

Bulletin #682

May 24, 2007

## **BENEFIT CHANGES TO NBPDP**

This update to the New Brunswick Prescription Drug Program (NBPDP) Formulary is effective May 24, 2007.

**Included in this bulletin:**

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

If you would prefer to receive bulletins electronically rather than in hard copy, please send a message to [BC\\_nbpdp@medavie.bluecross.ca](mailto:BC_nbpdp@medavie.bluecross.ca) or call 1-800-332-3691. Bulletins are also available on the NBPDP web page: [www.gnb.ca/0051/0212/index-e.asp](http://www.gnb.ca/0051/0212/index-e.asp)

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	Brand Name	DIN	Manufacturer	Plans	\$
<b>Ciclesonide</b>					
Aem Inh	Alvesco <sup>®</sup>	2285606	ATA	ABEFGVW	AAC
	Alvesco <sup>®</sup>	2285614	ATA	ABEFGVW	AAC
<b>Isosorbide-5-Mononitrate</b>					
Tab Orl	Imdur <sup>®</sup>	2126559	AZE	AEFGVW	MAP
	Apo-ISMN	2272830	APX	AEFGVW	MAP
<b>Lamivudine</b>					
<b>No longer requires special authorization</b>					
Tab Orl	Heptovir <sup>®</sup>	2239193	GSB	AEFGVW	AAC
<b>Tamsulosin</b>					
<b>No longer requires special authorization</b>					
Cap Orl	Novo-Tamsulosin	2281392	NOP	AEVW	MAP

## SPECIAL AUTHORIZATION ADDITIONS

### Epoprostenol

(Flolan<sup>®</sup>)

0.5mg and 1.5mg vials for injection

1. For the treatment of World Health Organization (WHO) class III or IV idiopathic pulmonary arterial hypertension in patients who do not demonstrate vasoreactivity on testing or who demonstrate vasoreactivity on testing but fail a trial of, or are intolerant to, calcium channel blockers.
2. For the treatment of WHO class III or IV pulmonary arterial hypertension associated with scleroderma in patients who do not respond adequately to conventional therapy.

### Etonogestrel / Ethinyl Estradiol

(NuvaRing<sup>™</sup>)

11.4mg /2.6mg vaginal ring

For conception control in women who are unable to take oral contraceptives.

## SPECIAL AUTHORIZATION – REVISED CRITERIA

**Adalimumab**  
(*Humira™*)  
40mg/0.8mL (50mg/mL)  
injection

New indication added to criteria:

For the treatment of active psoriatic arthritis in patients who:

- Have at least three active and tender joints, and
- Have not responded to an adequate trial of two DMARDs or have an intolerance or contraindication to DMARDs.

## DRUGS REVIEWED AND NOT LISTED

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

<b>Adefovir dipivoxil</b>	( <i>Hepsera®</i> )	10mg tablets
<b>Escitalopram oxalate</b>	( <i>Ciprallex®</i> )	10mg, 20mg tablets
<b>Solifenacin</b>	( <i>Vesicare®</i> )	5mg, 10mg tablets

The manufacturer has advised it will not be marketing the following product and has withdrawn the submission.

<b>Ramipril + Felodipine</b>	( <i>Altace® Plus Felodipine</i> )	2.5mg/2.5mg, 5mg/5mg tablets
------------------------------	------------------------------------	------------------------------