

# Pharmacy Bulletin

## RESULT OF DRUG AND THERAPEUTICS COMMITTEE MEETING 1/2011 HELD ON 25th MARCH 2011

No	New Drugs Approved	Category Prescriber	Indication/Policies (Effective this year)
1	Methoxy Polyethylene Glycol—Epoetin Beta Pre-filled Syringes 50ug, 100ug, 120ug & 200ug/0.3ml (MIRCERA® PFS)	A* Nephrologists only	<u>Indications :</u> Treatment of anemia associated with Chronic Kidney Disease in patients on peritoneal dialysis. <u>Maximum usage :</u> 20 patients only. Maximum usage of Inj Eprex, Inj Recormon & Inj Mircera a year is RM550,000.
2.	Amisulpiride 100mg & 400mg Tab (SOLIAN®)	A* Psychiatrists only	<u>Indications :</u> Treatment of psychoses characterized by positive and/or negative symptoms including when the negative symptoms predominate. <u>Maximum usage :</u> 20 patients/year taken from Aripiprazole quota, hence the Aripiprazole coupons allocation will be reduced from 60 to 40 coupons. Patients have to pay a flat rate of RM100/ month at Kedai Farmasi.
3.	Artemether 20mg + Lumefantrine 120mg Tab (RIAMET®)	B* : Medical Officers	<u>Indications :</u> Treatment of acute, uncomplicated malaria due to Plasmodium Falciparum. Can be used for infants 5kg & above.
4.	Ropinirole Prolonged Release 2mg & 4mg Tab (REQUIP PD 24Hr®)	A* : Neurologists only	<u>Indications :</u> Treatment of Idiopathic Parkinson's Disease <u>Maximum Usage :</u> 10 patients/year. To share allocation with Tab Pramipexole Extended Release ie RM300,000/ year.
5.	Pramipexole DiHCL Extended Release Tab 0.375mg & 1.5mg (SIFROL ER®)	A* : Neurologists only	<u>Indications :</u> For newly treated young onset Parkinson's. As an adjunctive in those with motor complications on Levodopa. Additional of 30 patients approved. Total number of patients on SIFROL ER/SIFROL is 80. <u>Maximum Usage :</u> To share allocation with Tab Ropinirole PD 24HR ie RM300,000/year.
6.	Levocetirizine DiHCL 5mg (XYZAL®)	A* : Otorinolaringologists only	<u>Indications :</u> Symptomatic treatment of allergic rhinitis & Chronic Idiopathic Urticaria. <u>Maximum Usage :</u> To share allocation with Tab Desloratadine 5mg ie RM150,000/year
7.	Amlodipine + Valsartan + HCT 5/160/12.5mg 10/160/12.5mg 10/160/25mg Tab (EXFORGE HCT®)	A* : Internal Medicine Specialists only	<u>Maximum Usage :</u> To share allocation with Calcium Channel Blockers (CCB) Group ie RM 3.5 million/year.

8.	Carbetocin 100ug/ml Inj (DURATOCIN®)	A* : O&G Specialists only	<b>Indications :</b> Prevention of uterine atony & post partum hemorrhage following elective caesarian section under epidural or spinal anesthesia. <b>NOT FOR INFUSION</b>
9.	Nilotinib 200mg Cap (TASIGNA®)	A : Hematologists only	<b>Indications :</b> 2nd line treatment for Chronic Myeloid Leukemia <b>Maximum Usage :</b> To share allocation with Cap Imatinib (25 CML patients). From 25 CML patients, 5 patients will be swapped to Nilotinib MY-PAP programme (6+6) ie 6 months borne by PPUKM and another 6 months by Novartis.
10.	Oxycodone Immediate Release 5mg & 10mg Cap (OXYNORM®)	A* : Palliative Care Specialists, Oncology & Hematology Specialists, Pain Clinic Specialists	<b>Indications :</b> For breakthrough pain <b>Maximum Usage :</b> Limited to 40 patients only. To share allocation with Tab Oxycodone Sustained Release (Oxycontin®).
11.	Cyclopentolate HCL 0.2% + Phenylephrine HCL 1% eye drop (CYCLOMYDRIL®)	B Ophtalmology Medical Officers & NICU	<b>Indications :</b> For production of mydriasis. Use especially in preterm infants & neonates. Only for clinic & ward use. Not for Outpatient dispensing.



## APPROVED ADD ON & AMENDMENTS ON FORMULATION/CATEGORY/DOSAGE

No	Generic name	Category Prescriber	Details
1.	Rituximab 500mg /50ml Inj (MABTHERA®)	Added Indication  A* : Nephrologists only	<b>Additional indication:</b> Refractory SLE & severe lupus nephritis Maximum usage : <b>5 patients only</b>
2.	Escitalopram 10mg Tab (LEXAPRO®)	Increase maximum usage A* : Psychiatrists only	Maximum usage increased to <b>RM250,000</b> from RM200,000 last year.
3.	Duloxetine HCL 30mg & 60mg Cap (CYMBALTA)	Increase patients allocation  A* : Psychiatrists only	Number of patients increased from 30 patients to <b>60 patients</b> . Existing patients will get the drugs FOC and new patients will be charged RM50/month at Kedai Farmasi.
4. 5.	Dutasteride 0.5mg Cap (AVODART®) Alfuzosin XL 10mg Tablet (XATRAL®)	Increase maximum usage  A* : Urologists only	Maximum usage of Cap Dutasteride increased to RM600,000/year & Tab Alfuzosin XL 10 mg increased to <b>700,000/year</b> . Maximum usage for Urological Groups is capped to <b>RM2 million/year</b> .
6.	Pegylated Interferon alfa 2B 50ug, 100ug, 120ug & 150ug Prefilled Pen (INTRON REDIPEN)	Additional strength & number of patients. A* : Gastroenterologists only	<b>Maximum usage :</b> <b>6 patients/year</b> Allocation for Chronic Hepatitis B & C increased to RM900,000/year (including oral drugs)
7.	Etoricoxib 120mg Tab (ARCOXIA®)	Add on prescriber A* : Surgeons including ENT surgeons, O&G specialists, Orthopedic & Anesthetist	<b>Indications :</b> Treatment of post op pain <b>Maximum usage :</b> Use existing budget ie <b>RM50,000/year</b> . Only for INPATIENT.
8.	Gliclazide Modified Release 60mg Tab (DIAMICRON MR®)	Change formulation. A* : Specialists & Family medicine Specialists	<b>Change formulation</b> from Gliclazide MR 30mg to Gliclazide MR 60mg Tab. Gliclazide MR 30mg Tab taken out from formulary. Use while stocks last.
9.	Valganciclovir 450mg Tab (VALCYTE®)	Added indication A* : Hematologists only	<b>Indications :</b> Pre-emptive therapy for CMV infection post haematopoietic stem cell transplantation. <b>Maximum usage :</b> Use existing allocation ie RM500,000/year.
10.	Tiotropium Bromide 18ug Inhalation Capsule (SPIRIVA®)	Increase allocation.  A* : Respiratory Physician	Increase allocation from RM100,000/year to <b>RM130,000/year</b> . Allocation is taken from unused allocation for Inj & Tab Avelox. Allocation for Inj & Tab Avelox is reduced from RM50,000 to RM20,000/year.
11.	Imatinib 100mg & 400mg Cap (GLIVEC)	Increase patients allocation.  A* : Pediatric Hematologists	<b>Maximum usage :</b> <b>2 patients/ year</b>