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In this issue...

Tamiflu (oseltamivir phosphate) for 2006/07 Influenza Season	1
Price Changes to Products Included in the Low Cost Alternative Program	1
Methylphenidate	2
Low Cost Alternative/Reference Drug Program (LCA/RDP) Booklet – Correction.....	2
Benefits	3
Non-Benefits	3
Other Drugs.....	3

Tamiflu (oseltamivir phosphate) for 2006/07 Influenza Season

Tamiflu (oseltamivir phosphate) for the prophylaxis and treatment during outbreaks of Influenza A or Influenza B will continue to be an eligible PharmaCare benefit for Plan B only (Permanent Residents of Licensed Long-Term Care Facilities) for the 2006/07 influenza season.

DIN	MAN	DRUG NAME
2241472	HLR	TAMIFLU® (oseltamivir phosphate) 75 mg capsule
2245549	HLR	TAMIFLU® (oseltamivir phosphate) 12 mg/ml oral suspension

Price Changes to Products Included in the Low Cost Alternative (LCA) Program

In the past, at the request of community pharmacies, PharmaCare undertook to give 30 days notice to all pharmacies before implementing price changes—including changes to the price or benefit status of drugs included in the Low Cost Alternative (LCA) program. The intent of the notice period is to give pharmacies sufficient time to deal with any inventory issues.

1.500
1.125
1.062

PharmaCare receives a substantial volume of product and price change notices from manufacturers on an ongoing basis. It may appear that we are not reacting promptly to these changes, however, in order to honour our agreement to give sufficient notice, changes must first be announced in the PharmaCare Newsletter. The price change can then be implemented on PharmaNet approximately 30 days later.

The use of PharmaNet is not intended as a substitute for professional judgment. Information on PharmaNet is not exhaustive and cannot be relied upon as complete. The absence of a warning about a drug or drug combination is not an indication that the drug or drug combination is safe, appropriate or effective in any given patient. Health care professionals should confirm information obtained from PharmaNet, and ensure no additional relevant information exists, before making patient care decisions.



Methylphenidate

In May 2006, a provincial Order in Council was approved allowing methylphenidate to be prescribed and dispensed without a Controlled Drug Program prescription (formerly known as the Triplicate Prescription Program). Therefore, this drug is no longer a restricted drug and may be prescribed by all physicians. PharmaNet has been updated to allow normal processing of these prescriptions by all registered practicing physicians.

Low Cost Alternative/Reference Drug Program (LCA/RDP) Booklet – Correction

Information on the products in the table below was unintentionally omitted from the LCA/RDP Booklet published on June 16, 2006.

A corrected version of the booklet has been posted on the PharmaCare website at www.health.gov.bc.ca/pharme/publications.html.

Please note that the effective date of the booklet is August 17, 2006.

DIN	MAN	DRUG NAME	LCA STATUS	LCA PRICE
2050056	APX	Apo-Doxepin (doxepin) cap 150mg		
		Effective August 17, 2006, Apo-Doxepin (doxepin) cap 150mg is removed due to manufacturer discontinuation. As a result, the Doxepin Cap 150mg LCA Category is removed from the LCA/RDP Booklet.		
2049384	AZC	Zestril (lisinopril) tab 20mg	P*	\$0.8200
		Effective August 17, 2006, Zestril (lisinopril) tab 20mg is added to the Lisinopril 20mg LCA Category as it was unintentionally omitted.		
2244998	APX	Apo-Famotidine (famotidine) Inj 10mg/mL (W/P)		
		Effective August 17, 2006, Apo-Famotidine (famotidine) Inj 10mg/ml (W/P) is removed due to manufacturer discontinuation. The Famotidine Inj 10mg/ml LCA Categories are as follows:		
Famotidine 10mg/ml Inj (W/Preservative)				
2247745	OMG	Famotidine Omega (W/Preservative)	F	
728128	UNK ¹	Pepcid I.V. 10mg/ml (W/Preservative)	P	\$1.4530
Famotidine 10mg/ml Inj (WO/Preservative)				
2247735	OMG	Famotidine Omega (Without/Preservative)	F	

P – Partially covered.

P* – Drug is a full benefit if RDP Special Authority is in place.

1 – Merck Frosst

Benefits

The following new products are now eligible PharmaCare benefits for Plans B, C, F, I and, if indicated below, Plan G and/or Plan P.

DIN	MAN	DRUG NAME	PLAN G	PLAN P
2265540	AZC	Crestor® (rosuvastatin calcium) 5 mg tablet	N	N
2247310	UNK ¹	Twinject® (epinephrine injection) 0.3 mg USP 1:1000	N	N
2268205	UNK ¹	Twinject® (epinephrine injection) 0.15 mg USP 1:1000	N	N

1 – Paladin Labs Inc.

Non-Benefits

The following products have been reviewed and will not be added as benefits under PharmaCare.

DIN	MAN	DRUG NAME
2247549	SCK	Chorionic gonadotropin™ for injection USP
2265435	NNA	NovoMix 30® (insulin aspart/insulin aspart protamine) 100 U/ml penfill
2265443	NNA	NovoMix 30® (insulin aspart/insulin aspart protamine) 100 U/ml flexpen
2250535	UNK ¹	Penlac® (ciclopirox) 8% w/w nail lacquer
2277700	RPH	Ratio-bicalutamide™ 50 mg tablet
2273101	RPH	Ratio-glimepiride™ 1 mg tablet
2273128	RPH	Ratio-glimepiride™ 2 mg tablet
2273136	RPH	Ratio-glimepiride™ 4 mg tablet
2262800	LIL	Strattera® (atomoxetine HCl) 10 mg capsule
2262819	LIL	Strattera® (atomoxetine HCl) 18 mg capsule
2262827	LIL	Strattera® (atomoxetine HCl) 25 mg capsule
2262835	LIL	Strattera® (atomoxetine HCl) 40 mg capsule
2262843	LIL	Strattera® (atomoxetine HCl) 60 mg capsule
2260565	NVR	Xolair® (omalizumab) 150 mg vial sterile powder for reconstitution

1 – Dermik Labs Canada Inc.

Other Drugs

The following products are not covered by PharmaCare. HIV/AIDS drug benefit coverage is the responsibility of the [BC Centre for Excellence in HIV/AIDS](#).

DIN	MAN	DRUG NAME
2273322	BOE	Aptivus® (tipranavir) 250 mg capsule
2269341	UNK ¹	Kivexa® (abacavir sulfate 600 mg/lamivudine 300 mg) tablet
2261545	UNK ¹	Telzir® (fosamprenavir calcium) 700 mg tablet
2261553	UNK ¹	Telzir® (fosamprenavir calcium) 50 mg/mL oral suspension
2247128	UNK ²	Viread® (tenofovir disoproxil fumarate) 300 mg tablet

1 – GlaxoSmithKline

2 – Gilead Science

The following products are not covered by PharmaCare. Cancer drug benefit coverage is the responsibility of the [BC Cancer Agency](#).

DIN	MAN	DRUG NAME
2248676	AZC	Iressa® (gefitinib) 250 mg tablet
2269007	HLR	Tarceva® (erlotinib) 25 mg tablet
2269015	HLR	Tarceva® (erlotinib) 50 mg tablet
2269023	HLR	Tarceva® (erlotinib) 100 mg tablet