

Pharmaceutical Management Agency

# Update

# New Zealand Pharmaceutical Schedule

Effective 1 January 2019



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## Summary of PHARMAC decisions

EFFECTIVE 1 JANUARY 2019

### New listings (pages 28-29)

- Colecalciferol (Puria) oral liq 188 mcg per ml (7,500 iu per ml), 4.8 ml OP
- Calcium gluconate (Max Health) inj 10%, 10 ml ampoule – S29 and wastage claimable
- Iron polymaltose (Ferrosig) inj 50 mg per ml, 2 ml ampoule
- Medroxyprogesterone acetate (Provera S29) tab 2.5 mg and 5 mg – see prescribing guidelines, S29 and wastage claimable
- Paracetamol (Pharmacy Health and Paracetamol Pharmacare) tab 500 mg – blister pack – maximum of 300 tab per prescription; can be waived by endorsement, up to 30 tab available on a PSO
- Domperidone (Pharmacy Health) tab 10 mg
- Clozapine (Clozaril) tab 100 mg, 50 and 100 tab pack – Hospital pharmacy [HP4], safety medicine; prescriber may determine dispensing frequency
- Phenobarbitone sodium (Max Health) inj 200 mg per ml, 1 ml ampoule – Special Authority – Retail pharmacy, S29 and wastage claimable
- Varenicline tartrate (Varenicline Pfizer) tab 1 mg and tab 0.5 mg x 11 and 1 mg x 42, 53 OP – Special Authority – Retail pharmacy, varenicline will not be funded in amounts less than 4 weeks of treatment
- Pharmacy services (BSF Entecavir Sandoz) brand switch fee – may only be claimed once per patient
- Desferrioxamine mesilate (DBL Desferrioxamine Mesylate for Injection BP) inj 500 mg vial
- Paediatric oral feed with fibre 1.5kcal/ml (Fortini Multi Fibre) liquid (Unflavoured), 200 ml OP – Special Authority – Hospital pharmacy [HP3]

### Changes to restrictions (pages 30-32)

- Ferrous sulphate (Ferrograd) tab long-acting 325 mg (105 mg elemental) – reinstate stat dispensing
- Propranolol (Cardinol LA) cap long-acting 160 mg – reinstate stat dispensing
- Metolazone (Metolazone and Zaroxlyn) tab 5 mg – Special Authority removed
- Medroxyprogesterone acetate (Provera and Provera S29) tab 2.5 mg and 5 mg – remove stat dispensing
- Entecavir (Entecavir Sandoz) tab 0.5 mg – Brand Switch Fee payable
- Levodopa with carbidopa (Sinemet) tab 250 mg with carbidopa 25 mg – remove stat dispensing
- Phenytoin sodium (Dilantin) oral liq 30 mg per 5 ml – reinstate stat dispensing

## Summary of PHARMAC decisions – effective 1 January 2019 (continued)

- Varenicline tartrate tab 1 mg (Champix and Varenicline Pfizer), tab 0.5 mg x 11 and 1 mg x 14, 25 OP (Champix) and tab 0.5 mg x 11 and 1 mg x 42, 53 OP (Varenicline Pfizer) – amended note and Special Authority criteria
- Aflibercept (Eylea) inj 40 mg per ml, 0.1 ml vial – amended Special Authority criteria

### Increased subsidy (page 33)

- Folic acid (Biomed) oral liq 50 mcg per ml, 25 ml OP
- Hydrocortisone butyrate oint 0.1%, 100 g OP and scalp lotn 0.1%, 100 ml OP (Locoid) and milky emul 0.1%, 100 ml OP (Locoid Crelo)
- Hydrocortisone with natamycin and neomycin (Pimafucort) crm 1% with natamycin 1% and neomycin sulphate 0.5%, 15 g OP and oint 1% with natamycin 1% and neomycin sulphate 0.5%, 15 g OP
- Hyoscine hydrobromide (Scopoderm TTS) patch 1.5 mg
- Oxaliplatin (Baxter) inj 1 mg for ECP
- Doxorubicin hydrochloride (Baxter) inj 1 mg for ECP
- Chloramphenicol (Chlorafast) eye drops 0.5%, 10 ml OP

### Decreased subsidy (page 33)

- Azacitidine (Baxter) inj 1 mg for ECP
- Methotrexate (Trexate) tab 2.5 mg and 10 mg
- Tamoxifen (Genox) tab 20 mg
- Dorzolamide with timolol (Arrow-Dortim) eye drops 2% with timolol 0.5%, 5 ml OP

## News Stories – January 2019 Update

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### New listings

#### Varenicline tartrate (Varenicline Pfizer)

We will be listing the Varenicline Pfizer brand of varenicline tartrate tablets from 1 January 2019. There will be two pack sizes, a starter pack containing 11 x 0.5 mg tablets and 42 x 1 mg tablets (enough for the first 4 weeks' supply) and a 56 tablet pack of 1 mg tablets for the remainder of the 12-week treatment.

The subsidy on Champix brand products will decrease from 1 March 2019 and will be delisted from 1 June 2019. Varenicline Pfizer will be the sole subsidised brand from 1 June 2019.

From 1 January 2019, the restriction requiring a minimum of 2 week's treatment will be changed to a minimum of 4 weeks treatment to reflect the new 4 week initiation pack.

#### Iron polymaltose

The Ferrosig brand of iron polymaltose injection 50 mg per ml, 2 ml ampoule will be listed without restriction from 1 January 2019.

#### Colecalciferol

From 1 January 2019, the Puria brand of colecalciferol oral liquid 188 mcg per ml (7,500 iu per ml), 4.8 ml OP will be listed. Colecalciferol is one form of vitamin D (specifically, vitamin D3) and is used to prevent or treat vitamin D deficiency, which can cause rickets and other conditions.

Puria oral liquid containing 188 mcg of colecalciferol per ml (7,500 iu of vitamin D per ml). This is about 10 mcg (400 iu) of colecalciferol per drop.

Puria is presented in a dropper bottle. Drops of the liquid can be administered straight into the mouth, or can be added to food or drink. One bottle of Puria provides one drop per day for three months.

#### Clozapine (Clozaril)

From 1 January 2019, new packaging with new Pharmacodes will be listed for 100 mg tablets; 50 and 100 tablet pack sizes. The Pharmacode for the current packaging will be delisted 1 July 2019.



## **Desferrioxamine mesilate (DBL Desferrioxamine Mesylate for Injection BP)**

From 1 January 2019, DBL Desferrioxamine Mesylate for Injection (500 mg vial) will be listed. The Novartis brand will be delisted 1 June 2019. The DBL brand will be sole supply from 1 June 2019.

## **Domperidone (Pharmacy Health)**

From 1 January 2019, the Pharmacy Health brand of domperidone 10 mg tablets will be listed. The subsidy on Prokinex will reduce from 1 March 2019, and Prokinex will be delisted from 1 June 2019. The Pharmacy Health brand will be sole supply from 1 June 2019

## **Calcium gluconate (Hospira)**

From 1 January 2019, the Max Health brand of calcium gluconate 10% injection, 10 ml ampoule, will be listed. This product will be supplied via section 29 of the Medicines Act, 1981.

This will allow continuity of supply due to the Hospira brand being delisted 1 July 2019, due to supplier (Pfizer) discontinuation.

## **Paediatric oral feed with fibre – Fortini Multi Fibre – unflavoured**

From 1 January 2019, a new unflavoured Fortini Multi Fibre (paediatric oral feed with fibre 1.5 kcal/ml) liquid will be subsidised. This listing is in addition to the current three flavours (strawberry, vanilla and chocolate), and is subject to the same Special Authority criteria.

## **Phenobarbitone sodium injection**

From 1 January 2019, phenobarbitone sodium 200 mg per ml, 1 ml ampoule, supplied by Aspen will be listed with the brand name Aspen. This will replace the Martindale brand that will be delisted from 1 June 2019. Both brands are supplied via section 29 of the Medicines Act, 1981.

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## Changed listings

### Insulin pump brand change

Some patients being switched from an Animas to a Tandem insulin pump have been told they can return unused Animas consumables to their pharmacy to exchange for Tandem consumables. There is no funding for exchanges. Patients can be dispensed the new consumables only on a new (or repeat) prescription. Pharmacies can suggest the patient contact the supplier, NZMS, regarding return and funding of exchanged consumables as NZMS are managing this.

Please note the restrictions on insulin pump consumables. The maximum is 3 sets per prescription and 13 sets per year. The default dispensing for insulin pump consumables is monthly. Consumables should only be dispensed stat (three months all-at-once) when access exemption applies.

### Aflibercept – Special Authority amendment

The Special Authority criteria applying to aflibercept will be amended from 1 January 2019. The criteria allowing patients currently treated with ranibizumab to continue second line treatment with aflibercept will be removed.

### Metolazone tablets

From 1 January 2019, Special Authority approval will no longer be required to access funded metolazone 5 mg tablets. The Special Authority form will not be available, and applications will be unable to be processed for a few days prior to 1 January 2019.

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## Stock issues

### Medroxyprogesterone acetate (Provera) tab 2.5 mg and 5 mg

Stat dispensing (three months all-at-once) will be removed from medroxyprogesterone acetate 2.5 mg and 5 mg tablets from 1 January 2019 due to a supply issue.

An alternative brand of the 2.5 mg and 5 mg presentations, Provera S29, will be listed from 1 January 2019 in a pack size of 56 tablets. Provera S29 will be supplied via section 29 of the Medicines Act 1981.



## **Paracetamol 500 mg tablets (blister pack) – new brand listings**

We will be listing two new brands of paracetamol 500 mg tablets (blister pack), Pharmacy Health and Paracetamol Pharmacare from 1 January 2019, to help manage the shortage.

API is awaiting registration of both brands. We don't expect them to be available at the start of January. We will inform you when these are registered and available for purchase. This is expected to be sometime during January.

Further supplies of the current paracetamol blister pack have arrived in New Zealand and are being released to wholesalers. The additional stock is estimated to meet current restricted demand for paracetamol however it is not sufficient to remove the dispensing restrictions. Wholesalers will continue to manage supply to pharmacy.

The restrictions currently applying to paracetamol 500 mg tablet dispensing will continue to apply until further notice. Once we are confident that there is sufficient safety stock in the supply chain, we will remove the restrictions. We are hopeful that this issue will be resolved early in the New Year.

More information, and any further updates, can be found on our website page: [www.pharmac.govt.nz/paracetamol](http://www.pharmac.govt.nz/paracetamol)

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## **Delistings**

### **Interferon alfa-2b (Intron-A)**

The supplier of Intron-A (interferon alfa-2b) has discontinued all three strengths of their multidose pen, 18 m iu, 30 m iu and 60 m iu. The interferon alfa-2a presentation remains available at this time and could be considered as an alternative.

### **Beclomethasone dipropionate (Alanase) nasal spray**

The supplier of Alanase (beclomethasone dipropionate) metered aqueous nasal sprays has discontinued both the 50 mcg per dose and 100 mcg per dose packs. Current supplies are expected to be exhausted mid-2019 and will be delisted from 1 January 2020. These products are partially funded.

We have included beclomethasone dipropionate metered aqueous nasal spray in the 2018/19 tender. If a tender is accepted, this will mean that there will be a fully funded product available.

## Bonvit – ispaghula (psyllium) husk

Bonvit (ispaghula (psyllium) husk) was listed as an alternative when Konsyl-D was not available. As Konsyl-D is now available, Bonvit will be delisted 1 March 2019.

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### News in brief

- **Entecavir Sandoz** – a Brand Switch Fee will apply to dispensings of entecavir from 1 January 2019 to 31 March 2019.
- **Ferrous sulphate** (Ferrograd) – tab long-acting 325 mg (105 mg elemental) Stat dispensing (three months all-at-once) will be reinstated.
- **Propranolol** (Cardinol LA) cap long-acting 160 mg - reinstate stat dispensing
- **Phenytoin sodium** (Dilantin) oral liq 30 mg per 5 ml – reinstate stat dispensing.
- **Levodopa with carbidopa** (Sinemet) tab 250 mg with carbidopa 25 mg – remove stat dispensing
- **Pyrazinamide** (AFT-Pyrazinamide S29) – delist from 1 February 2019, as registered stock now available



# Tender News

## Sole Subsidised Supply changes – effective 1 February 2019

<b>Chemical Name</b>	<b>Presentation; Pack size</b>	<b>Sole Subsidised Supply brand (and supplier)</b>
Calamine	Crn, aqueous, BP; 100 g	healthE Calamine Aqueous Cream BP (Jaychem)
Colchicine	Tab 500 mcg; 100 tab	Colgout (Aspen)
Ferrous fumarate	Tab 200 mg (65 mg elemental); 100 tab	Ferro-tab (AFT)
Heparin sodium	Inj 1,000 iu per ml, 5 ml ampoule; 50 inj	Pfizer (Pfizer)
Losartan potassium with hydrochlorothiazide	Tab 50 mg with hydrochlorothiazide 12.5 mg; 30 tab	Arrow-Losartan & Hydrochlorothiazide (Teva)
Metoprolol tartrate	Inj 1 mg per ml, 5 ml vial; 5 inj	Metoprolol IV Mylan (Mylan)
Oil in water emulsion	Crn; 500 g	O/W Fatty Emulsion Cream (Boucher and Muir)
Paraffin	Oint liquid paraffin 50% with white soft paraffin 50%; 500 ml OP	healthE (Jaychem)
Thiamine hydrochloride	Tab 50 mg; 100 tab	Max Health (Max Health)

## Looking Forward

*This section is designed to alert both pharmacists and prescribers to possible future changes to the Pharmaceutical Schedule. It may also assist pharmacists, distributors and wholesalers to manage stock levels.*

### **Decisions for implementation 1 February 2019**

- Alendronate sodium (Fosamax) tab 70 mg – price and subsidy decrease and removal of Special Authority
- Alendronate sodium with colecalciferol (Fosamax plus) tab 70 mg with colecalciferol 5,600 iu – price and subsidy decrease and removal of Special Authority
- Aripiprazole (Aripiprazole Sandoz) tab 5 mg, 10 mg, 15 mg, 20 mg and 30 mg – remove Brand Switch Fee
- Epoetin alfa [erythropoietin alfa] (Binocrit) – inj 1,000 iu in 0.5 ml, syringe, 2,000 iu in 0.5 ml, syringe, 3,000 in 0.3 ml, syringe, 4,000 iu in 0.4 ml, syringe, 5,000 iu in 0.5 ml, syringe, 6,000 iu in 0.6 ml, syringe, 8,000 iu in 0.8 ml, syringe, 10,000 iu in 1 ml, syringe, 40,000 iu in 1 ml, syringe – new listing and amending chemical name
- Gabapentin (Apo-Gabapentin) cap 100 mg, 300 mg and 400 mg – remove Brand Switch Fee
- Oxycodone hydrochloride (Oxycodone Sandoz) tab controlled-release 5 mg, 10 mg, 20 mg, 40 mg and 80 mg – new listing
- Tenofovir disoproxil (Tenofovir Disoproxil Teva) tab 245 mg (300.6 mg as a succinate) – remove Brand Switch Fee

### **Possible decisions for future implementation 1 February 2019**

- Glatiramer acetate (Copaxone) inj 40 mg prefilled syringe – new listing with Special Authority – Retail pharmacy
- Modafinil (Modavigil) tab 100 mg – new pack size listing (60 tab) and price decrease (30 tab)

## Sole Subsidised Supply Products – cumulative to January 2019

Generic Name	Presentation	Brand Name	Expiry Date*
Acarbose	Tab 50 mg & 100 mg	Glucobay	2021
Acetazolamide	Tab 250 mg	Diamox	2020
Acetylcysteine	Inj 200 mg per ml, 10 ml ampoule	DBL Acetylcysteine	2021
Aciclovir	Eye oint 3%, 4.5 g OP Tab dispersible 200 mg, 400 mg & 800 mg	VirusPOS Lovir	2019
Acitretin	Cap 10 mg & 25 mg	Novatretin	2020
Adult diphtheria and tetanus vaccine	Inj 2 IU diphtheria toxoid with 20 IU tetanus toxoid in 0.5 ml	ADT Booster	2020
Alfacalcidol	Cap 0.25 mcg & 1 mcg Oral drops 2 mcg per ml, 20 ml OP	One-Alpha	2020
Allopurinol	Tab 100 mg & 300 mg	DP-Allopurinol	2020
Aminophylline	Inj 25 mg per ml, 10 ml ampoule	DBL Aminophylline	2020
Amiodarone hydrochloride	Inj 50 mg per ml, 3 ml ampoule Tab 100 mg & 200 mg	Lodi Cordarone X	2019
Amisulpride	Tab 100 mg, 200 mg & 400 mg Oral liq 100 mg per ml	Sulprix Solian	2019
Amitriptyline	Tab 10 mg, 25 mg and 50 mg	Arrow-Amitriptyline	2020
Amlodipine	Tab 2.5 mg, 5 mg & 10 mg	Apo-Amlodipine	2020
Amorolfine	Nail soln 5%, 5 ml OP	MycosNail	2020
Amoxicillin	Grans for oral liq 125 mg per 5 ml, 100 ml OP	Alphamox 125	2020
	Grans for oral liq 250 mg per 5 ml, 100 ml OP	Alphamox 250	
	Inj 250 mg, 500 mg and 1 g vials Cap 250 mg & 500 mg	Ibiamox Apo-Amoxi	2019
Amoxicillin with clavulanic acid	Tab 500 mg with clavulanic acid 125 mg	Augmentin	2020
	Grans for oral liq amoxicillin 50 mg with clavulanic acid 12.5 mg per ml, 100 ml OP	Curam	2019
Anastrozole	Tab 1 mg	Rolin	2020
Aprepitant	Cap 2 x 80 mg and 1 x 125 mg, 3 OP	Emend Tri-Pack	2021
Aripiprazole	Tab 5 mg, 10 mg, 15 mg, 20 mg & 30 mg	Aripiprazole Sandoz	2021
Ascorbic acid	Tab 100 mg	Cvite	2019
Aspirin	Tab 100 mg	Ethics Aspirin EC	2019
	Tab dispersible 300 mg	Ethics Aspirin	
Atenolol	Tab 50 mg & 100 mg	Mylan Atenolol	2021
Atorvastatin	Tab 10 mg, 20 mg, 40 mg & 80 mg	Lorstat	2021
<b>Atropine sulphate</b>	<b>Inj 600 mcg per ml, 1 ml ampoule</b> Eye drops 1%, 15 ml OP	<b>Martindale</b> Atropt	<b>2021</b> 2020

\*Expiry date of the Sole Subsidised Supply period is 30 June of the year indicated unless otherwise stated. Please note that Sole Subsidised Supply may have been awarded for a wider scope than just those presentation(s) listed in the above table.

## Sole Subsidised Supply Products – cumulative to January 2019

Generic Name	Presentation	Brand Name	Expiry Date*
Azathioprine	Tab 25 mg & 50 mg Inj 50 mg vial	Imuran	2019
<b>Azithromycin</b>	<b>Grans for oral liq 200 mg per 5 ml (40 mg per ml)</b> Tab 250 mg & 500 mg	<b>Zithromax</b> Apo-Azithromycin	<b>2021</b>
Baclofen	Tab 10 mg	Pacifen	2021
Bendroflumethiazide [bendrofluazide]	Tab 2.5 mg & 5 mg	Arrow- Bendrofluazide	2020
<b>Benzathine benzylpenicillin</b>	<b>Inj 900 mg (1.2 million units) in 2.3 ml syringe</b>	<b>Bicillin LA</b>	<b>2021</b>
Benzylpenicillin sodium [penicillin G]	Inj 600 mg (1 million units) vial	Sandoz	2020
Bethahistine dihydrochloride	Tab 16 mg	Vergo 16	2020
<b>Betamethasone dipropionate with calcipotriol</b>	<b>Oint 500 mcg with calcipotriol 50 mcg per g, 30 g OP</b>	<b>Daivobet</b>	<b>2021</b>
<b>Betamethasone valerate</b>	<b>Lotn 0.1%, 50 ml OP</b> Crm 0.1%, 50 g OP Oint 0.1%, 50 g OP Scalp app 0.1%, 100 ml OP	<b>Betnovate</b> Beta Cream Beta Ointment Beta Scalp	<b>2021</b>
<b>Bezafibrate</b>	<b>Tab 200 mg</b> <b>Tab long-acting 400 mg</b>	<b>Bezalip</b> <b>Bezalip Retard</b>	<b>2021</b>
Bicalutamide	Tab 50 mg	Binarex	2020
Bisacodyl	Tab 5 mg Suppos 10 mg	Lax-Tab Lax-Suppositories	2021
Bisoprolol fumarate	Tab 2.5 mg, 5 mg & 10 mg	Bosvate	2020
Blood glucose diagnostic test meter	Meter with 50 lancets, a lancing device and 10 diagnostic test strips, 1 OP	CareSens N CareSens N POP CareSens N Premier	2022
Blood glucose diagnostic test strip	Test strips, 50 test OP	CareSens N CareSens PRO	2022
Blood ketone diagnostic test strip	Test strips, 10 strip OP	KetoSens	2022
Brimonidine tartrate	Eye drops 0.2%, 5 ml OP	Arrow-Brimonidine	2020
<b>Budesonide</b>	<b>Metered aqueous nasal spray, 50 mcg per dose &amp; 100 mcg per dose, 200 dose OP</b>	<b>SteroClear</b>	<b>2020</b>
Bupropion hydrochloride	Tab modified-release 150 mg	Zyban	2020
Buspirone hydrochloride	Tab 5 mg & 10 mg	Orion	2021
Cabergoline	Tab 0.5 mg, 2 & 8 tab	Dostinex	2021
Calcipotriol	Oint 50 mcg per g, 100 g OP	Daivonex	2020
Calcitriol	Cap 0.25 mcg & 0.5 mcg	Calcitriol-AFT	2019

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## Sole Subsidised Supply Products – cumulative to January 2019

Generic Name	Presentation	Brand Name	Expiry Date*
Calcium carbonate	Tab 1.25 g (500 mg elemental)	Arrow-Calcium	2020
Candesartan cilexetil	Tab 4 mg, 8 mg, 16 mg & 32 mg	Candestar	2021
Capecitabine	Tab 150 mg & 500 mg	Brinov	2019
Carvedilol	Tab 6.25 mg, 12.5 mg & 25 mg	Carvedilol Sandoz	2020
Cefaclor monohydrate	Grans for oral liq 125 mg per 5 ml Cap 250 mg	Ranbaxy-Cefaclor	2019
Cefalexin	Grans for oral liq 25 mg per ml	Cefalexin Sandoz	2021
	Grans for oral liq 50 mg per ml Cap 250 mg & 500 mg	Cephalexin ABM	2019
Cefazolin	Inj 500 mg & 1 g vials	AFT	2020
Ceftriaxone	Inj 500 mg & 1 g vial	DEVA	2019
Celecoxib	Cap 100 mg & 200 mg	Celecoxib Pfizer	2020
Cetirizine hydrochloride	Tab 10 mg	Zista	2019
Cetomacrogol	Crn BP, 500 g	healthE	2021
Cetomacrogol with glycerol	Crn 90% with glycerol 10%, 500 ml OP & 1,000 ml OP	Pharmacy Health Sorbolene with Glycerin	2019
Chloramphenicol	Eye oint 1%, 4 g OP	Chlorsig	2019
Ciclopirox olamine	Nail-soln 8%, 7 ml OP	Apo-Ciclopirox	2021
Cilazapril	Tab 2.5 mg & 5 mg	Apo-Cilazapril	2019
Cilazapril with hydrochlorothiazide	Tab 5 mg with hydrochlorothiazide 12.5 mg	Apo-Cilazapril/ Hydrochlorothiazide	2019
Cinacalcet	Tab 30 mg	Sensipar	2021
Ciprofloxacin	Eye drops 0.3%, 5 ml OP	Ciprofloxacin Teva Cipflox	2020
	Tab 250 mg, 500 mg & 750 mg		
Citalopram hydrobromide	Tab 20 mg	PSM Citalopram	2021
Clarithromycin	Tab 250 mg & 500 mg	Apo-Clarithromycin	2020
Clindamycin	Cap hydrochloride 150 mg	Clindamycin ABM Dalacin C	2019
	Inj phosphate 150 mg per ml, 4 ml ampoule		
Clobetasol propionate	Crn 0.05%, 30 g OP	Dermol	2019
	Oint 0.05%, 30 g OP		
Clomipramine hydrochloride	Tab 10 mg & 25 mg	Apo-Clomipramine	2021
Clonazepam	Tab 500 mcg & 2 mg	Paxam	2021
Clonidine	Patch 2.5 mg, 100 mcg per day	Mylan	2020
	Patch 5 mg, 200 mcg per day		
	Patch 7.5 mg, 300 mcg per day		
<b>Clonidine hydrochloride</b>	<b>Inj 150 mcg per ml, 1 ml ampoule</b> Tab 25 mcg	<b>Medsurge</b> Clonidine BMN	<b>2021</b>

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## Sole Subsidised Supply Products – cumulative to January 2019

Generic Name	Presentation	Brand Name	Expiry Date*
Clopidogrel	Tab 75 mg	Arrow - Clopid	2019
Clotrimazole	Crn 1%; 20 g OP Vaginal crm 1% with applicators, 35 g OP Vaginal crm 2% with applicators, 20 g OP	Clomazol	2020 2019
Coal tar	Soln BP	Midwest	2019
Codeine phosphate	Tab 15 mg, 30 mg & 60 mg	PSM	2019
Colecalciferol	Cap 1.25 mg (50,000 iu)	Vit.D3	2020
Compound electrolytes	Powder for oral soln	Enerlyte	2019
Compound electrolytes with glucose [dextrose]	Soln with electrolytes (2 x 500 ml), 1,000 ml OP	Pedialyte – bubblegum	2021
Crotamiton	Crn 10%, 20 g OP	Itch-soothe	2021
Cyproterone acetate with ethinyloestradiol	Tab 2 mg with ethinyloestradiol 35 mcg and 7 inert tabs	Ginet	2020
Darunavir	Tab 400 mg & 600 mg	Prezista	2020
Desmopressin acetate	Nasal spray 10 mcg per dose, 6 ml OP Tab 100 mcg & 200 mcg	Desmopressin-Ph&T Minirin	2020 2019
Dexamethasone	Tab 0.5 mg & 4 mg	Dexmethsone	2021
Dexamfetamine sulfate	Tab 5 mg	PSM	2021
Diazepam	Tab 2 mg & 5 mg	Arrow-Diazepam	2020
Diclofenac sodium	Tab EC 25 mg & 50 mg Tab long-acting 75 mg & 100 mg	Diclofenac Sandoz Apo-Diclo SR	2021
Digoxin	Tab 62.5 mcg Tab 250 mcg	Lanoxin PG Lanoxin	2019
Dihydrocodeine tartrate	Tab long-acting 60 mg	DHC Continus	2019
Diltiazem hydrochloride	Cap long-acting 120 mg, 180 mg & 240 mg	Apo-Diltiazem CD	2021
Dimethicone	Crn 10% pump bottle, 500 ml OP Lotn 4%, 200 ml OP Crn 5%, pump bottle, 500 ml OP	healthE Dimethicone 10% healthE Dimethicone 4% Lotion healthE Dimethicone 5%	2021 2019
Diphtheria, tetanus and pertussis vaccine	Inj 2 IU diphtheria toxoid with 20 IU tetanus toxoid, 8 mcg pertussis toxoid, 8 mcg pertussis filamentous haemagglutinin and 2.5 mcg pertactin in 0.5 ml syringe	Boostrix	2020

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## Sole Subsidised Supply Products – cumulative to January 2019

Generic Name	Presentation	Brand Name	Expiry Date*
Diphtheria, tetanus, pertussis and polio vaccine	Inj 30 IU diphtheria toxoid with 40 IU tetanus toxoid, 25 mcg pertussis toxoid, 25 mcg pertussis filamentous haemagglutinin, 8 mcg pertactin and 80 D-antigen units poliomyelitis virus in 0.5ml syringe	Infanrix IPV	2020
Diphtheria, tetanus, pertussis, polio, hepatitis B and haemophilus influenzae type B vaccine	Inj 30IU diphtheria toxoid with 40IU tetanus toxoid, 25mcg pertussis toxoid, 25mcg pertussis filamentous haemagglutinin, 8 mcg pertactin, 80 D-antigen units poliomyelitis virus, 10 mcg hepatitis B surface antigen in 0.5 ml syringe	Infanrix-hexa	2020
Dipyridamole	Tab long-acting 150 mg	Pytazen SR	2019
Docusate sodium	Tab 50 mg & 120 mg	Coloxyl	2020
Docusate sodium with sennosides	Tab 50 mg with sennosides 8 mg	Laxsol	2021
Donepezil hydrochloride	Tab 5 mg & 10 mg	Donepezil-Rex	2020
Doxazosin	Tab 2 mg & 4 mg	Apo-Doxazosin	2020
Dual blood glucose and blood ketone diagnostic test meter	Meter with 50 lancets, a lancing device and 10 blood glucose diagnostic test strips, 1 OP	CareSens Dual	2022
Emulsifying ointment	Oint BP; 500 g	AFT	2020
Entacapone	Tab 200 mg	Entapone	2021
<b>Eplerenone</b>	<b>Tab 50 mg</b> Tab 25 mg	<b>Inspra</b>	<b>2021</b>
Ergometrine maleate	Inj 500 mcg per ml, 1 ml ampoule	DBL Ergometrine	2020
Escitalopram	Tab 10 mg & 20 mg	Escitalopram-Apotex	2020
Ethinylestradiol	Tab 10 mcg	NZ Medical & Scientific	2021
Ethinylestradiol with levonorgestrel	Tab 20 mcg with levonorgestrel 100 mcg and 7 inert tablets Tab 30 mcg with levonorgestrel 150 mcg and 7 inert tablets	Microgynon 20 ED  Levlen ED	2020
Exemestane	Tab 25 mg	Pfizer Exemestane	2020
Ezetimibe	Tab 10 mg	Ezetimibe Sandoz	2020
Felodipine	Tab long-acting 2.5 mg	Plendil ER	2021
Fentanyl	Inj 50 mcg per ml, 2 ml ampoule Inj 50 mcg per ml, 10 ml ampoule Patch 12.5 mcg per hour Patch 25 mcg per hour Patch 50 mcg per hour Patch 75 mcg per hour Patch 100 mcg per hour	Boucher and Muir  Fentanyl Sandoz	2021  2020

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## Sole Subsidised Supply Products – cumulative to January 2019

Generic Name	Presentation	Brand Name	Expiry Date*
Ferrous fumarate with folic acid	Tab 310 mg (100 mg elemental) with folic acid 350 mcg	Ferro-F-Tabs	2021
Ferrous sulphate	Tab long-acting 325 mg (105 mg elemental)	Ferrograd	2021
	Oral liq 30 mg (6 mg elemental) per ml	Ferodan	2019
Finasteride	Tab 5 mg	Ricit	2020
Flucloxacillin	Grans for oral liq 25 mg per ml	AFT	2021
	Grans for oral liq 50 mg per ml	Staphlex Flucil Flucloxin	2020
	Cap 250 mg & 500 mg		
	Inj 1 g vial		
Inj 250 mg & 500 mg vials			
Fluconazole	Cap 50 mg, 150 mg and 200 mg	Mylan	2020
Fludarabine phosphate	Tab 10 mg	Fludara Oral	2021
Fluorouracil sodium	Crn 5%, 20 g OP	Efudix	2021
Fluoxetine hydrochloride	Cap 20 mg	Arrow-Fluoxetine	2019
	Tab dispersible 20 mg, scored		
Fluticasone propionate	Metered aqueous nasal spray, 50 mcg per dose, 120 dose OP	Flixonase Hayfever & Allergy	2021
Folic acid	Tab 0.8 mg & 5 mg	Apo-Folic Acid	2021
Furosemide [frusemide]	Inj 10 mg per ml, 2 ml ampoule	Frusemide-Claris	2019
Gabapentin	Cap 100 mg, 300 mg & 400 mg	Apo-Gabapentin	2021
Gemfibrozil	Tab 600 mg	Lipazil	2019
Glibenclamide	Tab 5 mg	Daonil	2021
Gliclazide	Tab 80 mg	Glizide	2020
<b>Glipizide</b>	<b>Tab 5 mg</b>	<b>Minidiab</b>	<b>2021</b>
Glucose [dextrose]	Inj 50%, 10 ml ampoule	Biomed	2020
	Inj 50%, 90 ml bottle		
Glycerol	Suppos 3.6 g	PSM healthE Glycerol BP	2021
	Liquid		2020
Goserelin	Implant 3.6 mg & 10.8 mg syringe	Zoladex	2019
Haemophilus influenzae type B vaccine	Haemophilus influenzae type B polysaccharide 10 mcg conjugated to tetanus toxoid as carrier protein 20-40 mcg; prefilled syringe plus vial 0.5 ml	Hiberix	2020
Haloperidol	Tab 500 mcg, 1.5 mg & 5 mg	Serenace	2019
	Oral liq 2 mg per ml		
	Inj 5 mg per ml, 1 ml ampoule		
Heparin sodium	Inj 5,000 iu per ml, 5 ml ampoule	Pfizer	2021
Hepatitis A vaccine	Inj 720 ELISA units in 0.5 ml syringe	Havrix Junior	2020
	Inj 1440 ELISA units in 1 ml syringe	Havrix	

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## Sole Subsidised Supply Products – cumulative to January 2019

Generic Name	Presentation	Brand Name	Expiry Date*
Hepatitis B recombinant vaccine	Inj 5 mcg per 0.5 ml vial Inj 40 mcg per 1 ml vial	HBvaxPRO	2020
Human papillomavirus (6, 11, 16, 18, 31, 33, 45, 52 and 58) vaccine [HPV]	Inj 270 mcg in 0.5 ml syringe	Gardasil 9	2020
Hydrocortisone	Tab 5 mg & 20 mg Powder Crn 1%, 30 g OP Crn 1%, 500 g Inj 100 mg vial	Douglas ABM DermAssist Pharmacy Health Solu-Cortef	2021 2020 2019
Hydrocortisone and paraffin liquid and lanolin	Lotn 1% with paraffin liquid 15.9% and lanolin 0.6%, 250 ml	DP Lotn HC	2020
Hydrocortisone with miconazole	Crn 1% with miconazole nitrate 2%, 15 g OP	Micreme H	2021
Hydroxocobalamin	Inj 1 mg per ml, 1 ml ampoule	Neo-B12	2021
Hydroxychloroquine	Tab 200 mg	Plaquenil	2021
Hyoscine butylbromide	Tab 10 mg	Buscopan	2020
Ibuprofen	Tab 200 mg	Relieve	2020
Imatinib mesilate	Cap 100 mg & 400 mg	Imatinib-AFT	2020
Imiquimod	Crn 5%, 250 mg sachet	Perrigo	2020
Indapamide	Tab 2.5 mg	Dapa-Tabs	2019
Ipratropium bromide	Aqueous nasal spray 0.03%, 15 ml OP Nebuliser soln, 250 mcg per ml, 1 ml ampoule Nebuliser soln, 250 mcg per ml, 2 ml ampoule	Univent	2020 2019
Isoniazid	Tab 100 mg	PSM	2021
Isoniazid with rifampicin	Tab 100 mg with rifampicin 150 mg & 150 mg with rifampicin 300 mg	Rifinah	2021
Isosorbide mononitrate	Tab 20 mg Tab long-acting 60 mg Tab long-acting 40 mg	Ismo 20 Duride Ismo 40 Retard	2020 2019
<b>Isotretinoin</b>	<b>Cap 10 mg &amp; 20 mg</b> Cap 5 mg	<b>Oratane</b>	<b>2021</b>
Ispaghula (psyllium) husk	Powder for oral soln, 500 g OP	Konsyl-D	2020
Itraconazole	Cap 100 mg	Itrazole	2019
Ketoconazole	Shampoo 2%, 100 ml OP	Sebizole	2020
Lactulose	Oral liq 10 g per 15 ml	Laevolac	2019
Lamivudine	Tab 100 mg	Zetlam	2020
Lansoprazole	Cap 15 mg & 30 mg	Lanzol Relief	2021

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## Sole Subsidised Supply Products – cumulative to January 2019

Generic Name	Presentation	Brand Name	Expiry Date*
Leflunomide	Tab 10 mg & 20 mg	Apo-Leflunomide	2020
Letrozole	Tab 2.5 mg	Letrole	2021
Levetiracetam	Oral liq 100 mg per ml, 300 ml OP	Levetiracetam-AFT	2020
Levodopa with carbidopa	Tab 250 mg with carbidopa 25 mg Tab long-acting 200 mg with carbidopa 50 mg	Sinemet Sinemet CR	2020
Levomepromazine hydrochloride	Inj 25 mg per ml, 1 ml ampoule	Wockhardt	2019
Levonorgestrel	Subdermal implant (2 x 75 mg rods) Tab 1.5 mg Intra-uterine system 20 mcg per day	Jadelle Postinor-1 Mirena	2020 2019
Lidocaine [lignocaine] hydrochloride	Oral (gel) soln 2%	Mucosoothe	2020
<b>Lisinopril</b>	<b>Tab 5 mg, 10 mg &amp; 20 mg</b>	<b>Ethics Lisinopril</b>	<b>2021</b>
Loperamide hydrochloride	Tab 2 mg Cap 2 mg	Nodia Diamide Relief	2019
Lopinavir with ritanovir	Tab 200 mg with ritonavir 50 mg	Kaletra	2020
Loratadine	Oral liq 1 mg per ml, 120 ml Tab 10 mg	Lorfast Lorafix	2019
Lorazepam	Tab 1 mg & 2.5 mg	Ativan	2021
Losartan potassium	Tab 12.5 mg, 25 mg, 50 mg and 100 mg	Losartan Actavis	2020
Macrogol 3350 with potassium chloride, sodium bicarbonate and sodium chloride	Powder for oral soln 13.125 g with potassium chloride 46.6 mg, sodium bicarbonate 178.5 mg and sodium chloride 350.7 mg	Molaxole	2020
Magnesium sulphate	Inj 2 mmol per ml, 5 ml ampoule	DBL	2020
Measles, mumps and rubella vaccine	Inj, measles virus 1,000 CCID50, mumps virus 5,012 CCID50, Rubella virus 1,000 CCID50; prefilled syringe/ampoule of diluent 0.5 ml	Priorix	2020
Medroxyprogesterone acetate	Tab 2.5 mg, 5 mg & 10 mg Tab 100 mg Inj 150 mg per ml, 1 ml syringe	Provera Provera HD Depo-Provera	2019
Megestrol acetate	Tab 160 mg	Apo-Megestrol	2021
Meningococcal C conjugate vaccine	Inj 10 mcg in 0.5 ml syringe	Neisvac-C	2020
Meningococcal (Groups A, C, Y and W-135) conjugate vaccine	Inj 4 mcg of each meningococcal polysaccharide conjugated to a total of approximately 48 mcg of diphtheria toxoid carrier per 0.5 ml vial	Menactra	2020

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## Sole Subsidised Supply Products – cumulative to January 2019

Generic Name	Presentation	Brand Name	Expiry Date*
Methadone hydrochloride	Oral liq 2 mg per ml Oral liq 5 mg per ml Oral liq 10 mg per ml	Biodone Biodone Forte Biodone Extra Forte	2021
Methotrexate	Inj 100 mg per ml, 50 ml vial Inj 25 mg per ml, 2 ml & 20 ml vials	Methotrexate Ebewe DBL Methotrexate Onco-Vial	2020 2019
<b>Methylprednisolone</b>	<b>Tab 4 mg &amp; 100 mg</b>	<b>Medrol</b>	<b>2021</b>
<b>Methylprednisolone acetate</b>	<b>Inj 40 mg per ml, 1 ml vial</b>	<b>Depo-Medrol</b>	<b>2021</b>
<b>Methylprednisolone (as sodium succinate)</b>	<b>Inj 1 g vial Inj 40 mg, 125 mg &amp; 500 mg vial</b>	<b>Solu-Medrol Solu-Medrol-Act-O-Vial</b>	<b>2021</b>
Metoclopramide hydrochloride	Tab 10 mg	Metoclopramide Actavis 10	2020
Metoprolol succinate	Tab long-acting 23.75 mg, 47.5 mg, 95 mg & 190 mg	Betaloc CR	2020
Metoprolol tartrate	Tab 50 mg & 100 mg	Apo-Metoprolol	2021
Miconazole	Oral gel 20 mg per g, 40 g OP	Decozol	2021
Miconazole nitrate	Crn 2%; 15 g OP Vaginal crn 2% with applicator, 40 g OP	Multichem Micreme	2020
Mirtazapine	Tab 30 mg & 45 mg	Apo-Mirtazapine	2021
Misoprostol	Tab 200 mcg	Cytotec	2019
Mitomycin C	Inj 5 mg vial	Arrow	2019
Mometasone furoate	Crn 0.1%, 15 g OP & 50 g OP Lotn 0.1%, 30 ml OP Oint 0.1%, 15 g OP & 50 g OP	Elocon Alcohol Free Elocon	2021
Montelukast	Tab 4 mg, 5 mg & 10 mg	Apo-Montelukast	2019
<b>Morphine hydrochloride</b>	<b>Oral liq 1 mg per ml, 2 mg per ml, 5 mg per ml &amp; 10 mg per ml</b>	<b>RA-Morph</b>	<b>2021</b>
Morphine sulphate	Tab immediate-release 10 mg & 20 mg Inj 5 mg per ml, 1 ml ampoule Inj 10 mg per ml, 1 ml ampoule Inj 15 mg per ml, 1 ml ampoule Inj 30 mg per ml, 1 ml ampoule Tab long-acting 10 mg, 30 mg, 60 mg & 100 mg	Sevredol DBL Morphine Sulphate  Arrow-Morphine LA	2020  2019
Morphine tartrate	Inj 80 mg per ml, 1.5 ml ampoule	DBL Morphine Tartrate	2019
Nadolol	Tab 40 mg & 80 mg	Apo-Nadolol	2021
Naloxone hydrochloride	Inj 400 mcg per ml, 1 ml ampoule	DBL Naloxone Hydrochloride	2021
Naltrexone hydrochloride	Tab 50 mg	Naltraccord	2020

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## Sole Subsidised Supply Products – cumulative to January 2019

Generic Name	Presentation	Brand Name	Expiry Date*
Naproxen	Tab 250 mg	Noflam 250	2021
	Tab 500 mg	Noflam 500	
	Tab long-acting 750 mg	Naprosyn SR 750	
	Tab long-acting 1 g	Naprosyn SR 1000	
Neostigmine metisulfate	Inj 2.5 mg per ml, 1 ml ampoule	AstraZeneca	2020
Nevirapine	Tab 200 mg	Nevirapine Alphapharm	2021
Nicotine	Gum 2 mg & 4 mg (Fruit & Mint)	Habitrol	2020
	Lozenge 1 mg & 2 mg		
	Patch 7 mg, 14 mg & 21 mg		
	Gum 2 mg & 4 mg (Fruit & Mint) for direct distribution only		
	Lozenge 1 mg & 2 mg for direct distribution only		
Nicotinic acid	Patch 7 mg, 14 mg & 21 mg for direct distribution only	Apo-Nicotinic Acid	2020
	Patch 7 mg, 14 mg & 21 mg for direct distribution only		
Nicotinic acid	Tab 50 mg & 500 mg	Apo-Nicotinic Acid	2020
Nifedipine	Tab long-acting 60 mg	Adalat Oros	2020
Norethisterone	Tab 350 mcg	Noriday 28	2021
Nortriptyline hydrochloride	Tab 10 mg & 25 mg	Norpress	2019
Nystatin	Oral liq 100,000 u per ml, 24 ml OP	Nilstat	2020
	Vaginal crm 100,000 u per 5 g with applicator(s), 75 g OP		
Octreotide	Inj 50 mcg per ml, 1 ml vial	DBL Octreotide	2020
	Inj 100 mcg per ml, 1 ml vial		
	Inj 500 mcg per ml, 1 ml vial		
Oestradiol	Patch 25 mcg per day	Estradot Estradot 50 mcg Estradot Estradot	2019
	Patch 50 mcg per day		
	Patch 75 mcg per day		
	Patch 100 mcg per day		
Oestradiol valerate	Tab 1 mg & 2 mg	Progynova	2021
Oestriol	Crn 1 mg per g with applicator, 15 g OP	Ovestin	2020
	Pessaries 500 mcg		
Olanzapine	Inj 210 mg, 300 mg & 405 mg vial	Zyprexa Relprevv	2021
	Tab 2.5 mg, 5 mg & 10 mg	Zypine	2020
	Tab orodispersible 5 mg & 10 mg	Zypine ODT	
Omeprazole	Cap 10 mg	Omeprazole actavis 10	2020
	Cap 20 mg	Omeprazole actavis 20	
	Cap 40 mg	Omeprazole actavis 40	
	Inj 40 mg ampoule with diluent	Dr Reddy's Omeprazole	

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## Sole Subsidised Supply Products – cumulative to January 2019

Generic Name	Presentation	Brand Name	Expiry Date*
Ondansetron	Tab disp 4 mg & 8 mg	Ondansetron ODT-DRLA	2020
	Tab 4 mg & 8 mg	Apo-Ondansetron	2019
Ornidazole	Tab 500 mg	Arrow-Ornidazole	2019
Orphenadrine citrate	Tab 100 mg	Norflex	2021
Oxazepam	Tab 10 mg & 15 mg	Ox-Pam	2020
Oxybutynin	Oral liq 5 mg per 5 ml	Apo-Oxybutynin	2019
	Tab 5 mg		
Oxycodone hydrochloride	Cap immediate-release 5 mg, 10 mg & 20 mg	OxyNorm	2021
	Inj 10 mg per ml, 1 ml & 2 ml ampoule		
	Inj 50 mg per ml, 1 ml ampoule		
Oxytocin	Inj 5 iu per ml, 1 ml ampoule	Oxytocin BNM	2021
	Inj 10 iu per ml, 1 ml ampoule		
Oxytocin with ergometrine maleate	Inj 5 iu with ergometrine maleate 500 mcg per ml, 1 ml	Syntometrine	2021
Pancreatic enzyme	Cap pancreatin 150 mg (amylase 8,000 PH Eur U, lipase 10,000 Ph Eur U, total protease 600 Ph Eur U)	Creon 10000	2021
	Cap pancreatin 300 mg (amylase 18,000 PH Eur U, lipase 25,000 PH Eur U, total protease 1,000 Ph Eur U)	Creon 25000	
Pamidronate disodium	Inj 3 mg per ml, 10 ml vial	Pamisol	2020
	Inj 6 mg per ml, 10 ml vial		
	Inj 9 mg per ml, 10 ml vial		
Pantoprazole	Tab EC 20 mg & 40 mg	Panzop Relief	2019
Paracetamol	Suppos 125 mg & 250 mg	Gacet	2021
	Oral liq 250 mg per 5 ml	Paracare Double Strength	2020
	Oral liq 120 mg per 5 ml	Paracare	
	Tab 500 mg – bottle pack Tab 500 mg – blister pack	Pharmacare	
Paracetamol with codeine	Tab paracetamol 500 mg with codeine phosphate 8 mg	Paracetamol + Codeine (Relieve)	2020
Paroxetine	Tab 20 mg	Apo-Paroxetine	2019
Pegylated interferon alpha-2a	Inj 180 mcg prefilled syringe	Pegasys	2020
Perhexiline maleate	Tab 100 mg	Pexsig	2019
Perindopril	Tab 2 mg & 4 mg	Apo-Perindopril	2020
Permethrin	Crn 5%, 30 g OP	Lyderm A-Scabies	2020
	Lotn 5%, 30 ml OP		

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## Sole Subsidised Supply Products – cumulative to January 2019

Generic Name	Presentation	Brand Name	Expiry Date*
Pethidine hydrochloride	Tab 50 mg Inj 50 mg per ml, 1 ml & 2 ml ampoules	PSM DBL Pethidine Hydrochloride	2021 2020
Phenobarbitone	Tab 15 mg & 30 mg	PSM	2021
Phenoxymethylpenicillin (penicillin V)	Cap 250 mg & 500 mg Grans for oral liq 125 mg per 5 ml Grans for oral liq 250 mg per 5 ml	Cilicaine VK AFT	2021 2019
Pindolol	Tab 5 mg, 10 mg & 15 mg	Apo-Pindolol	2021
Pine tar with troamine laurilsulfate and fluorescein	Soln 2.3% with troamine laurilsulfate and fluorescein sodium, 500 ml	Pinetarsol	2020
Pioglitazone	Tab 15 mg, 30 mg & 45 mg	Vexazone	2021
Pneumococcal (PCV10) conjugate vaccine	Inj 1 mcg of pneumococcal polysaccharide serotypes 1, 5, 6B, 7F, 9V, 14 and 23F; 3 mcg of pneumococcal polysaccharide serotypes 4, 18C and 19F in 0.5 ml prefilled syringe	Synflorix	2020
Pneumococcal (PPV23) polysaccharide vaccine	Inj 575 mcg in 0.5 ml prefilled syringe (25 mcg of each 23 pneumococcal serotype)	Pneumovax 23	2020
Poliomyelitis vaccine	Inj 80D antigen units in 0.5 ml syringe	IPOL	2020
Poloxamer	Oral drops 10%, 30 ml OP	Coloxyl	2020
Polyvinyl alcohol	Eye drops 1.4%, 15 ml OP Eye drops 3%, 15 ml OP	Vistil Vistil Forte	2019
Potassium chloride	Tab long-acting 600 mg (8 mmol)	Span-K	2021
Potassium citrate	Oral liq 3 mmol per ml, 200 ml OP	Biomed	2021
Pramipexole hydrochloride	Tab 0.25 mg & 1 mg	Ramipex	2019
Pravastatin	Tab 20 mg and 40 mg	Apo-Pravastatin	2020
Prednisolone	Oral liq 5 mg per ml, 30 ml OP	Redipred	2021
Prednisone	Tab 1 mg, 2.5 mg, 5 mg & 20 mg	Apo-Prednisone	2020
Pregabalin	Cap 25 mg, 75 mg, 150 mg & 300 mg	Pregabalin Pfizer	2021
Pregnancy tests - HCG urine	Cassette, 40 test OP	Smith BioMed Rapid Pregnancy Test	2020
Procaine penicillin	Inj 1.5 g in 3.4 ml syringe	Cilicaine	2020
Prochlorperazine	Tab 5 mg	Nausafix	2020
Progesterone	Cap 100 mg	Ultrogestan	2019
Promethazine hydrochloride	Tab 10 mg & 25 mg Oral liq 1 mg per 1 ml Inj 25 mg per ml, 2 ml ampoule	Allersoothe Hospira	2021 2019

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Generic Name	Presentation	Brand Name	Expiry Date*
Propranolol	Tab 10 mg & 40 mg	Apo-Propranolol	2021
Pyridostigmine bromide	Tab 60 mg	Mestinon	2019
Pyridoxine hydrochloride	Tab 25 mg Tab 50 mg	Vitamin B6 25 Apo-Pyridoxine	2020
Quetiapine	Tab 25 mg, 100 mg, 200 mg & 300 mg	Quetapel	2020
Quinapril	Tab 5 mg Tab 10 mg Tab 20 mg	Arrow-Quinapril 5 Arrow-Quinapril 10 Arrow-Quinapril 20	2021
<b>Quinapril with hydrochlorothiazide</b>	<b>Tab 10 mg with hydrochlorothiazide 12.5 mg</b> <b>Tab 20 mg with hydrochlorothiazide 12.5 mg</b>	<b>Accuretic 10</b> <b>Accuretic 20</b>	<b>2021</b>
Ranitidine	Tab 150 mg & 300 mg Oral liq 150 mg per 10 ml	Ranitidine Relief Peptisoothie	2020
Rifabutin	Cap 150 mg	Mycobutin	2019
Rifampicin	Cap 150 mg & 300 mg Oral liq 100 mg per 5 ml	Rifadin	2020
Rifaximin	Tab 550 mg	Xifaxan	2020
Riluzole	Tab 50 mg	Rilutek	2021
Risedronate sodium	Tab 35 mg	Risedronate Sandoz	2019
Risperidone	Tab 0.5 mg, 1 mg, 2 mg, 3 mg and 4 mg Oral liq 1 mg per ml	Actavis Risiperon	2020
Rizatriptan	Tab orodispersible 10 mg	Rizamelt	2020
Ropinirole hydrochloride	Tab 0.25 mg, 1 mg, 2 mg & 5 mg	Apo-Ropinirole	2019
Rotavirus vaccine	Oral susp live attenuated human rotavirus 1,000,000 CCID50 per dose, prefilled oral applicator	Rotarix	2020
Salbutamol	Oral liq 400 mcg per ml Nebuliser soln, 1 mg per ml, 2.5 ml ampoule Nebuliser soln, 2 mg per ml, 2.5 ml ampoule	Ventolin Asthalin	2021
Salbutamol with ipratropium bromide	Nebuliser soln, 2.5 mg with ipratropium bromide 0.5 mg per vial, 2.5 ml ampoule	Duolin	2021
Sertraline	Tab 50 mg & 100 mg	Arrow-Sertraline	2019
Sildenafil	Tab 100 mg Tab 25 mg & 50 mg	Vedafil	2021
Simvastatin	Tab 10 mg, 20 mg, 40 mg and 80 mg	Simvastatin Mylan	2020

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Generic Name	Presentation	Brand Name	Expiry Date*
Sodium chloride	Inj 0.9%, 10 ml ampoule	Pfizer	2019
	Inj 23.4% (4 mmol/ml), 20 ml ampoule	Biomed	
	Inj 0.9%, bag; 500 ml & 1,000 ml	Baxter	
Sodium citro-tartrate	Grans eff 4 g sachets	Ural	2020
Sodium fusidate [fusidic acid]	Tab 250 mg	Fucidin	2020
Sodium polystyrene sulphonate	Powder, 454 g OP	Resonium-A	2021
Somatropin	Inj 5 mg, 10 mg & 15 mg	Omnitrope	2021
Sotalol	Tab 80 mg & 160 mg	Mylan	2019
Spirolactone	Tab 25 mg & 100 mg	Spiractin	2019
Sulfadiazine silver	Crn 1%, 50 g OP	Flamazine	2020
Sulfasalazine	Tab 500 mg	Salazopyrin	2019
	Tab EC 500 mg	Salazopyrin EN	
Sumatriptan	Tab 50 mg & 100 mg	Apo-Sumatriptan	2019
Tamsulosin hydrochloride	Cap 400 mcg	Tamsulosin-Rex	2019
Temazepam	Tab 10 mg	Normison	2020
Temozolomide	Cap 5 mg, 20 mg, 100 mg & 250 mg	Orion Temozolomide	2019
Tenofovir disoproxil	Tab 245 mg (300.6 mg as a succinate)	Tenofovir Disoproxil Teva	2021
Tenoxicam	Tab 20 mg	Tilcotil	2019
Terazosin	Tab 1 mg Tab 2 mg & 5 mg	Actavis Apo-Terazosin	2019
Terbinafine	Tab 250 mg	Deolate	2020
Testosterone cypionate	Inj 100 mg per ml, 10 ml vial	Depo-Testosterone	2020
Testosterone undecanoate	Cap 40 mg	Andriol Testocaps	2021
Tetrabenazine	Tab 25 mg	Motelis	2019
Thymol glycerin	Compound, BPC	PSM	2019
Timolol	Eye drops 0.25% & 0.5%, 5 ml OP	Arrow-Timolol	2020
	Eye drops 0.25%, gel forming, 2.5 ml OP	Timoptol XE	2019
	Eye drops 0.5%, gel forming, 2.5 ml OP		
Tobramycin	Inj 40 mg per ml, 2 ml vial	Tobramycin Mylan	2021
Tolcapone	Tab 100 mg	Tasmar	2019
Tramadol hydrochloride	Cap 50 mg	Arrow-Tramadol	2020
	Tab sustained-release 100 mg	Tramal SR 100	
	Tab sustained-release 150 mg	Tramal SR 150	
	Tab sustained-release 200 mg	Tramal SR 200	

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Generic Name	Presentation	Brand Name	Expiry Date*
Tranexamic acid	Tab 500 mg	Cyklolapron	2019
Tretinoin	Crn 0.5 mg per g, 50 g OP	ReTrieve	2021
Triamcinolone acetonide	Inj 10 mg per ml, 1 ml ampoule Inj 40 mg per ml, 1 ml ampoule Crn 0.02%, 100 g OP Oint 0.02%, 100 g OP Paste 0.1%, 5 g OP	Kenacort-A 10 Kenacort-A 40 Aristocort  Kenalog in Orabase	2020
Trimethoprim	Tab 300 mg	TMP	2021
Trimethoprim with sulphamethoxazole [Co-trimoxazole]	Oral liq 8 mg with sulphamethoxazole 40 mg per ml, 100 ml	Deprim	2020
Tuberculin PPD [Mantoux] test	Inj 5 TU per 0.1 ml, 1 ml vial	Tubersol	2020
Urea	Crn 10%, 100 g OP	healthE Urea Cream	2019
Ursodeoxycholic acid	Cap 250 mg	Ursosan	2020
Valaciclovir	Tab 500 mg & 1,000 mg	Vaclovir	2021
Vancomycin	Inj 500 mg vial	Mylan	2020
Varicella vaccine [chickenpox vaccine]	Inj 2000 PFU prefilled syringe plus vial	Varilrix	2020
Venlafaxine	Cap 37.5 mg, 75 mg & 150 mg	Enlafax XR	2020
Vitamin B complex	Tab, strong, BPC	Bplex	2019
Vitamins	Tab (BPC cap strength)	Mvite	2019
<b>Voriconazole</b>	<b>Powder for oral suspension 40 mg per ml</b> Tab 50 mg & 200 mg	<b>Vfend</b>  Vttack	<b>2021</b>
Water	Inj 5 ml ampoule Inj 10 ml ampoule	InterPharma Pfizer	2019
Zidovudine [AZT]	Cap 100 mg Oral liq 10 mg per ml, 200 ml OP	Retrovir	2019
Zidovudine [AZT] with lamivudine	Tab 300 mg with lamivudine 150 mg	Alphapharm	2020
Zinc and castor oil	Oint, 500 g	Boucher	2020
Ziprasidone	Cap 40 mg, 60 mg & 80 mg	Zusdone	2021
<b>Zopiclone</b>	<b>Tab 7.5 mg</b>	<b>Zopiclone Actavis</b>	<b>2021</b>

January changes are in bold type

\*Expiry date of the Sole Subsidised Supply period is 30 June of the year indicated unless otherwise stated. Please note that Sole Subsidised Supply may have been awarded for a wider scope than just those presentation(s) listed in the above table.

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Schedule page ref

Subsidy  
(Mnfr's price)  
\$ Per

Brand or  
Generic Mnfr  
✓ fully subsidised

## New Listings

Effective 1 January 2019

34	COLECALCIFEROL * Oral liq 188 mcg per ml (7,500 iu per ml) .....	9.00	4.8 ml OP	✓ Puria
35	CALCIUM GLUCONATE * Inj 10%, 10 ml ampoule..... Wastage claimable	64.00	20	✓ Max Health <b>S29</b>
36	IRON POLYMALTOSE * Inj 50 mg per ml, 2 ml ampoule .....	34.50	5	✓ Ferrosig
81	MEDROXYPROGESTERONE ACETATE – See prescribing guideline Tab 2.5 mg .....	7.00	56	✓ Provera <b>S29</b> <b>S29</b>
	Wastage claimable Tab 5 mg .....	7.84	56	✓ Provera <b>S29</b> <b>S29</b>
	Wastage claimable			
125	PARACETAMOL Tab 500 mg - blister pack.....	7.12	1,000	✓ Pharmacy Health
		7.12	1,000	✓ Paracetamol Pharmacare
	a) Maximum of 300 tab per prescription; can be waived by endorsement b) Up to 30 tab available on a PSO c)			
	1) Subsidy by endorsement for higher quantities is available for patients with long term conditions who require regular daily dosing for one month or greater who do not use compliance packaging, and the prescription is annotated accordingly. Pharmacists may annotate the prescription as endorsed where dispensing history supports a long-term condition.			
	2) Maximum of 100 tab per dispensing for non-endorsed patients. If quantities prescribed for more than 100 tabs (for non-endorsed patients), then dispense in repeat dispensings not exceeding 100 tab per dispensing.			
134	DOMPERIDONE * Tab 10 mg .....	2.25	100	✓ Pharmacy Health
135	CLOZAPINE – Hospital pharmacy [HP4] Safety medicine; prescriber may determine dispensing frequency Tab 100 mg .....	14.73	50	✓ Clozaril
		29.45	100	✓ Clozaril
	Note – new Pharmacode listings tab 100 mg, 50 tab pack, 2534878 and 100 tab pack 2534886.			
147	PHENOBARBITONE SODIUM – Special Authority see SA1386 – Retail pharmacy Inj 200 mg per ml, 1 ml ampoule..... Wastage claimable	23.10	5	✓ Aspen <b>S29</b>
153	VARENICLINE TARTRATE – Special Authority see SA1771 – Retail pharmacy a) Varenicline will not be funded in amounts less than 4 weeks of treatment. b) A maximum of 12 weeks' varenicline will be subsidised on each Special Authority approval, including the starter pack Tab 1 mg .....	27.10	56	✓ Varenicline Pfizer
	Tab 0.5 mg × 11 and 1 mg × 42 .....	25.64	53 OP	✓ Varenicline Pfizer

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Subsidy  
(Mnfr's price)  
\$ Per

Brand or  
Generic Mnfr  
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### New Listings – effective 1 January 2019 (continued)

213	PHARMACY SERVICES May only be claimed once per patient. * Brand switch fee.....	4.50	1 fee	✓ <b>BSF Entecavir Sandoz</b>
	a) The Pharmacode for BSF Entecavir Sandoz is 2559420.			
214	DESFERRIOXAMINE MESILATE * Inj 500 mg vial .....	84.53	10	✓ <b>DBL Desferrioxamine Mesylate for Injection BP</b>
223	PAEDIATRIC ORAL FEED WITH FIBRE 1.5KCAL/ML – Special Authority see SA1379 – Hospital pharmacy [HP3] Liquid (unflavoured) .....	1.60	200 ml OP	✓ <b>Fortini Multi Fibre</b>

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

\* Three months or six months, as  
applicable, dispensed all-at-once

Check your Schedule for full details  
Schedule page ref

Subsidy  
(Mnfr's price)  
\$ Per

Brand or  
Generic Mnfr  
✓ fully subsidised

## Changes to Restrictions, Chemical Names and Presentations Effective 1 January 2019

36	FERROUS SULPHATE (reinstate stat dispensing) * Tab long-acting 325 mg (105 mg elemental).....	2.06	30	✓ <b>Ferrograd</b>
51	PROPRANOLOL (reinstate stat dispensing) * Cap long-acting 160 mg.....	18.17	100	✓ <b>Cardinol LA</b>
53	METOLAZONE —Special Authority see SA1678 —Retail pharmacy (Special Authority removed) Tab 5 mg.....	CBS	1 50	✓ <b>Metolazone</b> <b>\$29</b> ✓ <b>Zaroxolyn</b> <b>\$29</b>
<p>► <b>SA1678</b> Special Authority for Subsidy Initial application from any relevant practitioner. Approvals valid without further renewal unless notified for applications meeting the following criteria: Either: 1 Patient has refractory heart failure and is intolerant or has not responded to loop diuretics and/or loop-thiazide combination therapy; or 2 Paediatric patient has oedema secondary to nephrotic syndrome that has not responded to loop diuretics.</p>				
81	MEDROXYPROGESTERONE ACETATE – See prescribing guideline (remove stat dispensing) Tab 2.5 mg..... ..... Tab 5 mg..... .....	3.75 7.00 14.00 7.84	30 56 100 56	✓ <b>Provera</b> ✓ <b>Provera S29</b> <b>\$29</b> ✓ <b>Provera</b> ✓ <b>Provera S29</b> <b>\$29</b>
103	ENTECAVIR – <b>Brand Switch Fee payable (Pharmacode 2559420)</b> * Tab 0.5 mg.....	52.00	30	✓ <b>Entecavir Sandoz</b>
122	LEVODOPA WITH CARBIDOPA (remove stat dispensing) Tab 250 mg with carbidopa 25 mg.....	32.67	100	✓ <b>Sinemet</b>
131	PHENYTOIN SODIUM (reinstate stat dispensing) * Oral liq 30 mg per 5 ml.....	22.03	500 ml	✓ <b>Dilantin</b>
153	VARENICLINE TARTRATE – Special Authority see <b>SA1771+575</b> – Retail pharmacy (amended note and Special Authority criteria) a) Varenicline will not be funded in amounts less than 2 4 weeks of treatment. b) A maximum of 12 weeks' varenicline will be subsidised on each Special Authority approval, including the starter pack	67.74 135.48 27.10 60.48 25.64	28 56 25 OP 53 OP	✓ <b>Champix</b> ✓ <b>Champix</b> ✓ <b>Varenicline Pfizer</b> ✓ <b>Champix</b> ✓ <b>Varenicline Pfizer</b>

► **SA1771 +575** Special Authority for Subsidy

Initial application from any relevant practitioner. Approvals valid for 5 months for applications meeting the following criteria:

All of the following:

- 1 Short-term therapy as an aid to achieving abstinence in a patient who has indicated that they are ready to cease smoking; and

*continued...*

## Changes to Restrictions – effective 1 January 2019 (continued)

continued...

- 2 The patient is part of, or is about to enrol in, a comprehensive support and counselling smoking cessation programme, which includes prescriber or nurse monitoring; and
- 3 Either:
  - 3.1 The patient has tried but failed to quit smoking after at least two separate trials of nicotine replacement therapy, at least one of which included the patient receiving comprehensive advice on the optimal use of nicotine replacement therapy; or
  - 3.2 The patient has tried but failed to quit smoking using bupropion or nortriptyline; and
- 4 The patient has not used funded varenicline in the last 12 months; and
- 5 Varenicline is not to be used in combination with other pharmacological smoking cessation treatments and the patient has agreed to this; and
- 6 The patient is not pregnant; and
- 7 The patient will not be prescribed more than 12 weeks' funded varenicline (see note).

Renewal from any relevant practitioner. Approvals valid for 5 months for applications meeting the following criteria:

All of the following:

- 1 Short-term therapy as an aid to achieving abstinence in a patient who has indicated that they are ready to cease smoking; and
- 2 The patient is part of, or is about to enrol in, a comprehensive support and counselling smoking cessation programme, which includes prescriber or nurse monitoring; and
- 3 The patient has not used funded varenicline in the last 12 months; and
- 4 Varenicline is not to be used in combination with other pharmacological smoking cessation treatments and the patient has agreed to this; and
- 5 The patient is not pregnant; and
- 6 The patient will not be prescribed more than 12 weeks' funded varenicline (see note).

The patient must not have had an approval in the past 12 months.

Notes: a maximum of 12 weeks' varenicline will be subsidised on each Special Authority approval.

This includes the 2-week 4-week 'starter' pack.

- 187 AFLIBERCEPT – Special Authority see ~~SA1772+726~~ – Retail pharmacy  
(amended Special Authority criteria – affected criteria shown only)

Inj 40 mg per ml, 0.1 ml vial ..... 1,250.00 1 ✓ Eylea

➔ **SA1772 +726** Special Authority for Subsidy

Initial application — (wet age related macular degeneration) only from an ophthalmologist. Approvals valid for 3 months for applications meeting the following criteria:

Either:

- 1 All of the following:
  - 1.1 Any of the following:
    - 1.1.1 Wet age-related macular degeneration (wet AMD); or
    - 1.1.2 Polypoidal choroidal vasculopathy; or
    - 1.1.3 Choroidal neovascular membrane from causes other than wet AMD; and
  - 1.2 Either:
    - 1.2.1 The patient has developed severe endophthalmitis or severe posterior uveitis following treatment with bevacizumab; or
    - 1.2.2 There is worsening of vision or failure of retina to dry despite three intraocular injections of bevacizumab four weeks apart; and
  - 1.3 There is no structural damage to the central fovea of the treated eye; and
  - 1.4 Patient has not previously been treated with ranibizumab for longer than 3 months; or
- 2 Any of the following **Either**:
  - 2.1 Patient has current approval to use ranibizumab for treatment of wAMD and was found to be intolerant to ranibizumab within 3 months; or

continued...

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Subsidy  
(Mnfr's price)  
\$ Per

Brand or  
Generic Mnfr  
✓ fully subsidised

## Changes to Restrictions – effective 1 January 2019 (continued)

continued...

- 2.2 Patient has previously\* (\*before June 2018) received treatment with ranibizumab for wAMD and disease was stable while on treatment; ~~or~~
- 2.3 ~~Patient has current approval to use ranibizumab for treatment of wAMD; or~~
- 2.4 ~~Patient is currently receiving treatment with aflibercept and has documented previous poor response to bevacizumab.~~

Note: Criteria 2.3 and 2.4 will be removed from 1 January 2019.

Initial application — (diabetic macular oedema) only from an ophthalmologist. Approvals valid for 4 months for applications meeting the following criteria:

Either:

‡ All of the following:

- ‡-1 Patient has centre involving diabetic macular oedema (DMO); and
- ‡-2 Patient's disease is non responsive to 4 doses of intravitreal bevacizumab when administered 4-6 weekly; and
- ‡-3 Patient has reduced visual acuity between 6/9 – 6/36 with functional awareness of reduction in vision; and
- ‡-4 Patient has DMO within central OCT (ocular coherence tomography) subfield > 350 micrometers; and
- ‡-5 There is no centre-involving sub-retinal fibrosis or foveal atrophy; ~~or~~

2 ~~Patient is currently receiving treatment with aflibercept and has documented previous poor response to bevacizumab.~~

Note: Criterion 2 will be removed from 1 January 2019.

## Effective 1 December 2018

90	CEFTRIAXONE – Subsidy by endorsement (amended PSO quantity and subsidy by endorsement restriction)			
	a) Up to <b>5 10</b> inj available on a PSO			
	b) Subsidised only if prescribed for a dialysis or cystic fibrosis patient, or the treatment of gonorrhoea, or the treatment of pelvic inflammatory disease, or the treatment of suspected <b>meningococcal disease, meningitis in patients who have a known allergy to penicillin</b> , and the prescription or PSO is endorsed accordingly.			
	Inj 500 mg vial .....	1.20	1	✓ <b>DEVA</b>
	Inj 1 g vial .....	0.84	1	✓ <b>DEVA</b>



## Changes to Subsidy and Manufacturer's Price

Effective 1 January 2019

38	FOLIC ACID (↑ subsidy) Oral liq 50 mcg per ml .....	26.00	25 ml OP	✓ Biomed
64	HYDROCORTISONE BUTYRATE (↑ subsidy) Oint 0.1% .....	13.70	100 g OP	✓ Locoid
	Milky emul 0.1% .....	13.70	100 ml OP	✓ Locoid Crelo
65	HYDROCORTISONE WITH NATAMYCIN AND NEOMYCIN – Only on a prescription (↑ subsidy) Crm 1% with natamycin 1% and neomycin sulphate 0.5% .....	3.35	15 g OP	✓ Pimafucort
	Oint 1% with natamycin 1% and neomycin sulphate 0.5% .....	3.35	15 g OP	✓ Pimafucort
70	HYDROCORTISONE BUTYRATE (↑ subsidy) Scalp lotn 0.1% .....	7.30	100 ml OP	✓ Locoid
134	HYOSCINE HYDROBROMIDE (↑ subsidy) Patch 1.5 mg – Special Authority see SA1387 – Retail pharmacy .....	14.11	2	✓ Scopoderm TTS
157	OXALIPLATIN – PCT only – Specialist (↑ subsidy) Inj 1 mg for ECP .....	0.48	1 mg	✓ Baxter
157	AZACITIDINE – PCT only – Specialist – Special Authority see SA1467 (↓ subsidy) Inj 1 mg for ECP .....	1.53	1 mg	✓ Baxter
159	METHOTREXATE (↓ subsidy) * Tab 2.5 mg – PCT – Retail pharmacy-Specialist .....	2.68 (3.18)	30	Trexate
	* Tab 10 mg – PCT – Retail pharmacy-Specialist .....	17.64 (21.00)	50	Trexate
162	DOXORUBICIN HYDROCHLORIDE – PCT only – Specialist (↑ subsidy) Inj 1 mg for ECP .....	0.29	1 mg	✓ Baxter
173	TAMOXIFEN CITRATE (↓ subsidy) * Tab 20 mg .....	9.33	100	✓ Genox
208	CHLORAMPHENICOL (↑ subsidy) Eye drops 0.5% .....	1.95	10 ml OP	✓ Chlorafast
	Funded for use in the ear*. Indications marked with an * are unapproved indications.			
210	DORZOLAMIDE WITH TIMOLOL (↓ subsidy) * Eye drops 2% with timolol 0.5% .....	2.87 (3.45)	5 ml OP	Arrow-Dortim

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

\* Three months or six months, as applicable, dispensed all-at-once

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Subsidy  
(Mnfr's price)  
\$ Per

Brand or  
Generic Mnfr  
✓ fully subsidised

## Delisted Items

Effective 1 January 2019

49	ATROPINE SULPHATE * Inj 600 mcg per ml, 1 ml ampoule – Up to 5 inj available on a PSO .....	60.35 (71.00)	50	AstraZeneca
52	CLONIDINE HYDROCHLORIDE Inj 150 mcg per ml, 1 ml ampoule .....	12.98 (16.07)	5	Catapres
53	AMILORIDE HYDROCHLORIDE * Tab 5 mg .....	15.00	100	✓ Apo-Amiloride
61	ISOTRETINOIN – Special Authority see SA1475 – Retail pharmacy Cap 10 mg .....	11.12 (12.47)	100	Isotane 10
	Cap 20 mg .....	17.08	100	✓ Isotane 20
83	LEVOTHYROXINE * Tab 50 mcg..... Note – this delist applies to Pharmacode 2390000. A new Pharmacode was listed 1 July 2018.	4.05	90	✓ Synthroid
116	ETIDRONATE DISODIUM – See prescribing guideline * Tab 200 mg .....	13.50	100	✓ Arrow-Etidronate
103	ENTECAVIR * Tab 0.5 mg .....	52.00 (400.00)	30	Baraclude
157	OXALIPLATIN – PCT only – Specialist Inj 5 mg per ml, 10 ml vial .....	13.32	1	✓ Oxaliccord
	Inj 50 mg vial .....	15.32	1	✓ Oxaliplatin Actavis 50
		55.00		✓ Oxaliplatin Ebewe
159	IRINOTECAN HYDROCHLORIDE – PCT only – Specialist Inj 20 mg per ml, 2 ml vial .....	11.50 41.00	1	✓ Irinotecan Actavis 40 ✓ Irinotecan-Rex ✓ Camptosar
207	BUDESONIDE Metered aqueous nasal spray, 50 mcg per dose .....	2.35 (5.26)	200 dose OP	Butacort Aqueous
	Metered aqueous nasal spray, 100 mcg per dose .....	2.61 (6.00)	200 dose OP	Butacort Aqueous
216	METHYL HYDROXYBENZOATE Powder .....	8.00	25 g	✓ PSM

## Items to be Delisted

### Effective 1 February 2019

101	PYRAZINAMIDE – Retail pharmacy-Specialist a) No patient co-payment payable b) Prescriptions must be written by, or on the recommendation of, an infectious disease physician, clinical microbiologist or respiratory physician			
	* Tab 500 mg .....	59.00	100	✓ AFT-Pyrazinamide S29 S29

### Effective 1 March 2019

26	ISPAGHULA (PSYLLIUM) HUSK – Only on a prescription * Powder for oral soln .....	6.05	500 g OP	✓ Bonvit
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### Effective 1 April 2019

159	METHOTREXATE * Tab 2.5 mg – PCT – Retail pharmacy-Specialist.....	2.68 (3.18)	30	Trexate
	* Tab 10 mg – PCT – Retail pharmacy-Specialist.....	17.64 (21.00)	50	Trexate
	Note – this delist applies to pack size 30 tab and 50 tab pack.			
173	TAMOXIFEN CITRATE * Tab 10 mg .....	19.50	100	✓ Genox
	* Tab 20 mg .....	2.63	30	✓ Genox
		9.33	100	✓ Genox
210	DORZOLAMIDE WITH TIMOLOL * Eye drops 2% with timolol 0.5%.....	2.87 (3.45)	5 ml OP	Arrow-Dortim
213	PHARMACY SERVICES May only be claimed once per patient. * Brand switch fee.....	4.50	1 fee	✓ BSF Entecavir Sandoz

### Effective 1 May 2019

109	INTERFERON ALFA-2B – PCT – Retail pharmacy-Specialist a) See prescribing guideline above b) Prescriptions must be written by, or on the recommendation of, an internal medicine physician or ophthalmologist			
	Inj 18 m iu, 1.2 ml multidose pen.....	206.71	1	✓ Intron-A
	Inj 30 m iu, 1.2 ml multidose pen.....	344.52	1	✓ Intron-A
	Inj 60 m iu, 1.2 ml multidose pen.....	689.04	1	✓ Intron-A

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

\* Three months or six months, as applicable, dispensed all-at-once

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Subsidy  
(Mnfr's price)  
\$ Per

Brand or  
Generic Mnfr  
✓ fully subsidised

### Items to be Delisted – effective 1 June 2019

91	AZITHROMYCIN – Maximum of 5 days treatment per prescription; can be waived by Special Authority see SA1683. A maximum of 24 months of azithromycin treatment for non-cystic fibrosis bronchiectasis will be subsidised on Special Authority.			
	Tab 250 mg .....	8.50	6	✓ <b>Zithromax</b>
	Tab 500 mg – Up to 8 tab available on a PSO .....	0.93	2	✓ <b>Apo-Azithromycin</b>
	Note – the delist for Apo-Azithromycin tab 500 mg applies to Pharmacode 2550059.			

### Effective 1 July 2019

35	CALCIUM GLUCONATE			
	* Inj 10%, 10 ml ampoule .....	34.24	10	✓ <b>Hospira</b>
135	CLOZAPINE – Hospital pharmacy [HP4]			
	Safety medicine; prescriber may determine dispensing frequency			
	Tab 100 mg .....	14.73	50	✓ <b>Clozaril</b>
		29.45	100	✓ <b>Clozaril</b>

Note – this delist applies to Pharmacodes 454699 (50 tab pack) and 2317338 (100 tab pack).  
New Pharmacodes were listed from 1 January 2019.

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## Pharmaceuticals and brands

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