



Drug Utilisation Sub-Committee Outcome Statement 6 February 2020

The Drug Utilisation Sub-Committee (DUSC) of the Pharmaceutical Benefits Advisory Committee (PBAC) held its 98th meeting on the 6th of February 2020.

DUSC has a national focus of excellence in collecting, analysing and interpreting data on the utilisation of medicines in Australia for use by the PBAC. Review of the utilisation of medicines is an essential management tool in facilitating the objectives of the National Medicines Policy.

The PBAC is also committed to understanding consumer perspectives and integrating them into consideration of medicines and vaccines. Consumers are able to provide their views about medicine utilisation reviews to the PBAC via a [web interface](#).

Submissions to the PBAC

DUSC noted that 19 major submissions had been received for the March 2020 meeting of PBAC. DUSC provided detailed advice to the PBAC on projected usage and financial cost for the major submissions where there was high cost, uncertain utilisation, first medicine in class or quality use of medicines concerns. The agenda for the March 2020 PBAC meeting can be found on the [PBS website](#).

Utilisation of PBS Listed Medicines

DUSC regularly examines utilisation of Pharmaceutical Benefits Scheme (PBS) items when there is at least 24 months of prescription data available and where DUSC or the PBAC has highlighted items of interest. When an analysis of utilisation is to be undertaken sponsors are notified, provided with a copy of the report and an opportunity to comment prior to the DUSC meeting. Reviews to be considered by the PBAC are also published in the [PBAC meeting agenda](#). All reports, Sponsor comments and DUSC assessment of the reports are subsequently provided to the PBAC.

DUSC reviewed the utilisation of the following PBS medicines in February 2020:

Alemtuzumab for relapsing remitting multiple sclerosis (RRMS)

The PBS-listing of alemtuzumab in April 2015 had minimal effect on the overall RRMS market. In 2018, 18,715 patients were supplied a PBS-listed medicine for RRMS and, of these, 459 (2.5%) patients were supplied alemtuzumab. Alemtuzumab was used considerably less than the other RRMS biologics, natalizumab and ocrelizumab. The actual number of patients, prescriptions and the corresponding expenditure for alemtuzumab was higher than predicted in Year 1 of listing but declined in the three subsequent years. DUSC considered the safety concerns with alemtuzumab and PBS listing of new medicines for RRMS may have contributed to the declining use of alemtuzumab.

DUSC requested that the report be provided to the PBAC.

Nintedanib and pirfenidone for idiopathic pulmonary fibrosis (IPF)

DUSC reviewed the use of nintedanib and pirfenidone for the treatment of IPF. Since PBS listing, 2,975 patients have initiated treatment with nintedanib or pirfenidone. The proportion

of use of the two medicines was similar until the end of 2018, however between July and September 2019 56% of prescriptions dispensed were for nintedanib. Across all age groups, males accounted for approximately 70% of initiating patients. The five year age group with the highest proportion of initiating patients was 75-79 years old.

DUSC requested that the report be provided to the PBAC.

Opioids

DUSC considered the utilisation of PBS-listed opioid analgesics, including the combined use of pregabalin and opioid analgesics. Pregabalin had become the most supplied analgesic in the opioid and pregabalin analgesic market. Pregabalin and tapentadol were the only two drugs in this market that were not decreasing in utilisation in the most recent data (i.e. up to the end of 2019 Q3). Tapentadol utilisation was increasing and pregabalin had plateaued. Since the up-scheduling of low dose codeine combination products from 1 February 2018, there was some increase in the utilisation of PBS listed 30mg codeine combination products. Only a small proportion of opioid scripts were from the palliative care schedule. The analysis found that currently around 80% of patients on an opioid or pregabalin were treated with one product and so 20% were coadministering opioids or opioids and pregabalin.

DUSC requested that the report be provided to the PBAC.

Testosterone

Use of testosterone had remained steady since the April 2015 restriction change for the androgen deficiency listing. The restriction changes that have occurred since then have not affected the overall trend in testosterone use. In 2018, 33,615 patients were supplied testosterone; of whom 4,276 received their first testosterone supply in that year. PBS expenditure for testosterone was \$13,079,019 for the supply of 156,259 prescriptions. The number of new patients stabilised at around 5,000 per year from 2016 onwards.

DUSC requested that the report be provided to the PBAC.

Upcoming Utilisation Analysis of PBS Listed Medicines

Utilisation of the following medicine has been selected for consideration at future DUSC meetings.

Predicted versus Actual Utilisation Analysis

- Nivolumab for the treatment of Stage IV clear cell variant renal cell carcinoma (RCC).
- Nivolumab for the treatment of non-squamous cell non small cell lung cancer (NSCLC) and squamous cell NSCLC.
- Omalizumab for the treatment of severe chronic spontaneous urticaria.

An outcome statement will be available following each meeting of DUSC. For further information, please contact the DUSC Secretariat at DUSC@health.gov.au.

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Chair
Drug Utilisation Sub-Committee