg daily) failed to show evidence of improved asthma control.

III. Serevent MDI and spacer (with or without mask)

Subsidy is available in rare circumstances for patients with poorly controlled asthma aged 12 years and over, under the following criteria:

- have documented serious mental or physical² disability who are incapable of being taught to use the appropriate breath activated device; and
 - at least three months of 750 µg or more daily of inhaled beclomethasone or budesonide (or 400 µg of fluticasone) for adults, or 400 µg or more daily inhaled beclomethasone or budesonide (or 200 µg of fluticasone) for children 12 years or older has been used;
- ii) Applications must be made on a PHARMAC approved form, which contains a free text box for “Turbuhaler failures” where the nature of the documented serious mental or physical disability is to be recorded.

²Hand grips for the Turbuhaler are available free of charge from AstraZeneca for patients with problems with manual dexterity.

Effective 1 May 2002

38 CALCITRIOL - Retail pharmacy-specialist

Oral liq 1 µg per ml - ~~Special Authority~~ 39.40 10 ml OP ✓Rocaltrol solution
Special Authority - Hospital pharmacy [HP3]

- a) Oral liquid for patients with oesophageal stricture who are unable to take capsules. General Practitioner or appropriate specialist may make application.
- b) Oral liquid for infants and children with liver disease or short gut syndrome, who require vitamin supplementation but are unable to swallow capsules. Paediatricians may make application.

53 CAPTOPRIL

‡ Oral liq 5 mg per ml 44.38 95 ml OP ✓Capoten
‡ Oral liq 5 mg per ml 44.38 100 ml OP ✓Capoten

- a) Oral liquid restricted to children under seven 12 years of age.

▲ Three months supply may be dispensed at one time if endorsed “certified exemption” by the prescriber.

“IMM” Interchangeable Multi-source Medicines

Check your Schedule for full details Schedule page ref	Subsidy (Mnfr's Price) \$	Per	Brand or Generic Mnfr ✓ fully subsidised
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Changes to Subsidy and Manufacturer's Price

Effective 1 August 2002

24	OLSALAZINE - Retail pharmacy-specialist (↓ subsidy)			
	Cap 250 mg	31.51	100	✓Dipentum
	Tab 500 mg	59.86	100	✓Dipentum
24	SULPHASALAZINE (↓ subsidy)			
	Tab 500 mg	8.86	100	✓Salazopyrin
	Tab EC 500 mg	9.94	100	✓Salazopyrin EN
31	GLIBENCLAMIDE (↓ subsidy)			
	Tab 2.5 mg	1.98	100	✓Gliben
	Tab 5 mg	2.10	100	✓Gliben
59	CLONIDINE (↓ subsidy)			
	Tab 150 µg	29.33	100	✓Catapres
73	CLOBETASOL PROPIONATE (↓ subsidy)			
	Scalp app 0.05%	2.50	30 ml OP	✓Dermol
77	ETHINYLOESTRADIOL WITH GESTODENE - Available on a PSO (↑ price)			
	Tab 30 µg with gestodene 75 µg	3.15	21	
		(5.00)		Femodene 21
	Tab 30 µg with gestodene 75 µg and 7 inert tab	3.15	28	
		(5.00)		Femodene 28
78	ETHINYLOESTRADIOL WITH LEVONORGESTREL - Available on a PSO (↑ price)			
	Tab 30 µg with levonorgestrel 150 µg	3.15	21	
		(5.00)		Microgynon 30
	Tab 30 µg with levonorgestrel 150 µg and 7 inert tab	3.15	28	
		(5.00)		Microgynon 30 ED
79	ETHYNODIOL DIACETATE - Available on a PSO (↓ subsidy)			
	Tab 500 µg	6.62	84	✓Femulen
84	PREDNISONE (↓ subsidy)			
	▲ Tab 1 mg	9.99	500	✓Apo-Prednisone
	▲ Tab 2.5 mg	11.41	500	✓Apo-Prednisone
	▲ Tab 5 mg - Available on a PSO	11.98	500	✓Apo-Prednisone
	▲ Tab 20 mg	35.41	500	✓Apo-Prednisone

Check your Schedule for full details Schedule page ref	Subsidy (Mnfr's Price) \$	Per	Brand or Generic Mnfr ✓ fully subsidised
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Changes to Subsidy and Manufacturer's Price – effective 1 August 2002 (continued)

90 & 126

BROMOCRIPTINE MESYLATE (↓ subsidy)

Tab 2.5 mg	33.24	100	✓Alpha-Bromocriptine
Tab 10 mg	123.96	100	✓Alpha-Bromocriptine

95 AMOXYCILLIN CLAVULANATE - Available on a PSO (↑ price, ↑ subsidy)

Tab amoxicillin 500 mg with potassium clavulanate 125 mg	37.42	100	✓Synermox
Grans for oral liq amoxicillin 125 mg with potassium clavulanate 31.25 mg per 5 ml	3.43	100 ml	✓Synermox
Grans for oral liq amoxicillin 250 mg with potassium clavulanate 62.5 mg per 5 ml	5.89	100 ml	✓Synermox

99 ETHAMBUTOL - Retail pharmacy-specialist (↓ price)

Tab 400 mg	40.80	100	✓Apo-Ethambutol
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113 COLCHICINE (↑ subsidy)

Tab 600 µg	16.50	100	✓Abbott
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117 MORPHINE HYDROCHLORIDE - Only on a controlled drug form (↓ subsidy)

‡ Oral liq 1 mg per ml	7.68	200 ml	✓RA-Morph
‡ Oral liq 2 mg per ml	8.15	200 ml	✓RA-Morph
‡ Oral liq 5 mg per ml	9.18	200 ml	✓RA-Morph
‡ Oral liq 10 mg per ml	11.96	200 ml	✓RA-Morph

119 NORTRIPTYLINE HYDROCHLORIDE (↑ price)

Tab 10 mg	2.40 (4.80)	50	Allegron
Tab 25 mg	9.37 (18.80)	100	Allegron

124 CLONIDINE HYDROCHLORIDE (↓ subsidy)

Tab 25 µg	15.53	100	✓Dixarit
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155 IPRATROPIUM BROMIDE (↓ subsidy)

Aqueous nasal spray, 0.03%	11.79	15 ml OP	✓Atrovent Nasal Aqueous
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▲ Three months supply may be dispensed at one time if endorsed "certified exemption" by the prescriber.

"IMM" Interchangeable Multi-source Medicines

Check your Schedule for full details Schedule page ref	Subsidy (Mnfr's Price) \$	Per	Brand or Generic Mnfr ✓ fully subsidised
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Effective 1 July 2002

41	TRANEXAMIC ACID (↓ subsidy) Tab 500 mg	50.40	100	✓ Cyklokapron
74	SUNSCREENS, PROPRIETARY - Retail pharmacy-specialist (↑ price) Lotn	4.80 (9.45)	125 ml OP	Aquasun 30+ Aquabloc 30+
82	ALENDRONATE - Special Authority (↓ subsidy, ↓ price) Tab 10 mg	51.30	30	✓ Fosamax
	Tab 70 mg	47.90	4	✓ Fosamax
108	NITROFURANTOIN (↑ subsidy, ↑ price) Tab 50 mg	14.70	100	✓ Nifuran
	Tab 100 mg	25.70	100	✓ Nifuran
121 & 127	LITHIUM CARBONATE (↑ subsidy, ↑ price) Tab long-acting 400 mg	13.35	100	✓ Priadel
159	BETAXOLOL HYDROCHLORIDE - Retail pharmacy-specialist ▲ Eye drops 0.5% (↓ subsidy)	7.54 (15.08)	5 ml OP	✓ Apo-Betaxolol Betoptic

Effective 1 June 2002

23	SIMETHICONE (price correction) Tab aluminium hydroxide 200 mg with magnesium hydroxide 200 mg and activated simethicone 20 mg	4.50 (12.45)	300	Mylanta
25	ZINC OXIDE (price correction) Oint zinc oxide with balsam peru	4.50 (6.25)	50 g OP	Anusol
	Suppos zinc oxide with balsam peru	4.47 (6.10)	12	Anusol
61	GLYCERYL TRINITRATE (↓ subsidy) ▲ Oral pump spray 400 µg per dose	6.99 (9.05)	200 dose OP	Nitrolingual Pumpspray

Check your Schedule for full details Schedule page ref	Subsidy (Mnfr's Price) \$	Per	Brand or Generic Mnfr ✓ fully subsidised
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Changes to Subsidy and Manufacturer's Price – effective 1 June 2002 (continued)

74 SUNSCREENS, PROPRIETARY - Retail pharmacy-specialist			
Crm (Price correction)	1.74 (6.00)	50 g OP	Aquasun 30+
Oint (↑ price)	5.00 (15.00)	14 g OP	R V Paque
Lotn (Price correction)	4.80 (8.85)	125 ml OP	Aquasun 30+ Aquabloc 30+
116 PARACETAMOL (Price correction)			
‡ Oral liq 120 mg per 5 ml - Available on a PSO	8.10 (14.80)	1,000 ml	Pamol
‡ Oral liq 250 mg per 5 ml	8.10 (19.00)	1,000 ml	Pamol
132 TETRABENAZINE (↑ subsidy & ↑ price)			
Tab 25 mg	243.00	112	✓ Xenazine 25
152 IPRATROPIUM BROMIDE - Available on a PSO (↓ subsidy)			
Nebuliser soln, 250 µg per 1 ml, 1 ml	5.90 (7.80)	20	✓ Ipra 250 Steri-Nebs
Nebuliser soln, 500 µg per 2 ml, 2 ml	7.55 (11.20)	20	✓ Ipra 500 Steri-Nebs
Special Foods			
183 INFASOY (↑ price)	6.34 (14.55)	900 g OP	

Effective 1 May 2002

23 SIMETHICONE (price correction)			
Oral liq aluminium hydroxide 200 mg with magnesium hydroxide 200 mg and activated simethicone 20 mg per 5 ml	1.50 (4.05)	500 ml	Mylanta P
69 ZINC AND CASTOR OIL (↑ price)			
Ointment BP	6.55 (45.00)	500 g	Orion

▲ Three months supply may be dispensed at one time if endorsed "certified exemption" by the prescriber.

"IMM" Interchangeable Multi-source Medicines

Check your Schedule for full details Schedule page ref	Subsidy (Mnfr's Price) \$	Per	Brand or Generic Mnfr ✓ fully subsidised
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Changes to Subsidy and Manufacturer's Price – effective 1 May 2002 (continued)

70 & 170

PARAFFIN (↓ subsidy)			
White soft	17.89 (39.50)	2,500 g	✓IPW PSM
a) Only in combination with a dermatological galenical or as a diluent for a proprietary Topical Corticosteroid - Plain.			

70 POVIDONE IODINE (↑ price)

Antiseptic soln 10%	6.42 (7.20)	500 ml	Viodine ^{IMM}
Alcohol skin preparation 10%	8.13 (14.20)	500 ml	Viodine

73 & 171

SALICYLIC ACID (↓ subsidy)			
Powder	29.52 (38.40)	500 g	✓David Craig PSM
a) Only in combination with a dermatological base or proprietary Topical Corticosteroid - Plain; b) With or without other dermatological galenicals.			

79 LEVONORGESTREL - Available on a PSO (↑ price)

Tab 30 µg	2.90 (4.83)	28	Microlut
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169 ACETYLCYSTEINE (↑ price)

Inj 200 mg per ml, 10 ml	137.06 (242.50)	10	Parvolex
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169 GLYCEROL (↓ subsidy)

	26.66 (29.00)	2,000 ml	✓David Craig PSM
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(Only in extemporaneously compounded methadone mixture, codeine linctus diabetic or codeine linctus paediatric)

179 HORLEYS BREAD MIX (↑ price)

	3.51 (5.49)	1,000 g OP	
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179 HORLEYS FLOUR (↑ price)

	5.62 (9.46)	2,000 g OP	
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Check your Schedule for full details
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(Mnfr's Price)
\$ Per

Brand or
Generic Mnfr
✓ fully subsidised

Changes to Sole Supply

Effective 1 July 2002

145 LORATADINE
Tab 10 mg 4.90 30 ✓ Lora-tabs

The following products no longer have Sole Supply status

- 24 SULPHASALAZINE
Tab 500 mg (Salazopyrin) & Tab EC 500 mg (Salazopyrin EN)
- 26 & 125
METOCLOPRAMIDE HYDROCHLORIDE
Inj 5 mg per ml, 2 ml (Pharmacia)
- 31 GLIBENCLAMIDE
Tab 2.5 mg & tab 5 mg (Gliben)
- 31 GLIPIZIDE
Tab 5 mg (Glipid)
- 35 SODIUM CITRATE WITH SODIUM LAURYL SULPHOACETATE
Enema 90 mg with sodium lauryl sulphoacetate (Microlax)
- 45 BEZAFIBRATE
Tab 200 mg (Bezalip)
- 45 GEMFIBROZIL
Cap 300 mg (Gemizol)
- 69 AQUEOUS CREAM
500 g (David Craig)
- 69 EMULSIFYING OINTMENT BP
500 g (David Craig)
- 73 BETAMETHASONE VALERATE
Scalp application 0.1% (Beta Scalp), Crm 0.1%, 100 g (Beta Cream) & Oint 0.1%, 100 g (Beta Ointment)
- 73 CLOBETASOL PROPIONATE
Scalp application 0.05% (Dermol)
- 73 KETOCONAZOLE
Shampoo 2% (Sebizole)
- 73 TAR WITH TRIETHANOLAMINE LAURYL SULPHATE AND FLUORESCEIN SODIUM
Soln 2.3% 500 ml & 1,000 ml (Pinetarsol)
- 81 OXYBUTYNIN
Tab 5 mg (Apo-Oxybutynin)
- 83 HYDROCORTISONE
Tab 5 mg & tab 20 mg (Douglas)

▲ Three months supply may be dispensed at one time
if endorsed "certified exemption" by the prescriber.

"IMM" Interchangeable Multi-source Medicines

Check your Schedule for full details Schedule page ref	Subsidy (Mnfr's Price) \$	Per	Brand or Generic Mnfr ✓ fully subsidised
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Changes to Sole Supply – effective 1 July 2002 (continued)

- 84 PREDNISONE
Tab 1 mg, 2.5 mg, 5 mg & 20 mg (Apo-Prednisone)
- 90 CLOMIPHENE CITRATE
Tab 50 mg (Phenate)
- 94 ERYTHROMYCIN ETHYL SUCCINATE
Grans for oral liq 200 mg per 5 ml & 400 mg per 5 ml (E-Mycin)
Tab 400 mg (E-Mycin)
- 94 ROXITHROMYCIN
Tab 150 mg & 300 mg (Romicin)
- 95 AMOXYCILLIN CLAVULANATE
Tab amoxicillin 500 mg with potassium clavulanate 125 mg (Synermox)
Grans for oral liq amoxicillin 125 mg with potassium clavulanate 31.25 mg per 5 ml (Synermox)
Grans for oral liq amoxicillin 250 mg with potassium clavulanate 62.5 mg per 5 ml (Synermox)
- 95 FLUCLOXACILLIN MAGNESIUM
Grans for oral liq 125 mg per 5 ml (Floxapen) & Grans for oral liq 250 mg per 5 ml (Floxapen)
- 95 PHENOXYMETHYLPENICILLIN
Cap potassium salt 250 mg & 500 mg (Cilicaine VK)
- 96 CO-TRIMOXAZOLE
Tab trimethoprim 80 mg/sulphamethoxazole 400 mg (Apo-Sulfatrim)
Oral liquid sugar-free trimethoprim 40 mg/sulphamethoxazole 200 mg (Trisul)
- 97 & 108
TRIMETHOPRIM
Tab 300 mg (TMP)
- 98 METRONIDAZOLE
Tab 200 mg & tab 400 mg (Trichozone)
- 108 NORFLOXACIN
Tab 400 mg (Noroxin)
- 110 IBUPROFEN
Tab 200 mg (Panafen)
- 111 INDOMETHACIN
Cap 25 & cap 50 mg (Rheumacin) and suppos 100 mg (Arthrexin)
- 113 ORPHENADRINE CITRATE
Tab 100 mg (Norflex)
- 116 PARACETAMOL
Tab 500 mg (Panadol)
- 116 PARACETAMOL WITH CODEINE
Tab paracetamol 500 mg with codeine phosphate 8 mg (Panadeine)

Check your Schedule for full details Schedule page ref	Subsidy (Mnfr's Price) \$	Per	Brand or Generic Mnfr ✓ fully subsidised
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Changes to Sole Supply – effective 1 July 2002 (continued)

- 118 AMITRIPTYLINE
Tab 10 mg, tab 25 mg & tab 50 mg (Amitrip)
- 118 CLOMIPRAMINE HYDROCHLORIDE
Tab 10 mg (Anafranil)
- 118 DOTHIEPIN HYDROCHLORIDE
Cap 25 mg & tab 75 mg (Dopress)
- 118 DOXEPIN HYDROCHLORIDE
Cap 10 mg, cap 25 mg, cap 50 mg & cap 75 mg (Anten)
- 118 PETHIDINE HYDROCHLORIDE
Inj 50 mg per ml, 1 ml & inj 50 mg per ml, 2 ml (Baxter)
- 124 METOCLOPRAMIDE HYDROCHLORIDE WITH PARACETAMOL
Tab 5 mg with paracetamol 500 mg (Paramax)
- 126 BROMOCRIPTINE MESYLATE
Tab 2.5 mg & Tab 10 mg (Alpha-Bromocriptine)
- 129 FLUPHENAZINE DECANOATE
Inj 12.5 mg per 0.5 ml, 0.5 ml, inj 25 mg per ml, 1 ml & inj 100 mg per ml, 1 ml (Baxter)
- 131 TEMAZEPAM
Cap 10 mg (Euhypnos) & cap 20 mg (Somapam)
- 131 TRIAZOLAM
Tab 0.125 mg & tab 0.250 mg (Halcion)
- 131 ZOPICLONE
Tab 7.5 mg (Zo-Tab)
- 145 KETOTIFEN
Oral liq 1 mg per 5 ml (Asmafen)
- 157 CHLORAMPHENICOL
Eye oint 1% (Chlorsig) & Eye drops 0.5% (Isopto-Fenicol)
- 159 DIPIVEFRIN HYDROCHLORIDE
Eye drops 0.1% (Dipoquin)
- 160 LEVOBUNOLOL
Eye drops 0.5% (Alcon-Levobunolol)
- 160 PILOCARPINE
Eye drops 0.5%, 1%, 2%, 3%, 4% & 6% (Pilopt)

▲ Three months supply may be dispensed at one time if endorsed "certified exemption" by the prescriber.

Check your Schedule for full details Schedule page ref	Subsidy (Mnfr's Price) \$	Per	Brand or Generic Mnfr ✓ fully subsidised
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Changes to Sole supply –effective 1 May 2002

39 VITAMINS Tab (BPC cap strength)	15.60	1,000	✓ <u>Healtheries Multi-vitamin tablets</u>
153 SALBUTAMOL WITH IPRATROPIUM BROMIDE - Available on a PSO Nebuliser soln, 2.5 mg with ipratropium bromide 0.5 mg per 2.5 ml vial, 2.5 ml ...	10.45	20	✓ <u>Duolin</u>

Corrections

Effective 1 July 2002

70 POVIDONE IODINE Oint 10% - Only on a prescription, maximum 100 g per prescription	6.87 (7.25)	100 g OP	Betadine ^{IMM}
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Patients pay a manufacturer's surcharge when the Manufacturer's Price is greater than the Subsidy

‡ safety cap reimbursed
Sole supplier

Check your Schedule for full details
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Delisted Items

Effective 1 August 2002

53	CAPTOPRIL Oral liq 5 mg per ml - restricted to children under twelve years of age	44.38	100 ml OP	Capoten
	Note: Replaced by 95 ml pack size, listed 1 February 2002.			
66	BETAMETHASONE VALERATE Oint 0.1%	2.25 (5.91)	30 g OP	Betnovate
76	CONDOMS WITH SPERMICIDE - Available on a PSO	28.56 (94.68)	144	Durex Extra Safe
133	CHLORAMBUCIL- Retail pharmacy-specialist Tab 2 mg	22.35	25	Leukeran
	Tab 5 mg	33.18	25	Leukeran
	Note: 2 mg strength replaced by Leukeran FC (film-coated) tablets, listed 1 February 2002.			

Effective 1 July 2002

64	TIOCONAZOLE Crm 1%	1.00 (8.60)	30 g OP	Trosyd
	Lotn 1%	4.36 (8.70)	30 ml OP	Trosyd
92	CEFUROXIME SODIUM a) Hospital pharmacy [HP3] - Maximum of 750 mg per prescription; or b) Hospital pharmacy [HP3]-specialist - Only if prescribed for a dialysis or cystic fibrosis patient; and - The prescription is endorsed accordingly.			
	Inj 250 mg	20.97 (27.00)	10	Zinacef
145	LORATADINE Tab 10 mg	4.90 (28.72)	30	Claratyne
147	FLUTICASONE Powder for inhalation, 50 µg per dose, 4 doses per disk .	3.90 (8.67)	15 disks	Flixotide

▲ Three months supply may be dispensed at one time if endorsed "certified exemption" by the prescriber.

"IMM" Interchangeable Multi-source Medicines

Check your Schedule for full details Schedule page ref	Subsidy (Mnfr's Price) \$	Per	Brand or Generic Mnfr ✓ fully subsidised
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Delisted Items – effective 1 July 2002 (continued)

152 FENOTEROL HYDROBROMIDE WITH IPRATROPIUM BROMIDE - Special Authority Nebuliser soln, 1.25 mg with ipratropium bromide, 500 µg per 4 ml	11.25 (15.00)	20	Duovent Respules
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Effective 1 June 2002

32 GLUCOSE OXIDASE Blood diagnostic test with peroxidase	27.85 (36.11)	50 test OP	Glucostix Glucofilm
36 MOUTHWASH Tab	14.25 (23.45)	500	Solucol
46 PRAVASTATIN - Special Authority Tab 10 mg	7.90 (35.30)	30	Lipostat
Tab 20 mg	15.96 (50.00)	30	Lipostat
66 BETAMETHASONE VALERATE Crm 0.1%	2.25 (5.38)	30 g OP	Bivate
67 & 170 HYDROCORTISONE WITH WOOL FAT AND MINERAL OIL - Only on the prescription of a doctor Lotn 1% with wool fat hydrous 3% and mineral oil	2.86 (4.77)	100 ml	BK Lotn HC
73 BETAMETHASONE DIPROPIONATE Scalp lotn propylene glycol base 0.05%	8.00 (11.40)	30 ml OP	Diprolene
78 ETHINYLOESTRADIOL WITH LEVONORGESTREL - Available on a PSO Tab ethinyloestradiol 30 µg with levonorgestrel 50 µg (6) and tab ethinyloestradiol 40 µg with levonorgestrel 75 µg (5) and tab ethinyloestradiol 30 µg with levonorgestrel 125 µg (10) ..	3.15 (4.83)	21	Triphasil 21

Check your Schedule for full details Schedule page ref	Subsidy (Mnfr's Price) \$	Per	Brand or Generic Mnfr ✓ fully subsidised
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Delisted Items – effective 1 June 2002 (continued)

81 OESTROGENS			
Conjugated, equine vaginal crm 625 µg per g with applicator	6.49	42 g OP	Premarin
94 ERYTHROMYCIN ETHYL SUCCINATE			
Inj 50 mg per ml, 2ml	9.91	5	ERA
94 ERYTHROMYCIN LACTOBIONATE			
Inj 300 mg	5.34 (6.22)	1	ERA
110 NAPROXEN - Special Authority available			
Tab 250 mg	30.00	500	Noflam
Tab 500 mg	12.00	100	Noflam
Tab EC 500 mg	8.80	60	Noflam EC
111 NAPROXEN SODIUM - Special Authority available			
Tab 275 mg	6.40	100	Noflam-N
Tab 550 mg	12.80	100	Noflam-N
130 DIAZEPAM - Month restriction			
Tab 2 mg	5.42	500	D-Pam
146 BECLOMETHASONE DIPROPIONATE			
Aerosol inhaler, 50 µg per dose	8.54 (17.08)	200 dose OP	Atomide Junior
Aerosol inhaler, 100 µg per dose	12.50 (25.00)	200 dose OP	Atomide
Aerosol inhaler, 250 µg per dose	22.67 (45.33)	200 dose OP	Atomide Forte
154 THEOPHYLLINE			
Cap long-acting 300 mg	25.28 (42.00)	100	Nuelin-24
177 RESOURCE JUST FOR KIDS			
Strawberry	1.90	237 ml OP	

▲ Three months supply may be dispensed at one time if endorsed "certified exemption" by the prescriber.

"IMM" Interchangeable Multi-source Medicines

Check your Schedule for full details Schedule page ref	Subsidy (Mnfr's Price) \$	Per	Brand or Generic Mnfr ✓ fully subsidised
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Delisted Items – effective 1 May 2002

39 VITAMINS Tab (BPC cap strength)	15.60 (25.00)	1000	Apo-Multivitamin Multivite Six
43 WARFARIN SODIUM ▲ Tab 2.5 mg	4.71	50	Coumadin
146 BUDESONIDE Aerosol inhaler, 200 µg per dose	18.14 (36.26)	200 dose OP	Pulmicort
153 SALBUTAMOL WITH IPRATROPIUM BROMIDE - Available on a PSO Nebuliser soln, 2.5 mg with ipratropium bromide 0.5 mg per 2.5 ml vial, 2.5 ml ...	10.45 (11.20)	20	Combivent Respules

Patients pay a manufacturer's surcharge when the Manufacturer's Price is greater than the Subsidy

‡ safety cap reimbursed
Sole supplier

Check your Schedule for full details
Schedule page ref

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(Mnfr's Price)
\$ Per

Brand or
Generic Mnfr
✓ fully subsidised

Items to be Delisted

Effective 1 February 2003

46	FLUVASTATIN				
	Cap 20 mg	6.38	30		
		(23.10)			Vastin ^{IMM}
	Cap 40 mg	7.51	30		
		(27.00)			Vastin ^{IMM}
74 & 168	PODOPHYLLIN				
	Paint 20%	CE	20 ml	✓	
	a) Maximum 20 ml per prescription				
78	ETHINYLOESTRADIOL WITH LEVONORGESTREL - Available on a PSO				
	Tab ethinyloestradiol 50 µg with levonorgestrel 50 µg (11) and tab ethinyloestradiol 50 µg with levonorgestrel 125 µg (10) and 7 inert tab	3.15	28		
		(4.60)			Biphasil 28
118	AMOXAPINE				
	Tab 50 mg	26.00	100	✓	Asendin
149	FENOTEROL HYDROBROMIDE - Special Authority				
	Aerosol inhaler, 200 µg per dose	15.00	300 dose OP		
		(18.00)			Berotec
152	FENOTEROL HYDROBROMIDE WITH IPRATROPIUM BROMIDE - Special Authority				
	Aerosol inhaler, 100 µg with ipratropium bromide, 40 µg per dose	13.50	200 dose OP		
		(18.00)			Duovent Inhaler
154	THEOPHYLLINE				
	Tab long-acting 200 mg	11.00	100		
		(12.00)			Theo-Dur
171	PODOPHYLLIN RESIN	31.40	25 g		
		(34.50)			PSM
179	RESOURCE THICKEN UP	4.00	227 g OP	✓	
	Note: Replaced by 250 g OP, listed 1 August 2002.				

▲ Three months supply may be dispensed at one time if endorsed "certified exemption" by the prescriber.

"IMM" Interchangeable Multi-source Medicines

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Items to be delisted – effective 1 January 2003

23 & 116

CODEINE PHOSPHATE

Tab 15 mg	7.60	100	✓Douglas
Tab 30 mg	10.60	100	✓Douglas
Tab 60 mg	20.10	100	
	(22.00)		Douglas

24 SULPHASALAZINE

Suppos 500 mg	6.99	10	
	(7.50)		Salazopyrin

34 MUCILAGINOUS LAXATIVES - Only on a prescription

Dry	2.64	150 g OP	
	(4.75)		Isogel

44 POTASSIUM CHLORIDE

Inj 75 mg per ml, 10 ml	30.16	50	✓Pharmacia
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46 SIMVASTATIN

Tab 10 mg	11.10	30	✓Zocor
Tab 20 mg	13.50	30	✓Zocor
Tab 40 mg	24.00	30	✓Zocor

53 LISINOPRIL

Tab 5 mg	4.91	30	
	(12.28)		Zestril ^{MM}
Tab 10 mg	7.14	30	
	(17.86)		Zestril ^{MM}
Tab 20 mg	10.10	30	
	(25.27)		Zestril ^{MM}

54 LISINOPRIL WITH HYDROCHLOROTHIAZIDE

Tab 20 mg with hydrochlorothiazide 12.5 mg	10.70	30	
	(38.04)		Prinzide Zestoretic

57 PINDOLOL WITH CLOPAMIDE

Tab 10 mg with clopamide 5 mg	3.15	30	
	(7.10)		Viskaldix

Check your Schedule for full details Schedule page ref	Subsidy (Mnfr's Price) \$	Per	Brand or Generic Mnfr ✓ fully subsidised
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Items to be delisted – effective 1 January 2003 (continued)

66	BETAMETHASONE DIPROPIONATE Crm 0.05% in propylene glycol base	4.33 (12.20)	30 g OP	Diprolene
Note: Diprosone OV listed 1 July 2002 to replace Diprolene cream.				
80	TIOCONAZOLE Pessaries 100 mg with applicator	2.75 (9.20)	3	Gyno-Trosyd
107	ZALCITABINE (ddC) - Special Authority Tab 750 µg	344.50	100	✓Hivid
115	LIGNOCAINE HYDROCHLORIDE - Available on a PSO Inj 1% 20 ml vial	23.70 (26.16)	5	Xylocaine
	Inj 1% 50 ml vial	35.20 (38.80)	5	Xylocaine
a) Only if prescribed on prescription for a dialysis patient or child with rheumatic fever or on a PSO for emergency use.				
130	CHLORDIAZEPOXIDE HYDROCHLORIDE - Month restriction Cap 5 mg	4.77 (5.35)	100	Nova-Pam
	Cap 10 mg	4.95 (5.54)	100	Nova-Pam
133	CYTARABINE - Retail pharmacy-specialist Inj 1 g	118.00	each	✓Pharmacia
	Inj 2 g	150.00	each	✓Pharmacia
134	METHOTREXATE - Hospital pharmacy [HP1]-specialist Inj 500 mg, 20 ml vial [HP1]	80.25 (82.66)	each	Pharmacia
147	BECLOMETHASONE DIPROPIONATE Powder for inhalation, 200 µg per dose, 8 doses per disk	13.50 (18.90)	15 disks	Becodisk 200
149	SALBUTAMOL - Available on a PSO Powder for inhalation, 50 µg per dose, breath activated	10.61	200 dose OP	✓Salbutamol Turbuhaler

▲ Three months supply may be dispensed at one time if endorsed "certified exemption" by the prescriber.

"IMM" Interchangeable Multi-source Medicines

Check your Schedule for full details Schedule page ref	Subsidy (Mnfr's Price) \$	Per	Brand or Generic Mnfr ✓ fully subsidised
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Items to be delisted – effective 1 January 2003 (continued)

154 PHOLCODINE			
‡ Linctus BP	11.00 (22.00)	2,000 ml	Douglas
‡ Linctus strong BP	13.00 (27.50)	2,000 ml	Douglas
156 & 158			
BETAMETHASONE SODIUM PHOSPHATE			
Ear/Eye drops 0.1%	4.50	5 ml OP	✓Betnesol
156 & 158			
BETAMETHASONE SODIUM PHOSPHATE WITH NEOMYCIN			
Ear/Eye drops 0.1% with neomycin sulphate 0.5%	4.50	5 ml OP	✓Betnesol-N
159 DIPIVEFRIN HYDROCHLORIDE - Retail pharmacy-specialist			
▲ Eye drops 0.1%	5.90	10 ml OP	✓Dipoquin

Effective 1 December 2002

28 BISMUTH SUBNITRATE			
Tab 300 mg with frangula bark 25 mg, magnesium carbonate 400 mg and sodium bicarbonate 200 mg	13.50	120	✓Roter
88 PROGESTERONE			
Inj 25 mg per ml, 1 ml	23.29	10	✓Gestone
110 KETOPROFEN - Special Authority available			
Cap long-acting 200 mg	13.44 (32.40)	100	Kefen SR

Effective 1 November 2002

24 PREDNISOLONE SODIUM PHOSPHATE			
Enema 20 mg 100 ml	17.33	7	✓Predsol
45 POTASSIUM CHLORIDE			
Tab long-acting 600 mg	12.31 (16.93)	500	Span K
46 FLUVASTATIN			
Cap 20 mg	6.38	30	✓Lescol ^{IMM}
Cap 40 mg	7.51	30	✓Lescol ^{IMM}

Patients pay a manufacturer's surcharge when
the Manufacturer's Price is greater than the Subsidy

‡ safety cap reimbursed
Sole supplier

Check your Schedule for full details Schedule page ref	Subsidy (Mnfr's Price) \$	Per	Brand or Generic Mnfr ✓ fully subsidised
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Items to be delisted – effective 1 November 2002 (continued)

83 HYDROCORTISONE			
Inj 125 mg per ml, 2 ml - Only on a PSO	7.85	1	✓ Solu-Cortef
Inj 125 mg per ml, 4 ml - Only on a PSO	13.28	1	✓ Solu-Cortef
137 INTERFERON ALPHA-2B - Special Authority			
Inj 3 m iu, 0.5 ml single dose vial	156.60	5	✓ Intron-A
Inj 5 m iu, 0.5 ml single dose vial	261.00	5	✓ Intron-A
Inj 10 m iu solution	522.00	5	✓ Intron-A
Inj 18 m iu, 3 ml multidose vial	187.92	1	✓ Intron-A
Inj 25 m iu solution	1,305.00	5	✓ Intron-A
Note: Inj 18, 30 and 60 m iu multidose pens remain listed and fully subsidised.			

149 SALBUTAMOL			
Powder for inhalation, 200 µg per dose, 8 doses per disk ...	8.12	15 disks	✓ Ventodisk

Effective 1 October 2002

159 BETAXOLOL HYDROCHLORIDE - Retail pharmacy-specialist			
▲ Eye drops 0.5%	7.54 (15.08)	5 ml OP	Betoptic

Effective 1 September 2002

152 IPRATROPIUM BROMIDE - Available on a PSO			
Nebuliser soln, 250 µg per 1 ml, 1 ml	5.90 (7.80)	20	Steri-Nebs
Nebuliser soln, 500 µg per 2 ml, 2 ml	7.55 (11.20)	20	Steri-Nebs

Effective 1 June 2002

155 PEAK FLOW METERS - Only on a WSO			
Normal range - maximum 10 per WSO	17.00	1 OP	✓ Mini Wright

Reinstated 1 May 2002

▲ Three months supply may be dispensed at one time if endorsed "certified exemption" by the prescriber.

"IMM" Interchangeable Multi-source Medicines

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