



**Australian Government**  

---

**Department of Health and Ageing**

**SCHEDULE OF PHARMACEUTICAL  
BENEFITS**

**SUMMARY OF CHANGES**

**EFFECTIVE 1 October 2011**

## PHARMACEUTICAL BENEFITS

These changes to the Schedule of Pharmaceutical Benefits are effective from 1 October 2011. The Schedule is updated on the first day of each month and is available on the Internet at [www.pbs.gov.au](http://www.pbs.gov.au).

### Fees, Patient Contributions and Safety Net Thresholds

The following fees, patient contributions and safety net thresholds apply as at 1 October 2011 and are included, where applicable, in prices published in the Schedule —

Dispensing Fees:	Ready-prepared	\$6.42
	Dangerous drug fee	\$2.71
	Extemporaneously-prepared	\$8.46
	Allowable additional patient charge*	\$3.92
Additional Fees (for safety net prices):	Ready-prepared	\$1.09
	Extemporaneously-prepared	\$1.44
Patient Co-payments:	General	\$34.20
	Concessional	\$5.60
Safety Net Thresholds:	General	\$1317.20
	Concessional	\$336.00
Safety Net Card Issue Fee:		\$8.58

\*The allowable additional patient charge is a discretionary charge to general patients if a pharmaceutical item has a dispensed price for maximum quantity less than the general patient co-payment. The pharmacist may charge general patients the allowable additional fee but the fee cannot take the cost of the prescription above the general patient co-payment for the medicine. This fee does not count towards the Safety Net threshold.

# SUMMARY OF CHANGES

## Additions

### Addition – Item

5430T	<b>Docetaxel</b> , Injection set containing 1 single use vial concentrate for I.V. infusion 20 mg (anhydrous) in 0.5 mL with solvent ( <i>Taxotere</i> )
5433Y	<b>Docetaxel</b> , Injection set containing 1 single use vial concentrate for I.V. infusion 80 mg (anhydrous) in 2 mL with solvent ( <i>Taxotere</i> )
5149B	<b>Docetaxel</b> , Powder for I.V. infusion 20 mg with solvent ( <i>Docetaxel SUN</i> )
5156J	<b>Docetaxel</b> , Powder for I.V. infusion 80 mg with solvent ( <i>Docetaxel SUN</i> )
5428Q	<b>Docetaxel</b> , Solution concentrate for I.V. infusion 20 mg in 1 mL ( <i>Taxotere, Oncotaxel 20</i> )
5429R	<b>Docetaxel</b> , Solution concentrate for I.V. infusion 20 mg in 2 mL ( <i>DBL Docetaxel Concentrated Injection, Docetaxel Ebewe, Docetaxel Sandoz</i> )
5431W	<b>Docetaxel</b> , Solution concentrate for I.V. infusion 80 mg in 4 mL ( <i>Taxotere, Oncotaxel 80</i> )
5432X	<b>Docetaxel</b> , Solution concentrate for I.V. infusion 80 mg in 8 mL ( <i>DBL Docetaxel Concentrated Injection, Docetaxel Ebewe, Docetaxel Sandoz</i> )
5442K	<b>Tobramycin</b> , Solution for inhalation 300 mg in 5 mL ( <i>Tobi</i> )

### Addition – Brand

9296G	<i>Clopidogrel Winthrop Plus Aspirin, WA</i> – <b>Clopidogrel with Aspirin</b> , Tablet 75 mg (as hydrogen sulfate)-100 mg
5485Q	<i>Docetaxel Sandoz, SZ</i> – <b>Docetaxel</b> , Solution concentrate for I.V. infusion 20 mg in 2 mL
5486R	<i>Docetaxel Sandoz, SZ</i> – <b>Docetaxel</b> , Solution concentrate for I.V. infusion 20 mg in 2 mL
8987B	<i>Docetaxel Sandoz, SZ</i> – <b>Docetaxel</b> , Solution concentrate for I.V. infusion 20 mg in 2 mL
5487T	<i>Docetaxel Sandoz, SZ</i> – <b>Docetaxel</b> , Solution concentrate for I.V. infusion 80 mg in 8 mL
8990E	<i>Docetaxel Sandoz, SZ</i> – <b>Docetaxel</b> , Solution concentrate for I.V. infusion 80 mg in 8 mL
8450R	<i>Glimepiride GA 1, GM</i> – <b>Glimepiride</b> , Tablet 1 mg
8451T	<i>Glimepiride GA 2, GM</i> – <b>Glimepiride</b> , Tablet 2 mg
8533D	<i>Glimepiride GA 3, GM</i> – <b>Glimepiride</b> , Tablet 3 mg
8452W	<i>Glimepiride GA 4, GM</i> – <b>Glimepiride</b> , Tablet 4 mg
8414W	<i>Irinotecan Kabi, PK</i> – <b>Irinotecan Hydrochloride Trihydrate</b> , I.V. injection 40 mg in 2 mL
8415X	<i>Irinotecan Kabi, PK</i> – <b>Irinotecan Hydrochloride Trihydrate</b> , I.V. injection 100 mg in 5 mL
3416T	<i>your pharmacy Clear Laxative, TW</i> – <b>Macrogol 3350</b> , Powder for oral solution 510 g
5427P	<i>your pharmacy Clear Laxative, TW</i> – <b>Macrogol 3350</b> , Powder for oral solution 510 g ( <b>Palliative Care</b> )
5426N	<i>your pharmacy Clear Laxative, TW</i> – <b>Macrogol 3350</b> , Powder for oral solution 510 g ( <b>Palliative Care</b> )
8847P	<i>Oxaliplatin SUN, ZF</i> – <b>Oxaliplatin</b> , Solution concentrate for I.V. infusion 50 mg in 10 mL
8848Q	<i>Oxaliplatin SUN, ZF</i> – <b>Oxaliplatin</b> , Solution concentrate for I.V. infusion 100 mg in 20 mL
2310N	<i>Oxaliplatin SUN, ZF</i> – <b>Oxaliplatin</b> , Solution concentrate for I.V. infusion 200 mg in 40 mL
8621R	<i>Risedronate-GA, GM</i> – <b>Risedronate Sodium</b> , Tablet 35 mg

### Addition – Equivalence Indicator

2310N	<i>Eloxatin, SW</i> – <b>Oxaliplatin</b> , Solution concentrate for I.V. infusion 200 mg in 40 mL
-------	---

### Addition – Note

- 8561N **Meloxicam**, Tablet 7.5 mg (*Mobic, Movalis 7.5, Chem mart Meloxicam 7.5 mg, Terry White Chemists Meloxicam 7.5 mg, GenRx Meloxicam, Moxicam 7.5, Meloxicam-GA, Pharmacor Meloxicam 7.5, Meloxicam Ranbaxy, Meloxibell, Meloxicam Sandoz*)
- 8887R **Meloxicam**, Capsule 7.5 mg (*Mobic, Movalis 7.5*)
- 8562P **Meloxicam**, Tablet 15 mg (*Mobic, Movalis 15, Chem mart Meloxicam 15 mg, Terry White Chemists Meloxicam 15 mg, GenRx Meloxicam, Moxicam 15, Meloxicam-GA, Meloxicam Ranbaxy, Meloxibell, Pharmacor Meloxicam 15, Meloxicam Sandoz*)
- 8888T **Meloxicam**, Capsule 15 mg (*Mobic, Movalis 15*)

### Deletions

#### Deletion – Brand

- 2344J *Cardinorm, HX – Amiodarone*, Tablet containing amiodarone hydrochloride 100 mg
- 2343H *Cardinorm, HX – Amiodarone*, Tablet containing amiodarone hydrochloride 200 mg
- 1158Y *GenRx Cimetidine, GX – Cimetidine*, Tablet 400 mg
- 1159B *GenRx Cimetidine, GX – Cimetidine*, Tablet 800 mg
- 1638F *Metronidazole Sandoz, SZ – Metronidazole*, I.V. infusion 500 mg in 100 mL
- 5154G *Metronidazole Sandoz, SZ – Metronidazole*, I.V. infusion 500 mg in 100 mL (**Dental**)
- 8280T *Vinorelbine Kabi, PK – Vinorelbine*, Solution for I.V. infusion 10 mg (as tartrate) in 1 mL
- 8280T *Vinorelbine Link, FU – Vinorelbine*, Solution for I.V. infusion 10 mg (as tartrate) in 1 mL
- 8281W *Vinorelbine Link, FU – Vinorelbine*, Solution for I.V. infusion 50 mg (as tartrate) in 5 mL

#### Deletion – Equivalence Indicator

- 1158Y *Magicul 400, AF – Cimetidine*, Tablet 400 mg
- 1159B *Magicul 800, AF – Cimetidine*, Tablet 800 mg

### Alterations

#### Alteration – Brand Name

From:

- 2834E *Vastoran, RA – Pravastatin*, Tablet containing pravastatin sodium 20 mg

To:

- 2834E *Cholvastin, RA – Pravastatin*, Tablet containing pravastatin sodium 20 mg

From:

- 9238F *Vastoran, RA – Pravastatin*, Tablet containing pravastatin sodium 20 mg

To:

- 9238F *Cholvastin, RA – Pravastatin*, Tablet containing pravastatin sodium 20 mg

From:

- 8197K *Vastoran, RA – Pravastatin*, Tablet containing pravastatin sodium 40 mg

To:

- 8197K *Cholvastin, RA – Pravastatin*, Tablet containing pravastatin sodium 40 mg

From:

- 9239G *Vastoran, RA – Pravastatin*, Tablet containing pravastatin sodium 40 mg

To:

- 9239G *Cholvastin, RA – Pravastatin*, Tablet containing pravastatin sodium 40 mg

### Alteration – Item Description

From:

5455D **Degarelix**, Powder for injection 80 mg (as acetate) with solvent, syringe and needles (*Firmagon 80mg*)

To:

5455D **Degarelix**, Powder for injection 80 mg (as acetate), injection set (*Firmagon 80mg*)

From:

5456E **Degarelix**, Powder for injection 120 mg (as acetate) with solvent, syringe and needles, 2 (*Firmagon 120mg*)

To:

5456E **Degarelix**, Powder for injection 120 mg (as acetate), 2, injection set (*Firmagon 120mg*)

### Alteration – Restriction

8074Y **Docetaxel**, Injection set containing 1 single use vial concentrate for I.V. infusion 80 mg (anhydrous) in 2 mL with solvent (*Taxotere*)

8071T **Docetaxel**, Injection set containing 1 single use vial concentrate for I.V. infusion 20 mg (anhydrous) in 0.5 mL with solvent (*Taxotere*)

5463M **Docetaxel**, Solution concentrate for I.V. infusion 20 mg in 1 mL (*Taxotere, Oncotaxel 20*)

5486R **Docetaxel**, Solution concentrate for I.V. infusion 20 mg in 2 mL (*DBL Docetaxel Concentrated Injection, Docetaxel Ebewe, Docetaxel Sandoz*)

5464N **Docetaxel**, Solution concentrate for I.V. infusion 80 mg in 4 mL (*Taxotere, Oncotaxel 80*)

5487T **Docetaxel**, Solution concentrate for I.V. infusion 80 mg in 8 mL (*DBL Docetaxel Concentrated Injection, Docetaxel Ebewe, Docetaxel Sandoz*)

### Alteration – Note

Equivalence notes for the following drugs have been amended - see individual Schedule entries for details.

**Amlodipine**

**Docetaxel**

**Doxycycline**

**Disodium Pamidronate**

**Fludarabine**

**Gemcitabine**

**Lansoprazole**

**Omeprazole**

**Ondansetron**

**Oxaliplatin**

**Paroxetine**

**Perindopril**

**Perindopril with Indapamide Hemihydrate**

**Ramipril**

### Alteration – Manufacturer's Code

		From	To
1269T	<i>Androcur, BN – Cyproterone Acetate</i> , Tablet 50 mg	SC	BN
1270W	<i>Androcur, BN – Cyproterone Acetate</i> , Tablet 50 mg	SC	BN
8019C	<i>Androcur-100, BN – Cyproterone Acetate</i> , Tablet 100 mg	SC	BN

		<i>From</i>	<i>To</i>
9185K	<i>Fludarabine Actavis, TA – Fludarabine Phosphate</i> , Powder for I.V. injection 50 mg	GQ	TA
8049P	<i>Gemcitabine Actavis, TA – Gemcitabine</i> , Powder for I.V. infusion 200 mg (as hydrochloride)	GQ	TA
8050Q	<i>Gemcitabine Actavis, TA – Gemcitabine</i> , Powder for I.V. infusion 1 g (as hydrochloride)	GQ	TA
8101J	<i>Betaferon, BN – Interferon Beta-1b</i> , Injection set including 1 vial powder for injection 8,000,000 i.u. (250 micrograms) and solvent	SC	BN
8414W	<i>Irinotecan Actavis, TA – Irinotecan Hydrochloride Trihydrate</i> , I.V. injection 40 mg in 2 mL	GQ	TA
8415X	<i>Irinotecan Actavis, TA – Irinotecan Hydrochloride Trihydrate</i> , I.V. injection 100 mg in 5 mL	GQ	TA
2913H	<i>Microlut 28, BN – Levonorgestrel</i> , Tablets 30 micrograms, 28	SC	BN
8633J	<i>Mirena, BN – Levonorgestrel</i> , Intrauterine drug delivery system 52 mg (releasing approximately 20 micrograms per 24 hours)	SC	BN
1394J	<i>Microgynon 30 ED, BN – Levonorgestrel with Ethinylloestradiol</i> , Pack containing 21 tablets 150 micrograms-30 micrograms and 7 inert tablets	SC	BN
1456P	<i>Microgynon 50 ED, BN – Levonorgestrel with Ethinylloestradiol</i> , Pack containing 21 tablets 125 micrograms-50 micrograms and 7 inert tablets	SC	BN
1392G	<i>Triquilar ED, BN – Levonorgestrel with Ethinylloestradiol</i> , Pack containing 6 tablets 50 micrograms-30 micrograms, 5 tablets 75 micrograms-40 micrograms, 10 tablets 125 micrograms-30 micrograms and 7 inert tablets	SC	BN
2993M	<i>Primolut N, BN – Norethisterone</i> , Tablet 5 mg	SC	BN
8485N	<i>Climara 25, BN – Oestradiol</i> , Transdermal patches 2 mg (releasing approximately 25 micrograms per 24 hours), 4	SC	BN
8125P	<i>Climara 50, BN – Oestradiol</i> , Transdermal patches 3.8 mg (releasing approximately 50 micrograms per 24 hours), 4	SC	BN
8486P	<i>Climara 75, BN – Oestradiol</i> , Transdermal patches 5.7 mg (releasing approximately 75 micrograms per 24 hours), 4	SC	BN
8126Q	<i>Climara 100, BN – Oestradiol</i> , Transdermal patches 7.6 mg (releasing approximately 100 micrograms per 24 hours), 4	SC	BN
1663M	<i>Progynova, BN – Oestradiol Valerate</i> , Tablet 1 mg	SC	BN
1664N	<i>Progynova, BN – Oestradiol Valerate</i> , Tablet 2 mg	SC	BN
8539K	<i>Oxaliplatin Actavis, TA – Oxaliplatin</i> , Powder for I.V. infusion 50 mg	GQ	TA
8540L	<i>Oxaliplatin Actavis, TA – Oxaliplatin</i> , Powder for I.V. infusion 100 mg	GQ	TA
3026G	<i>Paclitaxel Actavis, TA – Paclitaxel</i> , Solution concentrate for I.V. infusion 30 mg in 5 mL	GQ	TA
8018B	<i>Paclitaxel Actavis, TA – Paclitaxel</i> , Solution concentrate for I.V. infusion 100 mg in 16.7 mL	GQ	TA
3017T	<i>Paclitaxel Actavis, TA – Paclitaxel</i> , Solution concentrate for I.V. infusion 150 mg in 25 mL	GQ	TA
8360B	<i>Paclitaxel Actavis, TA – Paclitaxel</i> , Solution concentrate for I.V. infusion 300 mg in 50 mL	GQ	TA
8132B	<i>Bonefos, BN – Sodium Clodronate Tetrahydrate</i> , Capsule equivalent to 400 mg sodium clodronate	SC	BN
8265B	<i>Bonefos 800 mg, BN – Sodium Clodronate Tetrahydrate</i> , Tablet equivalent to 800 mg sodium clodronate	SC	BN
8830R	<i>Testogel, BN – Testosterone</i> , Transdermal gel 50 mg in 5 g sachet, 30	SC	BN
2114G	<i>Primoteston Depot, BN – Testosterone Enanthate</i> , Injection 250 mg in 1 mL	SC	BN
9004X	<i>Reandron 1000, BN – Testosterone Undecanoate</i> , I.M. injection 1,000 mg in 4 mL	SC	BN

# SECTION 100 – HIGHLY SPECIALISED DRUGS PROGRAM

## Deletions

### Deletion – Item

9528L	<b>Ribavirin and Peginterferon Alfa-2b</b> , Pack containing 84 capsules ribavirin 200 mg and 4 single use injection pens containing peginterferon alfa-2b powder for injection 50 micrograms with diluent ( <i>Pegatron</i> )( <b>Public</b> )
6399T	<b>Ribavirin and Peginterferon Alfa-2b</b> , Pack containing 84 capsules ribavirin 200 mg and 4 single use injection pens containing peginterferon alfa-2b powder for injection 50 micrograms with diluent ( <i>Pegatron</i> )( <b>Private</b> )
9533R	<b>Ribavirin and Peginterferon Alfa-2b</b> , Pack containing 84 capsules ribavirin 200 mg and 4 single use injection pens containing peginterferon alfa-2b powder for injection 100 micrograms with diluent ( <i>Pegatron</i> )( <b>Public</b> )
6404C	<b>Ribavirin and Peginterferon Alfa-2b</b> , Pack containing 84 capsules ribavirin 200 mg and 4 single use injection pens containing peginterferon alfa-2b powder for injection 100 micrograms with diluent ( <i>Pegatron</i> )( <b>Private</b> )
9535W	<b>Ribavirin and Peginterferon Alfa-2b</b> , Pack containing 84 capsules ribavirin 200 mg and 4 single use injection pens containing peginterferon alfa-2b powder for injection 120 micrograms with diluent ( <i>Pegatron</i> )( <b>Public</b> )
6406E	<b>Ribavirin and Peginterferon Alfa-2b</b> , Pack containing 84 capsules ribavirin 200 mg and 4 single use injection pens containing peginterferon alfa-2b powder for injection 120 micrograms with diluent ( <i>Pegatron</i> )( <b>Private</b> )
9537Y	<b>Ribavirin and Peginterferon Alfa-2b</b> , Pack containing 84 capsules ribavirin 200 mg and 4 single use injection pens containing peginterferon alfa-2b powder for injection 150 micrograms with diluent ( <i>Pegatron</i> )( <b>Public</b> )
6408G	<b>Ribavirin and Peginterferon Alfa-2b</b> , Pack containing 84 capsules ribavirin 200 mg and 4 single use injection pens containing peginterferon alfa-2b powder for injection 150 micrograms with diluent ( <i>Pegatron</i> )( <b>Private</b> )
9532Q	<b>Ribavirin and Peginterferon Alfa-2b</b> , Pack containing 168 capsules ribavirin 200 mg and 4 single use injection pens containing peginterferon alfa-2b powder for injection 80 micrograms with diluent ( <i>Pegatron</i> )( <b>Public</b> )
6403B	<b>Ribavirin and Peginterferon Alfa-2b</b> , Pack containing 168 capsules ribavirin 200 mg and 4 single use injection pens containing peginterferon alfa-2b powder for injection 80 micrograms with diluent ( <i>Pegatron</i> )( <b>Private</b> )

## Alterations

### Alteration – Note

The equivalence note for the following drug has been amended - see individual entry for details.

#### Disodium Pamidronate

### Alteration – Manufacturer's Code

		<i>From</i>	<i>To</i>
5751Q	<i>Ventavis, BN</i> – <b>Iloprost Trometamol</b> , Solution for inhalation 20 micrograms (base) in 2 mL ( <b>Public</b> )	SC	BN
6456T	<i>Ventavis, BN</i> – <b>Iloprost Trometamol</b> , Solution for inhalation 20 micrograms (base) in 2 mL ( <b>Private</b> )	SC	BN

# SECTION 100 – HUMAN GROWTH HORMONE

## Alterations

### Alteration – Criteria for Availability

The Criteria for Availability are amended as follows:

Short stature in accordance with the *Guidelines for the Pharmaceutical Benefits Scheme Growth Hormone Program*. The program also aims to correct neonatal hypoglycaemia due to biochemical growth hormone deficiency and improve body composition for children with Prader-Willi Syndrome.

The Guidelines specify the eligibility criteria for the conditions that are eligible for treatment through the program which include:

- (i) short stature and slow growth;
- (ii) short stature associated with biochemical growth hormone deficiency;
- (iii) growth retardation secondary to intracranial lesion or cranial irradiation;
- (iv) neonates/infants at risk of hypoglycaemia secondary to growth hormone deficiency;
- (v) short stature associated with Turner Syndrome;
- (vi) short stature due to short stature homeobox (SHOX) gene disorders;
- (vii) short stature associated with chronic renal insufficiency;
- (viii) biochemical growth hormone deficiency and precocious puberty;
- (ix) Prader-Willi syndrome.

Genotropin branded products are available for the treatment of Prader-Willi Syndrome in accordance with the Guidelines.

#### **Note**

Growth hormone (Somatropin) for adults is currently not subsidised through the Pharmaceutical Benefits Scheme.

#### **Note**

These guidelines may be obtained from the Department of Health and Ageing's internet site at <http://www.health.gov.au/hGH>, or from:

Growth Hormone Program

Access and Systems Branch

Department of Health and Ageing

GPO Box 9848

CANBERRA ACT 2601

Contact telephone number (02) 6289 7274

## Advance Notices

### Advance Notices – Deletion of Item

The following item will be deleted from the Schedule of Pharmaceutical Benefits on 1 December 2011:

Item discontinued by the manufacturer—

3176E **Norethisterone with Mestranol**, Tablets 1 mg-50 micrograms, 21 (*Norinyl-1*)

### Advance Notices – Deletion of Brand

The following brand will be deleted from the Schedule of Pharmaceutical Benefits on 1 November 2011:

Brand deletion requested by the manufacturer—

1357K *Prothiaden, AB* – **Dothiepin Hydrochloride**, Capsule 25 mg

The following brand will be deleted from the Schedule of Pharmaceutical Benefits on 1 December 2011:

Brand discontinued by the manufacturer—

2776D *Synphasic, PF* – **Norethisterone with Ethinylloestradiol**, Pack containing 12 tablets 500 micrograms-35 micrograms, 9 tablets 1 mg-35 micrograms and 7 inert tablets

## GENERAL PHARMACEUTICAL BENEFITS

Code	Name, Restriction, Manner of Administration and Form	Max. Qty	No. of Rpts	Premium	Dispensed Price for Max. Qty \$	Maximum Recordable Value for Safety Net \$	a	Brand Name and Manufacturer	
<b>DOCETAXEL</b>									
<b><u>Authority required</u></b>									
Advanced breast cancer after failure of prior therapy;									
Advanced metastatic ovarian cancer after failure of prior therapy which includes a platinum compound;									
Locally advanced or metastatic non-small cell lung cancer.									
<b><u>Authority required</u></b>									
Treatment of androgen independent (hormone refractory) metastatic carcinoma of the prostate in a patient with a Karnofsky performance-status score of at least 60%. Docetaxel must be used as first-line chemotherapy and administered in three weekly cycles.									
<b><u>Note</u></b>									
A maximum of 10 cycles of treatment with docetaxel will be authorised under this restriction.									
<b><u>Note</u></b>									
Pharmaceutical benefits that have the forms docetaxel solution concentrate for I.V. infusion 20 mg in 1 mL and 20 mg in 2 mL, docetaxel concentrate for I.V. infusion 20 mg (after reconstitution) and docetaxel powder for I.V. infusion 20 mg (after reconstitution) are equivalent for the purposes of substitution.									
5149B	Powder for I.V. infusion 20 mg with solvent	2	..	..	*651.16	34.20	a	Docetaxel SUN	ZF
8071T	Injection set containing 1 single use vial concentrate for I.V. infusion 20 mg (anhydrous) in 0.5 mL with solvent	2	..	..	*651.16	34.20	a	Taxotere	SW
5463M	Solution concentrate for I.V. infusion 20 mg in 1 mL	2	..	..	*651.16	34.20	a	Oncotaxel 20	TA
							a	Taxotere	SW
5486R	Solution concentrate for I.V. infusion 20 mg in 2 mL	2	..	..	*651.16	34.20	a	DBL Docetaxel Concentrated Injection	HH
							a	Docetaxel Ebewe	HX
							a	Docetaxel Sandoz	SZ

### DOCETAXEL

#### **Authority required**

Advanced breast cancer after failure of prior therapy;

Advanced metastatic ovarian cancer after failure of prior therapy which includes a platinum compound;

Locally advanced or metastatic non-small cell lung cancer.

#### **Authority required**

Treatment of androgen independent (hormone refractory) metastatic carcinoma of the prostate in a patient with a Karnofsky performance-status score of at least 60%. Docetaxel must be used as first-line chemotherapy and administered in three weekly cycles.

#### **Note**

A maximum of 10 cycles of treatment with docetaxel will be authorised under this restriction.

#### **Note**

Pharmaceutical benefits that have the forms docetaxel solution concentrate for I.V. infusion 80 mg in 4 mL and 80 mg in 8 mL, docetaxel concentrate for I.V. infusion 80 mg (after reconstitution) and docetaxel powder for I.V. infusion 80 mg (after reconstitution) are equivalent for the purposes of substitution.

5156J	Powder for I.V. infusion 80 mg with solvent	1	..	..	1280.83	34.20	a	Docetaxel SUN	ZF
8074Y	Injection set containing 1 single use vial concentrate for I.V. infusion 80 mg (anhydrous) in 2 mL with solvent	1	..	..	1280.83	34.20	a	Taxotere	SW
5464N	Solution concentrate for I.V. infusion 80 mg in 4 mL	1	..	..	1280.83	34.20	a	Oncotaxel 80	TA
							a	Taxotere	SW
5487T	Solution concentrate for I.V. infusion 80 mg in 8 mL	1	..	..	1280.83	34.20	a	DBL Docetaxel Concentrated Injection	HH
							a	Docetaxel Ebewe	HX
							a	Docetaxel Sandoz	SZ

## GENERAL PHARMACEUTICAL BENEFITS

Code	Name, Restriction, Manner of Administration and Form	Max. Qty	No. of Rpts	Premium	Dispensed Price for Max. Qty \$	Maximum Recordable Value for Safety Net \$	Brand Name and Manufacturer
<b>DOCETAXEL</b>							
<b>Authority required</b>							
Adjuvant treatment of node-positive breast cancer in combination with an anthracycline and cyclophosphamide.							
<b>Note</b>							
Pharmaceutical benefits that have the forms docetaxel solution concentrate for I.V. infusion 20 mg in 1 mL, docetaxel solution concentrate for I.V. infusion 20 mg in 2 mL and docetaxel concentrate for I.V. infusion 20 mg (after reconstitution) are equivalent for the purposes of substitution.							
5430T	Injection set containing 1 single use vial concentrate for I.V. infusion 20 mg (anhydrous) in 0.5 mL with solvent	2	..	..	*651.16	34.20 <sup>a</sup>	Taxotere SW
5428Q	Solution concentrate for I.V. infusion 20 mg in 1 mL	2	..	..	*651.16	34.20 <sup>a</sup>	Oncotaxel 20 TA
							<sup>a</sup> Taxotere SW
5429R	Solution concentrate for I.V. infusion 20 mg in 2 mL	2	..	..	*651.16	34.20 <sup>a</sup>	DBL Docetaxel Concentrated Injection HH
							<sup>a</sup> Docetaxel Ebewe HX
							<sup>a</sup> Docetaxel Sandoz SZ
<hr/>							
<b>DOCETAXEL</b>							
<b>Authority required</b>							
Neoadjuvant treatment of a patient with a WHO performance status of 1 or less, with inoperable Stage III, IVa or IVb squamous cell carcinoma of the oral cavity, larynx, oropharynx or hypopharynx, in combination with cisplatin and fluorouracil.							
<b>Note</b>							
The carcinoma can be considered inoperable for technical or organ preservation reasons.							
<b>Authority required</b>							
Adjuvant treatment of node-positive breast cancer in combination with an anthracycline and cyclophosphamide.							
<b>Note</b>							
Pharmaceutical benefits that have the forms docetaxel solution concentrate for I.V. infusion 80 mg in 4 mL, docetaxel solution concentrate for I.V. infusion 80 mg in 8 mL and docetaxel concentrate for I.V. infusion 80 mg (after reconstitution) are equivalent for the purposes of substitution.							
5433Y	Injection set containing 1 single use vial concentrate for I.V. infusion 80 mg (anhydrous) in 2 mL with solvent	1	..	..	1280.83	34.20 <sup>a</sup>	Taxotere SW
5431W	Solution concentrate for I.V. infusion 80 mg in 4 mL	1	..	..	1280.83	34.20 <sup>a</sup>	Oncotaxel 80 TA
							<sup>a</sup> Taxotere SW
5432X	Solution concentrate for I.V. infusion 80 mg in 8 mL	1	..	..	1280.83	34.20 <sup>a</sup>	DBL Docetaxel Concentrated Injection HH
							<sup>a</sup> Docetaxel Ebewe HX
							<sup>a</sup> Docetaxel Sandoz SZ
<b>TOBRAMYCIN</b>							
<b>Authority required (STREAMLINED)</b>							
<b>3842</b>							
Management of a proven Pseudomonas aeruginosa infection in a patient with cystic fibrosis.							
<b>Note</b>							
No applications for increased maximum quantities and/or repeats will be authorised.							
<b>Note</b>							
Special Pricing Arrangements apply.							
5442K	Solution for inhalation 300 mg in 5 mL	56	2	..	2137.36	34.20	Tobi NV