Australian Government

Department of Health and Ageing

SCHEDULE OF PHARMACEUTICAL BENEFITS FOR APPROVED PHARMACISTS AND MEDICAL PRACTITIONERS

CHEMOTHERAPY PHARMACEUTICALS ACCESS PROGRAM SUPPLEMENT

This Schedule is also available on the internet at

www.pbs.gov.au

EFFECTIVE 1 November 2011 - 30 November 2011

(ALL PREVIOUS EDITIONS CANCELLED)

SUMMARY OF CHANGES

CHEMOTHERAPY PHARMACEUTICALS ACCESS PROGRAM

Additions

Addition – Brand

5872C *DBL Fluorouracil Injection BP, HH* – **Fluorouracil**, Injection 1000 mg in 20 mL

5807P *DBL Fluorouracil Injection BP, HH* – **Fluorouracil**, Injection 2500 mg in 50 mL

5833B *Irinotecan Actavis 500, TA* – **Irinotecan Hydrochloride Trihydrate**, I.V. injection 500 mg in 25 mL

Addition – Equivalence Indicator

5872C *Fluorouracil Ebewe, SZ* – **Fluorouracil**, Injection 1000 mg in 20 mL

5807P *Fluorouracil Ebewe, SZ* – **Fluorouracil**, Injection 2500 mg in 50 mL

Alterations

Alteration – Number of Repeats

		From	*To*
5963W	**Methotrexate**, Injection 50 mg in 2 mL *(Hospira Pty Limited, Pfizer Australia Pty Ltd)*	0	5

Explanatory Notes

In addition to the drugs and medicinal preparations listed in the Schedule of Pharmaceutical Benefits, a number of drugs are also available as pharmaceutical benefits but are distributed under alternative arrangements. These alternative arrangements are provided for under section 100 of the *National Health Act 1953*.

Section 100 chemotherapy drugs for day only admitted and non-admitted patients of Public Hospitals

The adoption of the Australian Government's pharmaceutical reforms will see a change to the access arrangements for cancer chemotherapy drugs for public hospitals.

A range of currently listed PBS cancer chemotherapy agents have been transferred to section 100 funding arrangements to facilitate access to day admitted and non-admitted patients. Benefits are available for the listed chemotherapy drugs only. There is no facility for individual approval for chemotherapy drugs outside those listed.

To gain access to a Commonwealth funded drug under this arrangement a patient must attend a participating public hospital and be a day admitted or non-admitted patient. Only a medical practitioner, in the course of employment with the participating public hospital, may prescribe the subsidised medication.

Chemotherapy drugs claimed under this arrangement may only be supplied by an approved hospital authority and only dispensed by the hospital pharmacy.

All drugs supplied under these arrangements will have a patient copayment deducted from the Commonwealth reimbursement price. Under the provisions of the National Healthcare Agreement, copayments cannot be raised, by the hospital, for drugs supplied to day admitted patients. Copayments can be raised and collected, by the hospital, for non-admitted patients.

If you would like further information about the special arrangements for section 100 chemotherapy drugs, please contact the State Government adviser:

Victoria	(03) 9096 2506
Queensland	(07) 3636 9830
Western Australia	(08) 9388 4980
Northern Territory	(08) 8999 2448

As of 1 September 2009, some of the chemotherapy pharmaceuticals that are available for supply under the Program no longer require an authority from the Medicare Australia CEO. Medical practitioners who prescribe these drugs to their patients (and approved hospital authorities acting on their behalf) only need to record a four digit streamlined authority code on the patient's medication chart to indicate that these drugs have been prescribed in accordance with the restrictions set out in this schedule.

For more information on how to prescribe these 'Authority required (STREAMLINED)' items, refer to the Explanatory Notes of the Schedule of Pharmaceutical Benefits at www.pbs.gov.au or the Medicare Australia website at www.medicareaustralia.gov.au.

For further information on streamlined authority arrangements, visit the Department of Health and Ageing website at www.health.gov.au/pbsreform.

Index of Manufacturers' Codes

Code	*Manufacturer*
AE	AFT Pharmaceuticals Pty Ltd Level 1, 296 Burns Bay Road Lane Cove NSW 2066 Tel: 1800 097 639 Fax: 1800 097 810
AF	Alphapharm Pty Limited Level 1, 30 The Bond 30-34 Hickson Road Millers Point NSW 2000 Tel: (02) 9298 3999 Fax: (02) 9566 4686
BQ	Bristol-Myers Squibb Pharmaceuticals A Division of Bristol-Myers Squibb Australia Pty Ltd 556 Princes Highway Noble Park Vic 3174 Tel: (03) 9213 4000 Fax: (03) 9701 1518
BX	Baxter Healthcare Pty Limited 1 Baxter Drive Old Toongabbie NSW 2146 Tel: (02) 9848 1111 Fax: (02) 9848 1123
FB	Pierre Fabre Medicament Australia Pty Limited Unit 26B, Parkview Business Centre 1 Maitland Place Baulkham Hills NSW 2153 Tel: (02) 8858 2800 Fax: (02) 8858 2888
GK	GlaxoSmithKline Australia Pty Ltd Level 4, 436-438 Johnston Street Abbotsford Vic 3067 Tel: (03) 9413 7300 Fax: (03) 8761 2410
GZ	Genzyme Australasia Pty Ltd Level 1, Building C 12-24 Talavera Road North Ryde NSW 2113 Tel: (02) 9978 3900 Fax: (02) 9889 3900
HH	Hospira Pty Ltd (David Bull Laboratories, Faulding Pharmaceuticals) Level 3, 500 Collins Street Melbourne Vic 3000 Tel: (03) 8744 5200 Fax: (03) 9866 3504
HX	Hexal Australia A division of Sandoz Pty Ltd Level 4, Suite 7-19 100 Harris Street Pyrmont NSW 2009 Tel: (02) 9566 1500 Fax: (02) 9566 1458
JC	Janssen-Cilag Pty Ltd 1-5 Khartoum Road North Ryde NSW 2113 Tel: (02) 8875 3333 Fax: (02) 8875 3300
LY	Eli Lilly Australia Pty Limited 112 Wharf Road West Ryde NSW 2114 Tel: (02) 9325 4444 Fax: (02) 9325 4410
MK	Merck Sharp & Dohme (Australia) Pty Ltd 54-68 Ferndell Street South Granville NSW 2142 Tel: (02) 9795 9500 Fax: (02) 9795 9595
NV	Novartis Pharmaceuticals Australia Pty Ltd 54 Waterloo Road North Ryde NSW 2113 Tel: (02) 9805 3555 Fax: (02) 9887 4551
OA	Orphan Australia Pty Ltd A member of Aspen Group of Companies First Floor, 34-36 Chandos Street St Leonards NSW 2065 Tel: (02) 8436 8300 Fax: (02) 9901 3540
OE	Omegapharm Pty Ltd 21 Queen Street Ormond Vic 3204 Tel: (03) 9483 0070 Fax: (03) 9483 0070
PF	Pfizer Pty Limited 38-42 Wharf Road West Ryde NSW 2114 Tel: (02) 9850 3333 Fax: (02) 9858 1347
PK	Fresenius Kabi Australia Pty Limited 964 Pacific Highway Pymble NSW 2073 Tel: 1300 732 001 Fax: 1300 304 384
PL	Phebra 332 Burns Bay Road Lane Cove NSW 2066 Tel: (02) 9420 9199 Fax: (02) 9420 9177
QA	Aspen Pharma Pty Ltd 96 Merrindale Drive Croydon Vic 3136 Tel: (03) 9839 2800 Fax: (03) 9839 2802
RO	Roche Products Pty Ltd 4-10 Inman Road Dee Why NSW 2099 Tel: (02) 9454 9000 Fax: (02) 9971 7401
RZ	Dr Reddy's Laboratories (Australia) Pty Ltd Level 1, 181 Bay Street Brighton Vic 3186 Tel: (03) 9595 3812 Fax: (03) 9595 3800

Index of Manufacturers' Codes

Code	*Manufacturer*
SE	Servier Laboratories (Aust.) Pty Ltd 8 Cato Street Hawthorn Vic 3122 Tel: (03) 8823 7333 Fax: (03) 9822 9790
SG	Merck Serono Australia Pty Ltd Unit 3-4, 25 Frenchs Forest Road East Frenchs Forest NSW 2086 Tel: (02) 8977 4100 Fax: (02) 9975 1516
SW	Sanofi-Aventis Australia Pty Ltd Building D, Talavera Corporate Centre 12-24 Talavera Road Macquarie Park NSW 2113 Tel: (02) 8666 2000 Fax: (02) 8666 3000
SZ	Sandoz Pty Ltd Level 4, Suite 7-19 100 Harris Street Pyrmont NSW 2009 Tel: (02) 9566 1500 Fax: (02) 9566 1458
TA	Actavis Australia Pty Ltd Upper Ground Floor 183 Melbourne Street North Adelaide SA 5006 Tel: (08) 8267 1545 Fax: (08) 8267 2642
TS	Specialised Therapeutics Australia Pty Ltd Level 1, 711 High Street Kew East Vic 3102 Tel: 1300 798 820 Fax: 1800 798 829
TX	Apotex Pty Ltd 16 Giffnock Avenue Macquarie Park NSW 2113 Tel: (02) 8877 8333 Fax: (02) 8877 8377
WA	Winthrop Pharmaceuticals Division of Sanofi-Aventis Australia Pty Limited Building D, Talavera Corporate Centre 12-24 Talavera Road Macquarie Park NSW 2113 Tel: (02) 8666 2000 Fax: (02) 8666 3000
WQ	Willow Pharmaceuticals Pty Limited Level 4, 5 Essex Street The Rocks NSW 2000 Tel: (02) 9241 2235 Fax: (02) 9241 2217
ZF	Sun Pharmaceutical Industries (Australia) Pty Ltd 1053 Burwood Highway Ferntree Gully Vic 3156 Tel: (03) 9568 6102 Fax: (03) 9568 6610
ZP	Spirit Pharmaceuticals Pty Ltd 117 Harrington Street The Rocks Sydney NSW 2000 Tel: (02) 9251 1088 Fax: (02) 9251 1099

SPECIAL PHARMACEUTICAL BENEFITS

The special patient contribution is payable by all patients in addition to the relevant patient contribution for concessional and general patients. Other than for bleomycin sulfate, exemptions on medical grounds are available. For eligible veterans under RPBS provisions, see RPBS EXPLANATORY NOTES, paragraph 32.

Code	Name, Restriction, Manner of Administration and Form	Max. Qty	No. of Rpts	Premium	Reimbursement Price for Max. Qty $	Dispensed Price for Max. Qty $	Maximum Recordable Value for Safety Net $	Brand Name and Manufacturer	
	Antineoplastic and immunomodulating agents								
	Antineoplastic agents								
	Cytotoxic antibiotics and related substances								
	Other cytotoxic antibiotics								
	BLEOMYCIN SULFATE								
	Restricted benefit								
	Germ cell neoplasms;								
	Lymphoma.								
5903Q	Powder for injection 15,000 i.u.	10	..	$367.80	*408.90	*776.70	34.20	Hospira Pty Limited	HH

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	

Alimentary tract and metabolism

Antiemetics and antinauseants

Antiemetics and antinauseants
Serotonin (5HT $_3$) antagonists

GRANISETRON HYDROCHLORIDE

Restricted benefit

Management of nausea and vomiting associated with cytotoxic chemotherapy being used to treat malignancy which occurs within 48 hours of chemotherapy administration.

Increased maximum quantities will be limited to a maximum of 7 days per chemotherapy cycle.

5898K	Tablet 2 mg (base)	2	..	..	*44.44	34.20		Kytril	HH
5899L	Concentrated injection 3 mg (base) in 3 mL	1	..	..	25.42	26.51	a	Kytril	HH
				..	*26.51	27.60	a	Granisetron Kabi	PK

ONDANSETRON

Restricted benefit

Management of nausea and vomiting associated with cytotoxic chemotherapy being used to treat malignancy which occurs within 48 hours of chemotherapy administration.

Increased maximum quantities will be limited to a maximum of 7 days per chemotherapy cycle.

Note

Pharmaceutical benefits that have the form ondansetron tablet (orally disintegrating) 4 mg and pharmaceutical benefits that have the form ondansetron wafer 4 mg are equivalent for the purposes of substitution.

5857G	Tablet (orally disintegrating) 4 mg	4	..	..	16.17	17.26	a	Ondansetron ODT-DRLA	RZ
5969E	Wafer 4 mg	4	..	..	16.17	17.26	a	Ondaz Zydis	SZ
							a	Zofran Zydis	GK

ONDANSETRON

Restricted benefit

Management of nausea and vomiting associated with cytotoxic chemotherapy being used to treat malignancy which occurs within 48 hours of chemotherapy administration.

Increased maximum quantities will be limited to a maximum of 7 days per chemotherapy cycle.

Note

Pharmaceutical benefits that have the form ondansetron tablet (orally disintegrating) 8 mg and pharmaceutical benefits that have the form ondansetron wafer 8 mg are equivalent for the purposes of substitution.

5858H	Tablet (orally disintegrating) 8 mg	4	..	..	25.33	26.42	a	Ondansetron ODT-DRLA	RZ
5970F	Wafer 8 mg	4	..	..	25.33	26.42	a	Ondaz Zydis	SZ
							a	Zofran Zydis	GK

ONDANSETRON

Restricted benefit

Management of nausea and vomiting associated with cytotoxic chemotherapy being used to treat malignancy which occurs within 48 hours of chemotherapy administration.

Increased maximum quantities will be limited to a maximum of 7 days per chemotherapy cycle.

5848T	Syrup 4 mg (as hydrochloride dihydrate) per 5 mL, 50 mL	‡1	..	..	66.76	34.20		Zofran syrup 50 mL	GK
5967C	Tablet 4 mg (as hydrochloride dihydrate)	4	..	..	16.17	17.26	a	APO-Ondansetron	TX
							a	Ondansetron-DRLA	RZ
							a	Ondaz	SZ
							a	Onsetron 4	ZP

CHEMOTHERAPY PHARMACEUTICALS ACCESS PROGRAM

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	
							[a]	Zofran	GK
5968D	Tablet 8 mg (as hydrochloride dihydrate)	4	..	..	25.33	26.42	[a]	APO-Ondansetron	TX
							[a]	Ondansetron-DRLA	RZ
							[a]	Ondaz	SZ
							[a]	Onsetron 8	ZP
							[a]	Zofran	GK
5971G	I.V. injection 4 mg (as hydrochloride dihydrate) in 2 mL	1	..	..	8.47	9.56	[a]	Ondansetron Alphapharm	AF
							[a]	Ondansetron-Claris	AE
							[a]	Ondaz	SZ
							[a]	Onsetron	ZP
							[a]	Pfizer Australia Pty Ltd	PF
							[a]	Zofran	GK
5972H	I.V. injection 8 mg (as hydrochloride dihydrate) in 4 mL	1	..	..	13.46	14.55	[a]	Ondansetron Alphapharm	AF
							[a]	Ondansetron-Claris	AE
							[a]	Ondaz	SZ
							[a]	Onsetron	ZP
							[a]	Pfizer Australia Pty Ltd	PF
							[a]	Zofran	GK

PALONOSETRON

Restricted benefit

Management of nausea and vomiting associated with cytotoxic chemotherapy being used to treat malignancy which occurs within 48 hours of chemotherapy administration.

Note

No applications for increased maximum quantities will be authorised. Palonosetron is not PBS-subsidised for administration with oral 5-HT3 antagonists.

5853C	Injection 250 micrograms (as hydrochloride) in 5 mL	1	..	..	34.36	34.20	Aloxi	TS

TROPISETRON HYDROCHLORIDE

Restricted benefit

Management of nausea and vomiting associated with cytotoxic chemotherapy being used to treat malignancy which occurs within 48 hours of chemotherapy administration.

Increased maximum quantities will be limited to a maximum of 7 days per chemotherapy cycle.

5986C	Capsule 5 mg (base)	2	..	..	37.02	34.20	Navoban	NV
5987D	I.V. injection 5 mg (base) in 5 mL	1	..	..	18.50	19.59	Navoban	NV

Other antiemetics

APREPITANT

Note

Aprepitant is not PBS-subsidised for nausea and vomiting associated with radiotherapy being used to treat malignancy.

Authority required (STREAMLINED)

3619

Management of nausea and vomiting associated with cytotoxic chemotherapy being used to treat malignancy, in combination with a 5HT3 antagonist and dexamethasone, where any 1 of the following chemotherapy agents are to be administered:
(a) altretamine;
(b) carmustine;
(c) cisplatin when a single dose constitutes a cycle of chemotherapy;
(d) cyclophosphamide at a dose of 1500 mg per square metre per day or greater;
(e) dacarbazine;
(f) procarbazine when a single dose constitutes a cycle of chemotherapy;
(g) streptozocin.
No more than 1 pack containing 1 x 125 mg capsule and 2 x 80 mg capsules will be authorised per cycle of cytotoxic chemotherapy;

CHEMOTHERAPY PHARMACEUTICALS ACCESS PROGRAM

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	
	3620 Management of nausea and vomiting associated with cytotoxic chemotherapy being used to treat breast cancer, in combination with a 5HT3 antagonist and dexamethasone, where cyclophosphamide and an anthracycline are to be co-administered. No more than 1 pack containing 1 x 125 mg capsule and 2 x 80 mg capsules will be authorised per cycle of cytotoxic chemotherapy; ***3621*** Management of nausea and vomiting associated with moderately emetogenic cytotoxic chemotherapy being used to treat malignancy, in combination with a 5HT3 antagonist and dexamethasone on day 1, where the patient has had a prior episode of chemotherapy induced nausea or vomiting where any 1 of the following intravenous chemotherapy agents is to be administered: (a) arsenic trioxide; (b) azacitidine; (c) carboplatin; (d) cyclophosphamide at a dose of less than 1500 mg per square metre per day; (e) cytarabine at a dose of greater than 1 g per square metre per day; (f) dactinomycin; (g) daunorubicin; (h) doxorubicin; (i) epirubicin; (j) fotemustine; (k) idarubicin; (l) ifosfamide; (m) irinotecan; (n) melphalan; (o) methotrexate at a dose of 250 mg to 1 g per square metre; (p) oxaliplatin; (q) raltitrexed. No more than one pack containing 1 x 125 mg capsule and 2 x 80 mg capsules will be authorised per cycle of cytotoxic chemotherapy. Concomitant use of a 5HT3 antagonist should not occur with aprepitant on days 2 and 3 of any chemotherapy cycle. **Note** No applications for increased maximum quantities and/or repeats will be authorised.							
5888X	Pack containing 1 capsule 125 mg and 2 capsules 80 mg	‡1	5	..	112.01	34.20	Emend	MK

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	

Antineoplastic and immunomodulating agents

Antineoplastic agents

Alkylating agents

Nitrogen mustard analogues

CYCLOPHOSPHAMIDE

5914G	Powder for injection 500 mg	2	..	..	*27.72	28.81		Endoxan	BX
5915H	Powder for injection 1 g	1	..	..	21.21	22.30		Endoxan	BX
5916J	Powder for injection 2 g	1	..	..	42.43	34.20		Endoxan	BX

IFOSFAMIDE
Restricted benefit
Relapsed or refractory germ cell tumours following first-line chemotherapy;

Relapsed or refractory sarcomas following first-line chemotherapy.

5943T	Powder for I.V. injection 1 g	5	5	..	*295.75	34.20		Holoxan	BX
5944W	Powder for I.V. injection 2 g	5	5	..	*592.00	34.20		Holoxan	BX

Ethylene imines

THIOTEPA

5984Y	Powder for injection 15 mg	2	1	..	*126.20	34.20		Aspen Pharma Pty Ltd	QA

Nitrosoureas

FOTEMUSTINE
Authority required (STREAMLINED)
3181
Metastatic malignant melanoma.

5900M	Powder for injection 208 mg with solvent	1	4	..	1084.33	34.20		Muphoran	SE

Antimetabolites

Folic acid analogues

METHOTREXATE

5873D	Solution concentrate for I.V. infusion 500 mg in 20 mL	1	..	..	47.11	34.20		Hospira Pty Limited	HH
5875F	Solution concentrate for I.V. infusion 1000 mg in 10 mL	1	..	..	94.21	34.20	[a]	Hospira Pty Limited	HH
							[a]	Methotrexate Ebewe	SZ
5876G	Solution concentrate for I.V. infusion 5000 mg in 50 mL	1	..	..	471.05	34.20		Methotrexate Ebewe	SZ
5962T	Injection 5 mg in 2 mL	5	..	..	24.09	25.18		Hospira Pty Limited	HH
5963W	Injection 50 mg in 2 mL	5	5	..	23.54	24.63	[a]	Hospira Pty Limited	HH
							[a]	Pfizer Australia Pty Ltd	PF

PEMETREXED DISODIUM
Authority required
Locally advanced or metastatic non-small cell lung cancer, after prior platinum-based chemotherapy.

Doses greater than 500 mg per metre squared body surface area (BSA) will not be approved for PBS subsidy. The patient's BSA must be provided at the time of the authority approval.

Authority required
Mesothelioma in combination with cisplatin.

Doses greater than 500 mg per metre squared body surface area (BSA) will not be approved for PBS subsidy. The patient's BSA must be provided at the time of the authority approval.

CHEMOTHERAPY PHARMACEUTICALS ACCESS PROGRAM

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	
	Note								
	No applications for increased maximum quantities for the 500 mg vial will be authorised.								
5834C	Powder for I.V. infusion 500 mg (base)	1	3	..	1559.86	34.20		Alimta	LY
5835D	Powder for I.V. infusion 100 mg (base)	1	3	..	311.97	34.20		Alimta	LY
	RALTITREXED								
	Authority required (STREAMLINED)								
	3185								
	For use as a single agent in the treatment of advanced colorectal cancer.								
5977N	Powder for I.V. infusion 2 mg	3	2	..	*760.02	34.20		Tomudex	HH

Purine analogues

	CLADRIBINE								
	Authority required (STREAMLINED)								
	3180								
	Hairy cell leukaemia.								
5889Y	Injection 10 mg in 5 mL	7	..	..	*4483.22	34.20		Litak	OA
5912E	Solution for I.V. infusion 10 mg in 10 mL	7	..	..	*4483.22	34.20		Leustatin	JC
	FLUDARABINE PHOSPHATE								
	Authority required								
	B-cell chronic lymphocytic leukaemia in combination with cyclophosphamide where the patient has advanced disease (Binet Stage B or C) or evidence of progressive Stage A disease.								
	Stage A progressive disease is defined by at least one of the following: persistent rise in lymphocyte count with doubling time less than 12 months; a downward trend in haemoglobin or platelets, or both; more than 50% increase in the size of liver, spleen, or lymph nodes, or appearance of these signs if not previously present; constitutional symptoms attributable to disease.								
	The diagnosis of chronic lymphocytic leukaemia (CLL) must have been established based on: (a) a lymphocytosis, with more than 5,000 million lymphocytes per L in the peripheral blood; and (b) a clonal population of B-cells (CD5/CD19) documented by flow cytometry.								
	Note								
	Pharmaceutical benefits that have the form fludarabine phosphate powder for I.V. injection 50 mg (after reconstitution) and pharmaceutical benefits that have the form fludarabine phosphate solution for I.V. injection 50 mg are equivalent for the purposes of substitution.								
5840J	Powder for I.V. injection 50 mg	5	3	..	1371.22	34.20	[a]	Fludara	GZ
				..	*1371.25	34.20	[a]	Farine	WQ
							[a]	Fludarabine Actavis	TA
5841K	Solution for I.V. injection 50 mg in 2 mL	5	3	..	1371.22	34.20	[a]	Fludarabine Ebewe	SZ

Pyrimidine analogues

	CYTARABINE								
5918L	Injection 100 mg in 5 mL	10	1	..	*100.92	34.20		Pfizer Australia Pty Ltd	PF
	FLUOROURACIL								
5807P	Injection 2500 mg in 50 mL	2	..	..	*34.70	34.20	[a]	DBL Fluorouracil Injection BP	HH
							[a]	Fluorouracil Ebewe	SZ
5808Q	Injection 5000 mg in 100 mL	1	..	..	34.69	34.20		Fluorouracil Ebewe	SZ
5872C	Injection 1000 mg in 20 mL	5	..	..	34.69	34.20	[a]	DBL Fluorouracil Injection BP	HH
				..	*34.70	34.20	[a]	Fluorouracil Ebewe	SZ
5935J	Injection 500 mg in 10 mL	10	..	..	*40.82	34.20	[a]	Fluorouracil Ebewe	SZ
							[a]	Hospira Pty Limited	HH

CHEMOTHERAPY PHARMACEUTICALS ACCESS PROGRAM

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	
	GEMCITABINE **Authority required** Advanced breast cancer in combination with paclitaxel after failure of prior therapy which includes an anthracycline; Advanced epithelial ovarian cancer, in combination with carboplatin, in patients who relapse more than 6 months after platinum-based therapy; Locally advanced or metastatic non-small cell lung cancer; Locally advanced or metastatic adenocarcinoma of the pancreas; Locally advanced or metastatic bladder cancer, in combination with cisplatin. **Note** Pharmaceutical benefits that have the form gemcitabine powder for I.V. infusion 200 mg (as hydrochloride) (after reconstitution) and pharmaceutical benefits that have the form gemcitabine solution concentrate for I.V. infusion 200 mg (as hydrochloride) are equivalent for the purposes of substitution.								
5843M	Solution concentrate for I.V. infusion 200 mg (as hydrochloride) in 20 mL	4	2	..	*106.28	34.20	[a]	Gemcitabine Ebewe	SZ
5936K	Powder for I.V. infusion 200 mg (as hydrochloride)	4	2	..	*106.28	34.20	[a]	DBL Gemcitabine for Injection	HH
							[a]	Gemcitabine Actavis	TA
							[a]	Gemcitabine Ebewe	SZ
							[a]	Gemcitabine Kabi	PK
							[a]	Gemcitabine Sun	ZF
							[a]	Gemcite	ZP
							[a]	Gemplan	WQ
							[a]	Gemzar	LY
	GEMCITABINE **Authority required** Advanced breast cancer in combination with paclitaxel after failure of prior therapy which includes an anthracycline; Advanced epithelial ovarian cancer, in combination with carboplatin, in patients who relapse more than 6 months after platinum-based therapy; Locally advanced or metastatic non-small cell lung cancer; Locally advanced or metastatic adenocarcinoma of the pancreas; Locally advanced or metastatic bladder cancer, in combination with cisplatin. **Note** Pharmaceutical benefits that have the form gemcitabine powder for I.V. infusion 1 g (as hydrochloride) (after reconstitution) and pharmaceutical benefits that have the form gemcitabine solution concentrate for I.V. infusion 1000 mg (as hydrochloride) are equivalent for the purposes of substitution.								
5844N	Solution concentrate for I.V. infusion 1000 mg (as hydrochloride) in 100 mL	2	2	..	*262.40	34.20	[a]	Gemcitabine Ebewe	SZ
5937L	Powder for I.V. infusion 1 g (as hydrochloride)	2	2	..	*262.40	34.20	[a]	DBL Gemcitabine for Injection	HH
							[a]	Gemcitabine Actavis	TA
							[a]	Gemcitabine Ebewe	SZ
							[a]	Gemcitabine Kabi	PK
							[a]	Gemcitabine Sun	ZF
							[a]	Gemcite	ZP
							[a]	Gemplan	WQ
							[a]	Gemzar	LY
	GEMCITABINE **Authority required** Advanced breast cancer in combination with paclitaxel after failure of prior therapy which includes an anthracycline; Advanced epithelial ovarian cancer, in combination with carboplatin, in patients who relapse more than 6 months after platinum-based therapy; Locally advanced or metastatic non-small cell lung cancer;								

CHEMOTHERAPY PHARMACEUTICALS ACCESS PROGRAM

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	
	Locally advanced or metastatic adenocarcinoma of the pancreas;								
	Locally advanced or metastatic bladder cancer, in combination with cisplatin.								
5845P	Powder for I.V. infusion 2 g (as hydrochloride)	1	2	..	262.99	34.20	[a]	DBL Gemcitabine for Injection	HH
							[a]	Gemcitabine Kabi	PK
5852B	Solution concentrate for I.V. infusion 500 mg (as hydrochloride) in 50 mL	4	2	..	*262.40	34.20		Gemcitabine Ebewe	SZ

Plant alkaloids and other natural products

Vinca alkaloids and analogues

VINBLASTINE SULFATE

5989F	Solution for I.V. injection 10 mg in 10 mL	5	..	..	138.12	34.20		Hospira Pty Limited	HH

VINCRISTINE SULFATE

5991H	I.V. injection 1 mg in 1 mL	10	..	..	*123.28	34.20	[a]	Hospira Pty Limited	HH
							[a]	Pfizer Australia Pty Ltd	PF

VINORELBINE

Authority required

Advanced breast cancer after failure of prior therapy which includes an anthracycline;

Locally advanced or metastatic non-small cell lung cancer.

5992J	Solution for I.V. infusion 10 mg (as tartrate) in 1 mL	16	2	..	*995.52	34.20	[a]	Hospira Pty Limited	HH
							[a]	Navelbine	FB
							[a]	Vinorelbine Ebewe	SZ
5993K	Solution for I.V. infusion 50 mg (as tartrate) in 5 mL	4	2	..	*1041.60	34.20	[a]	Hospira Pty Limited	HH
							[a]	Navelbine	FB
							[a]	Vinorelbine Ebewe	SZ
							[a]	Vinorelbine Kabi	PK

Podophyllotoxin derivatives

ETOPOSIDE

5931E	Solution for I.V. infusion 100 mg in 5 mL	5	..	..	132.80	34.20	[a]	Etoposide Ebewe	SZ
				..	*132.80	34.20	[a]	Hospira Pty Limited	HH
5932F	Powder for I.V. infusion 100 mg (as phosphate)	5	..	..	*132.80	34.20		Etopophos	BQ
5933G	Powder for I.V. infusion 1 g (as phosphate)	1	..	..	265.54	34.20		Etopophos	BQ

Taxanes

DOCETAXEL

Authority required

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.

Note

The carcinoma can be considered inoperable for technical or organ preservation reasons.

Note

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.

5842L	Injection set containing 1 single use vial concentrate for I.V. infusion 20 mg (anhydrous) in 0.5 mL with solvent	1	..	..	288.29	34.20	[a]	Taxotere	SW
5854D	Solution concentrate for I.V. infusion 20 mg in 1 mL	1	..	..	288.29	34.20	[a]	Oncotaxel 20	TA
							[a]	Taxotere	SW
5859J	Solution concentrate for I.V. infusion 20 mg in 2 mL	1	..	..	288.29	34.20	[a]	DBL Docetaxel Concentrated	HH

CHEMOTHERAPY PHARMACEUTICALS ACCESS PROGRAM

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	
								Injection	
							[a]	Docetaxel Ebewe	HX
							[a]	Docetaxel Sandoz	SZ

DOCETAXEL

Authority required

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.

Note

The carcinoma can be considered inoperable for technical or organ preservation reasons.

Authority required

Adjuvant treatment of node-positive breast cancer in combination with an anthracycline and cyclophosphamide;

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.

5809R	Solution concentrate for I.V. infusion 140 mg in 7 mL	1	..	..	2013.30	34.20		Oncotaxel 140	TA
5862M	Solution concentrate for I.V. infusion 160 mg in 16 mL	1	..	..	2310.90	34.20		DBL Docetaxel Concentrated Injection	HH

DOCETAXEL

Authority required

Treatment of HER2 positive early breast cancer in combination with trastuzumab.

Note

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.

5864P	Solution concentrate for I.V. infusion 20 mg in 1 mL	2	..	..	*576.58	34.20	[a]	Oncotaxel 20	TA
							[a]	Taxotere	SW
5865Q	Solution concentrate for I.V. infusion 20 mg in 2 mL	2	..	..	*576.58	34.20	[a]	DBL Docetaxel Concentrated Injection	HH
							[a]	Docetaxel Sandoz	SZ
5866R	Injection set containing 1 single use vial concentrate for I.V. infusion 20 mg (anhydrous) in 0.5 mL with solvent	2	..	..	*576.58	34.20	[a]	Taxotere	SW

DOCETAXEL

Authority required

Treatment of HER2 positive early breast cancer in combination with trastuzumab.

Note

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.

5867T	Solution concentrate for I.V. infusion 80 mg in 4 mL	1	..	..	1155.45	34.20	[a]	Oncotaxel 80	TA
							[a]	Taxotere	SW
5868W	Solution concentrate for I.V. infusion 80 mg in 8 mL	1	..	..	1155.45	34.20	[a]	DBL Docetaxel Concentrated Injection	HH

CHEMOTHERAPY PHARMACEUTICALS ACCESS PROGRAM

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	
							[a]	Docetaxel Sandoz	SZ
5869X	Injection set containing 1 single use vial concentrate for I.V. infusion 80 mg (anhydrous) in 2 mL with solvent	1	..	..	1155.45	34.20	[a]	Taxotere	SW

DOCETAXEL
Authority required
Treatment of HER2 positive early breast cancer in combination with trastuzumab.

Authority required
Adjuvant treatment of operable breast cancer in combination with cyclophosphamide.

Note
A maximum of four cycles of treatment will be authorised under this restriction.

5810T	Solution concentrate for I.V. infusion 140 mg in 7 mL	1	..	..	2013.30	34.20		Oncotaxel 140	TA

DOCETAXEL
Authority required
Treatment of HER2 positive early breast cancer in combination with trastuzumab.

5957M	Solution concentrate for I.V. infusion 160 mg in 16 mL	1	..	..	2310.90	34.20		DBL Docetaxel Concentrated Injection	HH

DOCETAXEL
Authority required
Adjuvant treatment of operable breast cancer in combination with cyclophosphamide.

Note
A maximum of four cycles of treatment will be authorised under this restriction.

Note
Pharmaceutical benefits that have the form docetaxel solution concentrate for I.V. infusion 20 mg in 1 mL and pharmaceutical benefits that have the form docetaxel concentrate for I.V. infusion 20 mg (after reconstitution) are equivalent for the purposes of substitution.

5811W	Solution concentrate for I.V. infusion 20 mg in 1 mL	2	..	..	*576.58	34.20	[a]	Oncotaxel 20	TA
							[a]	Taxotere	SW
5812X	Injection set containing 1 single use vial concentrate for I.V. infusion 20 mg (anhydrous) in 0.5 mL with solvent	2	..	..	*576.58	34.20	[a]	Taxotere	SW

DOCETAXEL
Authority required
Adjuvant treatment of operable breast cancer in combination with cyclophosphamide.

Note
A maximum of four cycles of treatment will be authorised under this restriction.

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

5813Y	Solution concentrate for I.V. infusion 80 mg in 4 mL	1	..	..	1155.45	34.20	[a]	Oncotaxel 80	TA
							[a]	Taxotere	SW
5814B	Injection set containing 1 single use vial concentrate for I.V. infusion 80 mg (anhydrous) in 2 mL with solvent	1	..	..	1155.45	34.20	[a]	Taxotere	SW

CHEMOTHERAPY PHARMACEUTICALS ACCESS PROGRAM

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	
	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 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.								
5591G	Powder for I.V. infusion 20 mg with solvent	2	..	..	*576.58	34.20	a	Docetaxel SUN	ZF
5855E	Solution concentrate for I.V. infusion 20 mg in 1 mL	2	..	..	*576.58	34.20	a	Oncotaxel 20	TA
							a	Taxotere	SW
5860K	Solution concentrate for I.V. infusion 20 mg in 2 mL	2	..	..	*576.58	34.20	a	DBL Docetaxel Concentrated Injection	HH
							a	Docetaxel Ebewe	HX
							a	Docetaxel Sandoz	SZ
5921P	Injection set containing 1 single use vial concentrate for I.V. infusion 20 mg (anhydrous) in 0.5 mL with solvent	2	..	..	*576.58	34.20	a	Taxotere	SW
	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.								
5592H	Powder for I.V. infusion 80 mg with solvent	1	..	..	1155.45	34.20	a	Docetaxel SUN	ZF
5856F	Solution concentrate for I.V. infusion 80 mg in 4 mL	1	..	..	1155.45	34.20	a	Oncotaxel 80	TA
							a	Taxotere	SW
5861L	Solution concentrate for I.V. infusion 80 mg in 8 mL	1	..	..	1155.45	34.20	a	DBL Docetaxel Concentrated Injection	HH
							a	Docetaxel Ebewe	HX
							a	Docetaxel Sandoz	SZ
5922Q	Injection set containing 1 single use vial concentrate for I.V. infusion 80 mg (anhydrous) in 2 mL with solvent	1	..	..	1155.45	34.20	a	Taxotere	SW
	DOCETAXEL **Authority required** Adjuvant treatment of node-positive breast cancer in combination with an anthracycline and cyclophosphamide.								

CHEMOTHERAPY PHARMACEUTICALS ACCESS PROGRAM

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	
	Note								
	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.								
5593J	Solution concentrate for I.V. infusion 20 mg in 1 mL	2	..	..	*576.58	34.20	[a]	Oncotaxel 20	TA
							[a]	Taxotere	SW
5594K	Solution concentrate for I.V. infusion 20 mg in 2 mL	2	..	..	*576.58	34.20	[a]	DBL Docetaxel Concentrated Injection	HH
							[a]	Docetaxel Ebewe	HX
							[a]	Docetaxel Sandoz	SZ
5595L	Injection set containing 1 single use vial concentrate for I.V. infusion 20 mg (anhydrous) in 0.5 mL with solvent	2	..	..	*576.58	34.20	[a]	Taxotere	SW
	DOCETAXEL								
	Authority required								
	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.								
	Note								
	The carcinoma can be considered inoperable for technical or organ preservation reasons.								
	Authority required								
	Adjuvant treatment of node-positive breast cancer in combination with an anthracycline and cyclophosphamide.								
	Note								
	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.								
5596M	Solution concentrate for I.V. infusion 80 mg in 4 mL	1	..	..	1155.45	34.20	[a]	Oncotaxel 80	TA
							[a]	Taxotere	SW
5597N	Solution concentrate for I.V. infusion 80 mg in 8 mL	1	..	..	1155.45	34.20	[a]	DBL Docetaxel Concentrated Injection	HH
							[a]	Docetaxel Ebewe	HX
							[a]	Docetaxel Sandoz	SZ
5598P	Injection set containing 1 single use vial concentrate for I.V. infusion 80 mg (anhydrous) in 2 mL with solvent	1	..	..	1155.45	34.20	[a]	Taxotere	SW
	NAB PACLITAXEL								
	Authority required								
	Metastatic breast cancer after failure of prior therapy.								
5847R	Powder for I.V. injection 100 mg (base)	1	..	..	401.48	34.20		Abraxane	TS
	PACLITAXEL								
	Authority required								
	Adjuvant treatment of node-positive breast cancer administered sequentially to an anthracycline and cyclophosphamide;								
	Advanced breast cancer after failure of prior therapy;								
	Advanced metastatic ovarian cancer after failure of prior therapy which includes a platinum compound;								
	Primary treatment of ovarian cancer in combination with a platinum compound;								
	Locally advanced or metastatic non-small cell lung cancer;								
	Treatment of HER2 positive early breast cancer in combination with trastuzumab.								
5973J	Solution concentrate for I.V. infusion 30 mg in 5 mL	5	..	..	*392.45	34.20	[a]	Anzatax	HH
							[a]	Paclitaxel Actavis	TA
							[a]	Paclitaxel Kabi	PK
							[a]	Plaxel	WQ

CHEMOTHERAPY PHARMACEUTICALS ACCESS PROGRAM

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	
							[a]	Taxol	BQ
				..	392.48	34.20	[a]	Paclitaxel Ebewe	SZ
5974K	Solution concentrate for I.V. infusion 100 mg in 16.7 mL	2	..	..	*520.74	34.20	[a]	Anzatax	HH
							[a]	Paclitaxel Actavis	TA
							[a]	Paclitaxel Ebewe	SZ
							[a]	Paclitaxel Kabi	PK
							[a]	Plaxel	WQ
							[a]	Taxol	BQ
5975L	Solution concentrate for I.V. infusion 150 mg in 25 mL	2	..	..	*759.04	34.20	[a]	Anzatax	HH
							[a]	Paclitaxel Actavis	TA
							[a]	Paclitaxel Ebewe	SZ
							[a]	Plaxel	WQ
5976M	Solution concentrate for I.V. infusion 300 mg in 50 mL	1	..	..	790.88	34.20	[a]	Anzatax	HH
							[a]	Paclitaxel Actavis	TA
							[a]	Paclitaxel Ebewe	SZ
							[a]	Paclitaxel Kabi	PK
							[a]	Plaxel	WQ
							[a]	Taxol	BQ

Cytotoxic antibiotics and related substances

Anthracyclines and related substances

DOXORUBICIN HYDROCHLORIDE

5879K	Solution for I.V. injection or intravesical administration 100 mg in 50 mL	1	..	..	58.14	34.20		Doxorubicin Ebewe	SZ
5880L	Solution for I.V. injection or intravesical administration 200 mg in 100 mL	1	..	..	116.27	34.20	[a]	Adriamycin	PF
							[a]	Doxorubicin Ebewe	SZ
5925W	Solution for I.V. injection or intravesical administration 10 mg in 5 mL	4	..	..	*27.52	28.61	[a]	Adriamycin Solution	PF
							[a]	Doxorubicin Ebewe	SZ
							[a]	Hospira Pty Limited	HH
5926X	Solution for I.V. injection or intravesical administration 20 mg in 10 mL	4	..	..	*49.20	34.20		Adriamycin Solution	PF
5927Y	Solution for I.V. injection or intravesical administration 50 mg in 25 mL	3	..	..	*87.21	34.20	[a]	Adriamycin Solution	PF
							[a]	Doxorubicin Ebewe	SZ
							[a]	Hospira Pty Limited	HH

DOXORUBICIN HYDROCHLORIDE, PEGYLATED LIPOSOMAL

Authority required

Advanced epithelial ovarian cancer in women who have failed a first-line platinum-based chemotherapy regimen;

Metastatic breast cancer, as monotherapy, after failure of prior therapy which includes capecitabine and a taxane;

Metastatic breast cancer, as monotherapy, where therapy with capecitabine and/or a taxane is contraindicated.

5891C	Suspension for I.V. infusion 20 mg in 10 mL	1	..	..	622.99	34.20		Caelyx	JC
5892D	Suspension for I.V. infusion 50 mg in 25 mL	1	..	..	1483.30	34.20		Caelyx	JC

EPIRUBICIN HYDROCHLORIDE

5884Q	Solution for injection 200 mg in 100 mL	1	..	..	666.26	34.20	[a]	DBL Epirubicin Hydrochloride Injection	HH
							[a]	Epirubicin Ebewe	SZ
5885R	Solution for injection 100 mg in 50 mL	2	..	..	*676.40	34.20	[a]	Epirubicin Ebewe	SZ
							[a]	Hospira Pty Limited	HH

CHEMOTHERAPY PHARMACEUTICALS ACCESS PROGRAM

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	
5928B	Solution for injection 10 mg in 5 mL	4	..	..	*143.64	34.20	[a]	Epirubicin Ebewe	SZ
							[a]	Pharmorubicin Solution	PF
5929C	Solution for injection 20 mg in 10 mL	4	..	..	*277.24	34.20		Pharmorubicin Solution	PF
5930D	Solution for injection 50 mg in 25 mL	4	..	..	*685.60	34.20	[a]	Epirubicin Ebewe	SZ
							[a]	Hospira Pty Limited	HH
							[a]	Pharmorubicin Solution	PF
	IDARUBICIN HYDROCHLORIDE								
	Restricted benefit								
	Acute myelogenous leukaemia.								
5941Q	Solution for I.V. injection 5 mg in 5 mL	3	..	..	*422.52	34.20	[a]	Idarubicin Ebewe	SZ
				..	422.53	34.20	[a]	Zavedos Solution	PF
5942R	Solution for I.V. injection 10 mg in 10 mL	6	..	..	*1633.86	34.20	[a]	Idarubicin Ebewe	SZ
				..	1633.90	34.20	[a]	Zavedos Solution	PF
	MITOZANTRONE HYDROCHLORIDE								
5964X	Injection 10 mg (base) in 5 mL	1	..	..	65.25	34.20		Pfizer Australia Pty Ltd	PF
5965Y	Injection 20 mg (base) in 10 mL	1	..	..	130.51	34.20	[a]	Hospira Pty Limited	HH
							[a]	Mitozantrone Ebewe	SZ
							[a]	Onkotrone	BX
							[a]	Pfizer Australia Pty Ltd	PF
5966B	Injection 25 mg (base) in 12.5 mL	1	..	..	163.05	34.20	[a]	Onkotrone	BX
							[a]	Pfizer Australia Pty Ltd	PF

Other antineoplastic agents

Platinum compounds

	CARBOPLATIN								
5906W	Solution for I.V. injection 50 mg in 5 mL	2	..	..	*49.26	34.20	[a]	Carboplatin Ebewe	SZ
							[a]	Hospira Pty Limited	HH
							[a]	Pfizer Australia Pty Ltd	PF
5907X	Solution for I.V. injection 150 mg in 15 mL	6	..	..	*356.76	34.20	[a]	Carboplatin Ebewe	SZ
							[a]	Hospira Pty Limited	HH
							[a]	Pfizer Australia Pty Ltd	PF
5908Y	Solution for I.V. injection 450 mg in 45 mL	2	..	..	*224.06	34.20	[a]	Carboplatin Ebewe	SZ
							[a]	Hospira Pty Limited	HH
							[a]	Pfizer Australia Pty Ltd	PF
	CISPLATIN								
5909B	I.V. injection 10 mg in 10 mL	1	..	..	3.99	5.50		Pfizer Australia Pty Ltd	PF
5910C	I.V. injection 50 mg in 50 mL	1	..	..	10.71	11.80	[a]	Hospira Pty Limited	HH
							[a]	Pfizer Australia Pty Ltd	PF
5911D	I.V. injection 100 mg in 100 mL	1	..	..	26.98	28.07	[a]	Cisplatin Ebewe	SZ
							[a]	Hospira Pty Limited	HH
							[a]	Pfizer Australia Pty Ltd	PF

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	
	OXALIPLATIN **Authority required** Metastatic colorectal cancer in a patient with a WHO performance status of 2 or less, to be used in combination with: (a) capecitabine; or (b) 5-fluorouracil and folinic acid; Adjuvant treatment of stage III (Dukes C) colon cancer, in combination with 5-fluorouracil and folinic acid, following complete resection of the primary tumour. **Note** Oxaliplatin is not PBS-subsidised for the treatment of patients with stage II (Dukes B) colon cancer. Oxaliplatin is not PBS-subsidised for the adjuvant treatment of patients with rectal cancer. **Note** Pharmaceutical benefits that have the form oxaliplatin powder for I.V. infusion 50 mg (after reconstitution) and pharmaceutical benefits that have the form oxaliplatin solution concentrate for I.V. infusion 50 mg are equivalent for the purposes of substitution.								
5877H	Solution concentrate for I.V. infusion 50 mg in 10 mL	1	2	..	84.93	34.20	[a]	DBL Oxaliplatin Concentrate	HH
							[a]	Eloxatin	SW
							[a]	Oxaliplatin Kabi	PK
							[a]	Oxaliplatin SUN	ZF
5994L	Powder for I.V. infusion 50 mg	1	2	..	84.93	34.20	[a]	Hospira Pty Limited	HH
							[a]	Oxalatin	ZP
							[a]	Oxaliplatin Actavis	TA
							[a]	Oxaliplatin Alphapharm	AF
							[a]	Oxaliplatin Ebewe	SZ
							[a]	Oxaliplatin Link	PK
							[a]	Xalox	WQ
	OXALIPLATIN **Authority required** Metastatic colorectal cancer in a patient with a WHO performance status of 2 or less, to be used in combination with: (a) capecitabine; or (b) 5-fluorouracil and folinic acid; Adjuvant treatment of stage III (Dukes C) colon cancer, in combination with 5-fluorouracil and folinic acid, following complete resection of the primary tumour. **Note** Oxaliplatin is not PBS-subsidised for the treatment of patients with stage II (Dukes B) colon cancer. Oxaliplatin is not PBS-subsidised for the adjuvant treatment of patients with rectal cancer. **Note** Pharmaceutical benefits that have the form oxaliplatin powder for I.V. infusion 100 mg (after reconstitution) and pharmaceutical benefits that have the form oxaliplatin solution concentrate for I.V. infusion 100 mg are equivalent for the purposes of substitution.								
5878J	Solution concentrate for I.V. infusion 100 mg in 20 mL	1	2	..	164.05	34.20	[a]	DBL Oxaliplatin Concentrate	HH
							[a]	Eloxatin	SW
							[a]	Oxaliplatin Kabi	PK
							[a]	Oxaliplatin SUN	ZF
5995M	Powder for I.V. infusion 100 mg	1	2	..	164.05	34.20	[a]	Hospira Pty Limited	HH
							[a]	Oxalatin	ZP
							[a]	Oxaliplatin Actavis	TA
							[a]	Oxaliplatin Alphapharm	AF
							[a]	Oxaliplatin Ebewe	SZ
							[a]	Oxaliplatin Link	PK
							[a]	Winthrop Oxaliplatin	WA
							[a]	Xalox	WQ

CHEMOTHERAPY PHARMACEUTICALS ACCESS PROGRAM

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	
	OXALIPLATIN **Authority required** Metastatic colorectal cancer in a patient with a WHO performance status of 2 or less, to be used in combination with: (a) capecitabine; or (b) 5-fluorouracil and folinic acid; Adjuvant treatment of stage III (Dukes C) colon cancer, in combination with 5-fluorouracil and folinic acid, following complete resection of the primary tumour. **Note** Oxaliplatin is not PBS-subsidised for the treatment of patients with stage II (Dukes B) colon cancer. Oxaliplatin is not PBS-subsidised for the adjuvant treatment of patients with rectal cancer.								
5999R	Solution concentrate for I.V. infusion 200 mg in 40 mL	1	2	..	326.99	34.20	[a]	Eloxatin	SW
							[a]	Oxaliplatin SUN	ZF

Monoclonal antibodies

	BEVACIZUMAB **Authority required** Initial PBS-subsidised treatment, in combination with first-line chemotherapy, of a patient with previously untreated metastatic colorectal cancer with a WHO performance status of 0 or 1. The maximum dose that will be approved is 5 mg per kg every 2 weeks or 7.5 mg per kg every 3 weeks. **Note** Not for use as monotherapy. **Authority required** Continuing PBS-subsidised treatment, in combination with first-line chemotherapy, of a patient with metastatic colorectal cancer who has previously been issued with an authority prescription for bevacizumab and who does not have progressive disease and who remains on first-line chemotherapy. The maximum dose that will be approved is 5 mg per kg every 2 weeks or 7.5 mg per kg every 3 weeks. **Note** Not for use as monotherapy. **Note** Special Pricing Arrangements apply.								
5849W	Solution for I.V. infusion 100 mg in 4 mL	1	..	..	472.50	34.20		Avastin	RO
5850X	Solution for I.V. infusion 400 mg in 16 mL	1	..	..	1720.00	34.20		Avastin	RO
	CETUXIMAB **Authority required** Initial PBS-subsidised treatment, as monotherapy or in combination with an irinotecan based therapy, of a patient with a WHO performance status of 2 or less and with K-RAS wild type metastatic colorectal cancer after failure of first-line chemotherapy; Continuing PBS-subsidised treatment, as monotherapy or in combination with an irinotecan based therapy, of a patient with K-RAS wild type metastatic colorectal cancer who has previously been issued with an authority prescription for cetuximab and who does not have progressive disease. **Note** Cetuximab is not PBS-subsidised for use in combination with bevacizumab or oxaliplatin based therapies. **Note** Special Pricing Arrangements apply.								
5599Q	Solution for I.V. infusion 100 mg in 20 mL	1	..	..	341.00	34.20		Erbitux	SG
5600R	Solution for I.V. infusion 500 mg in 100 mL	1	..	..	1705.00	34.20		Erbitux	SG
	CETUXIMAB **Authority required** Initial treatment of stage III, IVa or IVb squamous cell cancer of the larynx, oropharynx or hypopharynx for the week prior to radiotherapy, where cisplatin is contraindicated according to the TGA-approved Product Information; Initial treatment of stage III, IVa or IVb squamous cell cancer of the larynx, oropharynx or hypopharynx, in combination with radiotherapy, where cisplatin is not tolerated. **Note** No applications for repeats will be authorised.								
5836E	Solution for I.V. infusion 100 mg in 20 mL	1	..	..	341.00	34.20		Erbitux	SG

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	
5837F	Solution for I.V. infusion 500 mg in 100 mL	1	..	..	1705.00	34.20	Erbitux	SG

CETUXIMAB

Authority required

Continuing treatment of stage III, IVa or IVb squamous cell cancer of the larynx, oropharynx or hypopharynx, in combination with radiotherapy, where cisplatin is either contraindicated or not tolerated.

Note

A maximum lifetime supply for this indication is limited to a maximum of 8 treatments per site and to 10 treatments per site for patients in whom radiotherapy is interrupted.

5838G	Solution for I.V. infusion 100 mg in 20 mL	1	6	..	341.00	34.20	Erbitux	SG
5839H	Solution for I.V. infusion 500 mg in 100 mL	1	6	..	1705.00	34.20	Erbitux	SG

RITUXIMAB

Authority required

Relapsed or refractory low-grade B-cell non-Hodgkin's lymphoma;

Relapsed or refractory follicular B-cell non-Hodgkin's lymphoma.

5978P	Solution for I.V. infusion 100 mg in 10 mL	2	3	..	905.43	34.20	Mabthera	RO
5979Q	Solution for I.V. infusion 500 mg in 50 mL	1	3	..	2263.57	34.20	Mabthera	RO

RITUXIMAB

Authority required

Treatment of previously untreated, CD20 positive, diffuse large B-cell non-Hodgkin's lymphoma, in combination with chemotherapy;

Treatment of symptomatic patients with previously untreated, CD20 positive, Stage III or IV, follicular, B-cell non-Hodgkin's lymphoma, in combination with chemotherapy.

5896H	Solution for I.V. infusion 100 mg in 10 mL	2	7	..	905.43	34.20	Mabthera	RO
5897J	Solution for I.V. infusion 500 mg in 50 mL	1	7	..	2263.57	34.20	Mabthera	RO

Other antineoplastic agents

ARSENIC TRIOXIDE

Authority required

Induction and consolidation treatment of relapsed acute promyelocytic leukaemia (characterised by the presence of the t(15:17) translocation or PML/RAR-alpha fusion gene transcript) in a patient who is arsenic naive at induction.

5851Y	Injection concentrate 10 mg in 10 mL	60	2	..	*24049.62	34.20	Phenasen	PL

IRINOTECAN HYDROCHLORIDE TRIHYDRATE

Authority required (STREAMLINED)

3184

Metastatic colorectal cancer in patients with a WHO performance status of 2 or less.

Note

In first-line usage, effectiveness and tolerance may be improved when irinotecan is combined with an infusional 5-fluorouracil regimen.

5833B	I.V. injection 500 mg in 25 mL	1	3	..	549.75	34.20	[a]	Hospira Pty Limited	HH
							[a]	Irinotecan Actavis 500	TA
							[a]	Irinotecan Ebewe	SZ
5846Q	I.V. injection 300 mg in 15 mL	1	3	..	321.58	34.20	[a]	Camptosar	PF
							[a]	Irinotecan Ebewe	SZ
5958N	I.V. injection 40 mg in 2 mL	1	3	..	42.92	34.20	[a]	Camptosar	PF
							[a]	Hospira Pty Limited	HH
							[a]	Irinotecan Actavis	TA
							[a]	Irinotecan Alphapharm	AF
							[a]	Irinotecan Ebewe	SZ
							[a]	Irinotecan Kabi	PK

CHEMOTHERAPY PHARMACEUTICALS ACCESS PROGRAM

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	
							[a] Omegapharm Irinotecan	OE
							[a] Tecan	WQ
5959P	I.V. injection 100 mg in 5 mL	2	3	..	*214.58	34.20	[a] Camptosar	PF
							[a] Hospira Pty Limited	HH
							[a] Irinotecan Actavis	TA
							[a] Irinotecan Alphapharm	AF
							[a] Irinotecan Ebewe	SZ
							[a] Irinotecan Kabi	PK
							[a] Omegapharm Irinotecan	OE
							[a] Tecan	WQ

TOPOTECAN HYDROCHLORIDE
Authority required (STREAMLINED)
3186
Advanced metastatic ovarian cancer after failure of prior therapy which includes a platinum compound.

5985B	Powder for I.V. infusion 4 mg (base)	5	1	..	1980.00	34.20	Hycamtin	GK

Immunostimulants

Immunostimulants
Interferons

INTERFERON ALFA-2a
Caution
Treatment with interferon alfa has been associated with depression and suicide in some patients. Patients with a history of suicidal ideation or depressive illness should be warned of the risks. Psychiatric status during therapy should be monitored.

Authority required
Hairy cell leukaemia;

Myeloproliferative disease with excessive thrombocytosis.

5945X	Injection 3,000,000 i.u. in 0.5 mL single dose pre-filled syringe	15	4	..	*447.00	34.20	Roferon-A	RO

INTERFERON ALFA-2a
Caution
Treatment with interferon alfa has been associated with depression and suicide in some patients. Patients with a history of suicidal ideation or depressive illness should be warned of the risks. Psychiatric status during therapy should be monitored.

Authority required
Myeloproliferative disease with excessive thrombocytosis.

5996N	Injection 4,500,000 i.u. in 0.5 mL single dose pre-filled syringe	5	4	..	*223.50	34.20	Roferon-A	RO
5997P	Injection 6,000,000 i.u. in 0.5 mL single dose pre-filled syringe	5	4	..	*297.90	34.20	Roferon-A	RO
5998Q	Injection 9,000,000 i.u. in 0.5 mL single dose pre-filled syringe	5	4	..	*446.90	34.20	Roferon-A	RO

INTERFERON ALFA-2a
Caution
Treatment with interferon alfa has been associated with depression and suicide in some patients. Patients with a history of suicidal ideation or depressive illness should be warned of the risks. Psychiatric status during therapy should be monitored.

Authority required
Low grade non-Hodgkin's lymphoma with clinical features suggestive of a poor prognosis, in combination with anthracycline-based chemotherapy.

5946Y	Injection 3,000,000 i.u. in 0.5 mL single dose pre-filled syringe	15	5	..	*447.00	34.20	Roferon-A	RO

CHEMOTHERAPY PHARMACEUTICALS ACCESS PROGRAM

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	
5947B	Injection 4,500,000 i.u. in 0.5 mL single dose pre-filled syringe	5	5	..	*223.50	34.20	Roferon-A	RO
5948C	Injection 6,000,000 i.u. in 0.5 mL single dose pre-filled syringe	5	5	..	*297.90	34.20	Roferon-A	RO
5949D	Injection 9,000,000 i.u. in 0.5 mL single dose pre-filled syringe	5	5	..	*446.90	34.20	Roferon-A	RO

INTERFERON ALFA-2b

Caution

Treatment with interferon alfa has been associated with depression and suicide in some patients. Patients with a history of suicidal ideation or depressive illness should be warned of the risks. Psychiatric status during therapy should be monitored.

Authority required

Hairy cell leukaemia.

5893E	Solution for injection 18,000,000 i.u. in 1.2 mL multi-dose injection pen	3	4	..	*536.22	34.20	Intron A Redipen	MK

INTERFERON ALFA-2b

Caution

Treatment with interferon alfa has been associated with depression and suicide in some patients. Patients with a history of suicidal ideation or depressive illness should be warned of the risks. Psychiatric status during therapy should be monitored.

Authority required

Maintenance treatment of multiple myeloma once remission has been achieved with chemotherapy;

Low grade non-Hodgkin's lymphoma with clinical features suggestive of a poor prognosis, in combination with anthracycline-based chemotherapy.

5953H	Solution for injection 18,000,000 i.u. in 1.2 mL multi-dose injection pen	3	5	..	*536.22	34.20	Intron A Redipen	MK
5956L	Solution for injection 30,000,000 i.u. in 1.2 mL multi-dose injection pen	3	5	..	*893.70	34.20	Intron A Redipen	MK

Other immunostimulants

BCG IMMUNOTHERAPEUTIC (Bacillus Calmette-Guérin/ Connaught strain)

Restricted benefit

Treatment of carcinoma in situ of the urinary bladder.

5901N	Powder for intravesical administration containing 6.6 to 19.2 x 10^8 CFU	3	1	..	*405.00	34.20	ImmuCyst	SW

BCG-TICE (Bacillus Calmette-Guérin/ Tice strain)

Restricted benefit

Primary and relapsing superficial urothelial carcinoma of the bladder.

5902P	Vial containing powder for intravesical administration approximately 5 x 10^8 CFU	3	1	..	491.83	34.20	OncoTICE	MK

CHEMOTHERAPY PHARMACEUTICALS ACCESS PROGRAM

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	
	Various								
	All other therapeutic products								
	All other therapeutic products								
	Detoxifying agents for antineoplastic treatment								
	CALCIUM FOLINATE								
5863N	Injection equivalent to 1000 mg folinic acid in 100 mL	1	1	..	217.91	34.20		Calcium Folinate Ebewe	SZ
5870Y	Injection equivalent to 300 mg folinic acid in 30 mL	4	1	..	*254.92	34.20	a	Calcium Folinate Ebewe	SZ
							a	Leucovorin Calcium (Hospira Pty Limited)	HH
5886T	Injection equivalent to 100 mg folinic acid in 10 mL	10	1	..	*217.90	34.20	a	Calcium Folinate Ebewe	SZ
				..	217.97	34.20	a	Leucovorin Calcium (Pfizer Australia Pty Ltd)	PF
5890B	Injection equivalent to 50 mg folinic acid in 5 mL	5	5	..	*118.05	34.20	a	Leucovorin Calcium (Hospira Pty Limited)	HH
				..	118.10	34.20	a	Calcium Folinate Ebewe	SZ
				..	*119.17	34.20	a	Leucovorin Calcium (Pfizer Australia Pty Ltd)	PF
	CALCIUM FOLINATE **Restricted benefit** Antidote to folic acid antagonists.								
5904R	Tablet equivalent to 15 mg folinic acid	10	..	..	76.00	34.20		Leucovorin Calcium (Hospira Pty Limited)	HH
	MESNA **Restricted benefit** Adjunctive therapy for use with ifosfamide or high dose cyclophosphamide.								
5960Q	Solution for I.V. injection 400 mg in 4 mL	15	5	..	81.89	34.20		Uromitexan	BX
5961R	Solution for I.V. injection 1 g in 10 mL	15	5	..	185.44	34.20		Uromitexan	BX

GENERIC/PROPRIETARY INDEX

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