

SASKATCHEWAN FORMULARY BULLETIN

Update to the 62nd Edition of the Saskatchewan Formulary

Additional Formulation of an Existing Full Formulary Benefit Effective January 1, 2016:

- **colesevelam hydrochloride, powder for suspension, 3.75g (Lodalis-VAE)**

Additional Formulation with Existing Exception Drug Status Criteria January 1, 2016:

- **ribavirin, tablet, 200mg (Ibavyr-PED)**

For use within a listed combination therapy regimen for the treatment of chronic hepatitis C. Patients must meet the EDS criteria, and be approved for, the listed adjunctive Hepatitis C therapy to be used in combination with ribavirin.

Treatment must be prescribed by a hepatologist, gastroenterologist or an infectious disease specialist or other physician experienced in treating hepatitis C as determined by the Drug Plan.

- **lurasidone hydrochloride, tablet, 20mg, 60mg (Latuda-SNV)**

For manifestations of schizophrenia.

New Exception Drug Status (EDS) Listings Effective January 1, 2016 according to the following criteria:

- **eslicarbazepine acetate, tablet, 200mg, 400mg, 600mg, 800mg (Aptiom-SNV)**

For the adjunctive treatment of refractory partial-onset seizures in patients who meet all of the following:

- a) Are currently receiving two or more antiepileptic drugs; AND
- b) Less costly antiepileptic drugs are ineffective or inappropriate; AND
- c) The medication is being used under the direction of a neurologist.

Note: Patients should have tried and failed at least two less costly antiepileptic drugs.

- **rifampin, 150mg and 300mg, capsules (Rofact-VAE, Rifadin-AVT)**

For treatment of non-TB mycobacterium infection (NTMI), when prescribed in consultation with an infectious disease specialist.

Note: Contact TB Prevention and Control Saskatchewan if these medications are being prescribed for treatment of tuberculosis.

- **ethambutol, 100mg and 400mg, tablets (Etibi - VAE)**

For treatment of non-TB mycobacterium infection (NTMI), when prescribed in consultation with an infectious disease specialist.

Note: Contact TB Prevention and Control Saskatchewan if these medications are being prescribed for treatment of tuberculosis.

- **isoniazid, 100mg and 300mg, tablets, 10 mg/mL syrup (PDP-Isoniazid – PED; PDP-Isoniazid - PED)**

For treatment of non-TB mycobacterium infection (NTMI), when prescribed in consultation with an infectious disease specialist.

Note: Contact TB Prevention and Control Saskatchewan if these medications are being prescribed for treatment of tuberculosis.

New Exception Drug Status Criteria (in addition to existing criteria):

- **moxifloxacin HCl, tablet, 400mg (Avelox-BAY, and listed generics)**

For management of adults with febrile neutropenia.

- **rifabutin, 150mg, capsule (Mycobutin – PFI)**

For treatment of non-TB mycobacterium infection (NTMI), when prescribed in consultation with an infectious disease specialist.

Note: Contact TB Prevention and Control Saskatchewan if these medications are being prescribed for treatment of tuberculosis.

Recommended Revised Exception Drug Status Criteria:

- **desmopressin, intranasal solution, 10ug/dose (DDAVP-FEI, and listed generics)** – removed medical criteria related to nocturia due to new clinical information. Coverage to be continued with the following criteria:

For treatment of diabetes insipidus.

- **lacosamide, tablet, 50mg, 100mg, 150mg, 200mg (Vimpat-UCB)**

For the adjunctive treatment of refractory partial-onset seizures in patients who meet all of the following:

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- c) The medication is being used under the direction of a neurologist.

Note: Patients should have tried and failed at least two less costly antiepileptic drugs.

Drugs Reviewed and Not Approved for Listing in the Saskatchewan Formulary:

- **linaclotide, 290µg, oral capsule (Constella-ACV)**

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