PBAC CONSIDERATION OF THE REPORT OF THE DRUG UTILISATION SUB-COMMITTEE

The PBAC noted utilisation reports with associated stakeholder responses from the February 2022 Drug Utilisation Sub-Committee (DUSC) meeting, which were provided in Items 10.04, 10.05, and 10.06 of the PBAC Agenda. DUSC minutes relating to these items were provided to the PBAC. The outcomes of the DUSC consideration of these items are available in the February 2022 DUSC outcome statement.

Avelumab for Merkel Cell Carcinoma

Outcome

PBAC noted the predicted versus actual utilisation of avelumab for Merkel Cell Carcinoma (MCC), a rare form of skin cancer.

PBAC noted that the number of prescriptions for avelumab in the first year of listing was lower than anticipated and considered avelumab's part-listing in May was a contributing factor. PBAC further noted that some patients initiating in year 1 should be reflected in years 2 and 3 under the assumptions for continuation but this did not appear to be occurring and may require more mature data to examine time on continuing therapy. PBAC also considered that clinicians likely reduced doses to minimise interactions with the health system during the COVID-19 pandemic which may be reflected in the lower than expected number of prescriptions dispensed in years two and three.

Utilisation of PBS listings for locally advanced and metastatic breast cancer

Outcome

PBAC noted that the expenditure on protein kinase modulators had significantly increased since ribociclib and palbociclib were listed on the PBS. Expenditure on hormone modulating medicines (anastrozole, letrozole, exemestane, tamoxifen and fulvestrant) had remained stable since 2017 which PBAC noted was mainly from the application of price reductions for these PBS listings. PBAC considered that the listing of fulvestrant in 2020 may increase expenditure in this group in the future. PBAC further noted that the expenditure on chemotherapy and targeted therapy listings had also declined since 2017 largely from price reductions applied to trastuzumab.

PBAC requested the department to examine if the clinical and population criteria for the continuing restrictions for palbociclib and ribociclib could be revised to reduce the administrative burden associated with the prescribing of these medicines.

Listings for relapsing-remitting multiple sclerosis

Outcome

PBAC noted that, over time, the total number of patients supplied medicines to treat relapsing-remitting multiple sclerosis (RRMS) were increasing, whilst the number of prescriptions supplied remained stable.

PBAC noted that oral therapies had become the most preferred therapy and that there was a shift away from the older generation RRMS medicines. PBAC considered that there would likely to be continued market share changes in the future and noted the recent PBS listings of siponimod (November 2020) and ozanimod (October 2021).

PBAC noted the submission for cladribine assumed cladribine would displace fingolimod. PBAC commented that a proportion of patients switching to cladribine were previously treated with fingolimod, however, not all patients switching to cladribine treatment were previously treated with fingolimod. Clinical input was provided which commented that the oral administration and dosing regimen of cladribine was particularly beneficial for younger, newly diagnosed patients.