

Bulletin #640

November 18, 2005

BENEFIT CHANGES TO NBPDP

This update to the New Brunswick Prescription Drug Program (NBPDP) Formulary is effective November 18, 2005.

Included in this bulletin:

- **Regular Benefit Additions**
- **Special Authorization Additions**
- **Drugs Reviewed and Not Listed**

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If you have any questions or concerns, please contact our office at 1-800-332-3691.

Yours truly,

Debbie LeBlanc
New Brunswick Prescription Drug Program

REGULAR BENEFIT ADDITIONS

Drug/Form/Route/Strength			Brandname	DIN	Manufacturer	Plans	\$
Fluvastatin Sodium							
Srt	Orl	80mg	Lescol XL [®]	2250527	NVR	AEFGVW	AAC
Leuprolide Acetate							
Sus	Sc	7.5mg	Eligard [®]	2248239	SNS	AEFVW	AAC
		22.5mg	Eligard [®]	2248240	SNS	AEFVW	AAC
		30mg	Eligard [®]	2248999	SNS	AEFVW	AAC
Metoprolol Tartrate							
Tab	Orl	25mg	pms-Metoprolol-L [®]	2248855	PMS	AEFGVW	AAC
Metronidazole							
Lot	Top	0.75%	MetroLotion [®]	2248206	GAC	AEFGVW	AAC
Mirtazapine							
Tab	Orl	15mg	Rhoxal-Mirtazapine [®]	2250594	RHO	AEFGVW	AAC
<u>Angiotensin Converting Enzyme (ACE) Inhibitors and Diuretic Combination Products</u>							
Cilazapril / hydrochlorothiazide							
Tab	Orl	5/12.5mg	Inhibace [®] Plus	2181479	HLR	AEFGVW	AAC
Enalapril / hydrochlorothiazide							
Tab	Orl	5/12.5mg	Vaseretic [®]	2242826	FRS	AEFGVW	AAC
Lisinopril / hydrochlorothiazide							
Tab	Orl	10/12.5mg	Prinzide [®]	2108194	FRS	AEFGVW	AAC
			Zestoretic [®]	2103729	AZE	AEFGVW	AAC
		20/12.5mg	Prinzide [®]	884413	FRS	AEFGVW	AAC
			Zestoretic [®]	2045737	AZE	AEFGVW	AAC
		20/25mg	Prinzide [®]	884421	FRS	AEFGVW	AAC
			Zestoretic [®]	2045729	AZE	AEFGVW	AAC

REGULAR BENEFIT ADDITIONS

Drug/Form/Route/Strength	Brandname	DIN	Manufacturer	Plans	\$
<i>Angiotensin-II Receptor Blockers (ARB) – No longer require special authorization</i>					
Candesartan					
Tab	Orl	8mg	Atacand [®]	2239091	AZE AEEFGVW AAC
		16mg	Atacand [®]	2239092	AZE AEEFGVW AAC
Eprosartan mesylate					
Tab	Orl	400mg	Teveten [®]	2240432	SPH AEEFGVW AAC
		600mg	Teveten [®]	2243942	SPH AEEFGVW AAC
Irbesartan					
Tab	Orl	75mg	Avapro [®]	2237923	SNS AEEFGVW AAC
		150mg	Avapro [®]	2237924	SNS AEEFGVW AAC
		300mg	Avapro [®]	2237925	SNS AEEFGVW AAC
Losartan					
Tab	Orl	25mg	Cozaar [®]	2182815	FRS AEEFGVW AAC
		50mg	Cozaar [®]	2182874	FRS AEEFGVW AAC
		100mg	Cozaar [®]	2182882	FRS AEEFGVW AAC
Telmisartan					
Tab	Orl	40mg	Micardis [®]	2240769	BOE AEEFGVW AAC
		80mg	Micardis [®]	2240770	BOE AEEFGVW AAC
Valsartan					
Tab	Orl	80mg	Diovan [®]	2244781	NVR AEEFGVW AAC
		160mg	Diovan [®]	2244782	NVR AEEFGVW AAC

REGULAR BENEFIT ADDITIONS

Drug/Form/Route/Strength	Brandname	DIN	Manufacturer	Plans	\$
<u>ARB and Diuretic Combination Products</u>					
Candesartan / hydrochlorothiazide					
Tab	Orl 16/12.5mg	Atacand® Plus	2244021	AZE AEEFGVW	AAC
Eprosartan mesylate / hydrochlorothiazide					
Tab	Orl 600/12.5mg	Teveten® Plus	2253631	SPH AEEFGVW	AAC
Irbesartan / hydrochlorothiazide					
Tab	Orl 150/12.5mg	Avalide®	2241818	SNS AEEFGVW	AAC
	300/12.5mg	Avalide®	2241819	SNS AEEFGVW	AAC
Losartan / hydrochlorothiazide					
Tab	Orl 50/12.5mg	Hyzaar®	2230047	FRS AEEFGVW	AAC
	100/25mg	Hyzaar DS®	2241007	FRS AEEFGVW	AAC
Telmisartan / hydrochlorothiazide					
Tab	Orl 80/12.5mg	Micardis® Plus	2244344	BOE AEEFGVW	AAC
Valsartan / hydrochlorothiazide					
Tab	Orl 80/12.5mg	Diovan-HCT®	2241900	NVR AEEFGVW	AAC
	160/12.5mg	Diovan-HCT®	2241901	NVR AEEFGVW	AAC
	160/25mg	Diovan-HCT®	2246955	NVR AEEFGVW	AAC

SPECIAL AUTHORIZATION ADDITIONS

Betahistine
(*Serc*[®])
24mg tablets

For the symptomatic treatment of the recurrent episodes of vertigo associated with Ménière's disease.

Ciprofloxacin
(*Cipro XL*[®])
1000mg tablets

For the treatment of complicated urinary tract infection and acute uncomplicated pyelonephritis when alternative agents are ineffective, not tolerated or contraindicated.

Oseltamivir
(*Tamiflu*[®])
75mg capsules

For beneficiaries residing in long-term care facilities* during an influenza outbreak situation and further to the recommendation of a Medical Officer of Health:

- For treatment of long-term care residents with clinically suspected or lab confirmed influenza A or B. A clinically suspected case is one in which the patient meets the criteria of influenza-like illness and there is confirmation of influenza A or B circulating within the facility or surrounding community.
- For prophylaxis of long-term care residents where the facility has an influenza A or B outbreak. Prophylaxis should be continued until the outbreak is over. An outbreak is declared over 7 days after the onset of the last case in the facility.

* In these criteria, *long-term care facility* refers to a licensed nursing home and does not include special care homes.

DRUGS REVIEWED AND NOT LISTED

The reviews of the following products found that they did not offer a therapeutic and/or cost advantage over existing therapies. Requests for coverage through special authorization will not be considered.

Levothyroxine	(<i>Synthroid</i> [®])	137mcg tablets
Miglustat	(<i>Zavesca</i> [®])	100mg capsules
Perindopril / Indapamide	(<i>Preterax</i> [®])	2mg/0.625mg tablets
Teriparatide	(<i>Forteo</i> [®])	250mcg/mL injection
Trandolapril	(<i>Mavik</i> [®])	0.5mg capsules
Treprostinil Sodium	(<i>Remodulin</i> [®])	1, 2.5, 5, 10mg/mL injection