5.19 CALCIPOTRIOL WITH BETAMETHASONE
Gel containing calcipotriol 50 micrograms with betamethasone 500 micrograms per g, 60g, Actobet® 50/500, Actor Pharmaceuticals Pty Ltd

1 Purpose of Submission

1.1 The Category 4 submission requested to list a new form of calcipotriol (as monohydrate) and betamethasone (as dipropionate), Actobet® 50/500 Gel, under the same circumstances as the PBS-listed calcipotriol 0.005% + betamethasone (as dipropionate) 0.05% ointment (cal/bet ointment).

1.2 Listing was requested on the basis of a cost-minimisation approach versus cal/bet ointment and previous PBAC advice that the previously PBS listed Daivobet gel and cal/bet ointment were non-inferior.

2 Background

2.1 Calcipotriol and betamethasone gel was previously listed on the PBS as an Authority Required listing for plaque psoriasis of the scalp and body.

Registration status

2.2 Actobet 50/500 calcipotriol (as monohydrate) 50 microgram/g and betamethasone (as dipropionate) 500 microgram/g gel was registered in the Australian Register of Therapeutic Goods by the Therapeutic Goods Administration (TGA) on 1 July 2025 for:

- topical treatment of scalp psoriasis AND;
- topical treatment of mild to moderate plaque psoriasis on the body in adults

2.3 The TGA deemed the generic brand, Actobet, to be bioequivalent to the originator brand of calcipotriol + betamethasone, Daivobet (Actobet TGA Approval Letter 17 April 2025).

Previous PBAC consideration

2.4 Calcipotriol and betamethasone gel was previously considered for plaque psoriasis by the PBAC at its November 2013 and November 2015 meetings. In November 2015 the PBAC recommended calcipotriol and betamethasone for the treatment of plaque psoriasis on the scalp and body under an Authority Required restriction. These submissions were made by the company LEO Pharma A/S who produced the brand Daivobet.

2.5 In July 2009, the PBAC recommended the listing of the cal/bet ointment form under the same circumstances as the cal/bet gel form based on a cost minimisation approach.

2.6 The originator gel product, Daivobet, was delisted by LEO Pharma from the PBS in November 2021 but remains registered on the Australian Register of Therapeutic Goods (ARTG 161936).

3 Requested listing

3.1 The submission requested the following new listing:

Add new medicinal product as follows:

MEDICINAL PRODUCT **medicinal product pack**		**PBS item code**	**Max. qty packs**	**Max. qty units**	**№.of Rpts**	**Available brands**
CALCIPOTRIOL + BETAMETHASONE DIPROPIONATE						
calcipotriol 0.005% + betamethasone (as dipropionate) 0.05% ointment, 30 g		9494Q	1	1	1	Daivobet 50/500 Ointment
calcipotriol 0.005% + betamethasone (as dipropionate) 0.05% gel, 60g		NEW	1	1	1	Actobet 50/500 Gel
Restriction Summary [16502] / Treatment of Concept: [6809]						
Concept ID (for internal Dept. use)	**Category / Program:** ☒ GENERAL - General Schedule (Code GE)					
	Prescriber type: ☒Medical Practitioners ☒Nurse Practitioners					
	Restriction type: ☒Restricted benefit					
	Indication: Chronic stable plaque type psoriasis vulgaris					
	Clinical criteria:					
	The condition must be inadequately controlled by potent topical corticosteroid monotherapy.					

60 Day Dispensing

Add new medicinal product as follows:

MEDICINAL PRODUCT medicinal product pack		PBS item code	Max. qty packs	Max. qty units	№.of Rpts	Available brands
CALCIPOTRIOL + BETAMETHASONE DIPROPIONATE						
calcipotriol 0.005% + betamethasone (as dipropionate) 0.05% ointment, 30 g		13577N	2	2	1	Daivobet 50/500 Ointment
calcipotriol 0.005% + betamethasone (as dipropionate) 0.05% gel, 60g		NEW	2	2	1	Actobet 50/500 Gel
Restriction Summary [16503] / Treatment of Concept: [14236]						
	Category / Program: ☒ GENERAL - General Schedule (Code GE)					
	Prescriber type: ☒Medical Practitioners ☒Nurse Practitioners					
	Restriction type: ☒Restricted benefit					
	Indication: Chronic stable plaque type psoriasis vulgaris					
	Clinical criteria:					
	The condition must be stable for the prescriber to consider the listed maximum quantity of this medicine suitable for this patient					
	AND					
	Clinical criteria:					
	The condition must be inadequately controlled by potent topical corticosteroid monotherapy.					

These restrictions may be subject to further review. Should there be any changes made to the restriction the sponsor will be informed.

3.2 Noting the gel form comes in a 60 g presentation and the existing ointment forms are 30 g presentations.

4 Comparator

4.1 The submission nominated calcipotriol + betamethasone 50 mg / 500 µg gel (Daivobet) as the main comparator and the currently PBS listed calcipotriol + betamethasone ointment as an alternate comparator. The Daivobet gel form is not currently PBS listed.

5 Consideration of the evidence

Sponsor hearing

5.1 There was no hearing for this item.

Consumer comments

5.2 The PBAC welcomed and noted input from The Australasian College of Dermatologists. The comments described how a gel formulation of cal/beta would be superior for use

on the scalp and trauma-prone aspects of the body because it was easier to apply, compared to ointment and cream formulations.

Clinical trials

5.3 The submission was based on a trial of calcipotriol and betamethasone that compared the originator brand (Daivobet) to the submitted generic (Actobet).

Table 1: Trial presented in the submission

Trial ID	Protocol title/ Publication title	Publication citation
Trial: 0155/2018	A phase III, multicentre, randomised, double-blind, parallel group trial to evaluate the efficacy and safety of a generic gel (calcipotriol + betamethasone 50 µg/g + 0.5 mg/g gel) compared to originator gel (Daivobet® gel) and vehicle in the treatment of mild to moderate plaque-type psoriasis A. Tsianakas Author(s). Title.	23 March 2020 Not published

Source: {Section 2: Clinical Evaluation (page 17 of the main submission)}.

5.4 As a Category 4 submission, no evaluation of the clinical evidence was undertaken.

Comparative effectiveness

5.5 The submission claimed the trial showed that Actobet and Daivobet had comparable Psoriasis Area and Severity Index (PASI) % reductions.

Comparative harms

5.6 The submission claimed that adverse events were mild and resolved without intervention. The safety profile of Actobet was found to be similar to Daivobet.

Clinical claim

5.7 The submission claimed non-inferior comparative effectiveness and non-inferior comparative safety of Actobet compared with Daivobet.

5.8 The PBAC considered that the claim of non-inferior effectiveness was reasonable.

5.9 The PBAC considered that the claim of non-inferior comparative safety was reasonable.

Economic analysis

5.10 As a Category 4 submission, the economic analysis has not been independently evaluated.

5.11 The submission presented a cost-minimisation approach of Actobet Gel compared with cal/bet ointment. The equi-effective doses were estimated as Actobet Gel 1g for Daivobet Gel 1g based on a determination of bioequivalence. The CMA was then based on a PBAC recommendation in July 2009 for cal/bet ointment on cost-minimisation approach against Daivobet Gel.

5.12 Table 2 shows the proposed CMA approach, noting the difference in pack sizes between the gel form and existing ointment form. The proposed cost per gram is equivalent between the forms.

Table 2: Proposed CMA approach

Treatment	AEMP	Pack size	AEMP	Cost per gram
CAL/BDP ointment	Calcipotriol + betamethasone dipropionate, ointment, 30 g	30 g	$[redacted]	$[redacted]
Actobet® 50/500 Gel	Calcipotriol + betamethasone dipropionate, Gel, 60 g	60 g	$[redacted]	$[redacted]

AEMP, approved ex-manufacturer price; DPMQ, dispensed price for maximum quantity
Source: Submission main body

Estimated PBS usage and financial implications

5.13 The requested price was based on the AEMP of Daivobet 60g Gel listed in the PBS in November 2015.

5.14 Refer to Table 2 which presents the estimated extent of use, cost of Actobet to the PBS/RPBS and the net financial implications to the PBS/RPBS and MBS. The financial impact to Services Australia will be determined by that agency as part of the post PBAC process.

5.15 The submission estimated that 100,000 to < 200,000Actobet scripts would be supplied over the first six years of listing (10,000 to < 20,000in Year 1 to 30,000 to < 40,000in Year 6).

5.16 The submission stated that the estimated net financial impact to the PBS/RPBS for the listing of Actobet is a cost-saving of $0 to < $10 million over six years. This anticipated saving is resultant from the assumption the new gel form will replace some utilisation for the more expensive foam formulation, while any replacement of the ointment would be cost neutral.

Table 3: Estimated use and financial implications

	Year 1	Year 2	Year 3	Year 4	Year 5	Year 6
Estimated extent of use						
Number of scripts dispensed[a]	[redacted][1]	[redacted][2]	[redacted][2]	[redacted][3]	[redacted][3]	[redacted][3]
Estimated financial implications of calcipotriol + betamethasone (Actobet)						
Cost to PBS/RPBS less co-payment ($)	[redacted][4]	[redacted][4]	[redacted][4]	[redacted][4]	[redacted][4]	[redacted][4]
Net financial implications						
Net cost to PBS/RPBS ($)	-[redacted][4]	-[redacted][4]	-[redacted][4]	-[redacted][4]	-[redacted][4]	-[redacted][4]

[a] Assuming the market share approach and uptake as estimated by the submission.
Abbreviations: MBS = Medical Benefits Scheme; PBS = Pharmaceutical Benefits Scheme; RPBS = Repatriation Pharmaceutical Benefits Scheme.
Source: 4.2.3 Financial impact over six years [page 32 of the submission]
The redacted values correspond to the following ranges:
[1]10,000 to < 20,000
[2]20,000 to < 30,000
[3]30,000 to < 40,000
[4]$0 to < $10 million

5.17 Based on the evaluation of the submission documentation, the sponsor provided a pre-committee response which included a revised model addressing comments about market growth rate, treatment uptake and 60-day dispensing, outlined in Table 4 and Table 5.

Table 4: Data sources and parameter values applied in the utilisation and financial estimates

Parameter	Value	Source	Comment
Market:			
Existing Market	288548 scripts processed in 2024	Medicare statistics report for the items:2494Q, 11091R, 13520N and 13577N from Jan to Dec 2024	
% Growth Rate	9% fixed annual growth rate across Year 1-6.	PBS dispensing data between 2020 and 2024.	A fixed annual growth rate of 9% was calculated by averaging the 5-year growth adjusted for scripts (6%) and grams of CAL/BDP (11%). This is inappropriate as it is not based on a forecast of the script volumes. The projected growth rate between years should be calculated using the change in the forecasted scripts year on year.
% Treatment Uptake Rate	Variable based on different pharmaceutical items **Ointments** 9494Q: 6% in Year 1 increasing to 12% in Year 6 13577N: 20% in Year 1 increasing to 45% in Year 6 **Foam** 11091R: 4.5% in Year 1 increasing to 6% in Year 6 13520N: 1% in Year 1 increasing to 2.5% in Year 6	Scripts forecast based on PBS dispensing data between 2020 and 2024.	The uptake rates were calculated using the proportion change between the total estimated script volumes affected by the listing and the estimated script volume. This results in a circular methodology where the proportion affected by the proposed medicine relies on using the net affected script volumes, which in turn is dependent on the % of the proportion affected by the proposed medicine. Additionally, the uptake rates in the submission (Main body, Table 4-4) do not align with what is presented in the model.
Market split for 60-days dispensing	[redacted]%	Sponsor's assumption	The proposed drug is split into the existing market with a 50% substitution rate to account for the single quantity and 60-days dispensing listings. Since the current market is established, switching between the two max quantities is unreasonable without providing further justification. The model should be updated to relate the corresponding max quantities together at 100% substitution rate.
Script Equivalence	The proposed script equivalence ratio as followed: 2:1 between ointment and gel 1:1 between foam and gel	Existing and proposed PBS- maximum quantities	Appropriate

Table 5: Updated estimated utilisation and financial impact of listing

			Year 1	Year 2	Year 3	Year 4	Year 5	Year 6
Number of scripts								
A	Calcipotriol + betamethasone dipropionate, gel 60mg – Proposed		[redacted][1]	[redacted][1]	[redacted][2]	[redacted][3]	[redacted][3]	[redacted][3]
B	Calcipotriol + betamethasone dipropionate, ointment and foam- Affected		-[redacted][1]	-[redacted][2]	-[redacted][3]	-[redacted][4]	-[redacted][5]	-[redacted][5]
Estimated Impact – Co-Payment								
C	{Medicine A - Proposed} ($)	**A * {$} – Co-pay**	[redacted][6]	[redacted][6]	[redacted][6]	[redacted][6]	[redacted][6]	[redacted][6]
D	{Medicine B - Affected} ($)	**B * {$} – Co-pay**	-[redacted][6]	-[redacted][6]	-[redacted][6]	-[redacted][6]	-[redacted][6]	-[redacted][6]
E	Net Cost to the PBS/RPBS ($)	**C – D**	-[redacted][6]	-[redacted][6]	-[redacted][6]	-[redacted][6]	-[redacted][6]	-[redacted][6]

The redacted values correspond to the following ranges:
[1]10,000 to < 20,000
[2]20,000 to < 30,000
[3]30,000 to < 40,000
[4]40,000 to < 50,000
[5]50,000 to < 60,000
[6]$0 to < $10 million

6 PBAC Outcome

6.1 The PBAC recommended the listing of calcipotriol + betamethasone (Actobet) for the treatment of chronic stable plaque type psoriasis vulgaris under a General Schedule listing on a cost-minimisation basis to cal/bet ointment.

6.2 The PBAC deemed the equi-effective doses to be 1 mg Actobet = 1 mg cal/bet ointment.

6.3 The PBAC noted that the TGA deemed the generic brand, Actobet, to be bioequivalent to the originator brand of calcipotriol + betamethasone, Daivobet.

6.4 The PBAC advised there was a clinical need for a new form of calcipotriol + betamethasone.

6.5 The PBAC considered that the claims of non-inferior effectiveness and comparable safety were reasonable.

6.6 The PBAC advised that the proposed maximum quantities and repeats are appropriate.

6.7 The PBAC considered the cal/bet ointment to be a reasonable comparator.

6.8 The PBAC agreed that the estimated financial impact was reasonable. The PBAC noted that a small net save to the PBS/RPBS was expected.

6.9 The PBAC noted that its recommendation was on a cost-minimisation basis and advised that, because calcipotriol + betamethasone (Actobet) is not expected to provide a substantial and clinically relevant improvement in efficacy, or reduction of toxicity, over cal/beta ointment, or not expected to address a high or urgent unmet clinical need given the presence of an alternative therapy, the criteria prescribed by the *National Health (Pharmaceuticals and Vaccines – Cost Recovery) Regulations 2022* for Pricing Pathway A were not met.

6.10 The PBAC noted that this submission is not eligible for an Independent Review because it received a positive recommendation.

Outcome:
Recommended

7 Recommended Listing

Add new medicinal product as follows:

MEDICINAL PRODUCT medicinal product pack	**PBS item code**	**Max. qty packs**	**Max. qty units**	**№.of Rpts**	**Available brands**
CALCIPOTRIOL + BETAMETHASONE DIPROPIONATE					
calcipotriol 0.005% + betamethasone (as dipropionate) 0.05% ointment, 30 g	9494Q	1	1	1	Daivobet 50/500 Ointment
calcipotriol 0.005% + betamethasone (as dipropionate) 0.05% gel, 60g	*NEW*	*1*	*1*	*1*	*Actobet 50/500 Gel*
Restriction Summary [16502] / Treatment of Concept: [6809]					
	Category / Program: ☒ GENERAL - General Schedule (Code GE)				
	Prescriber type: ☒Medical Practitioners ☒Nurse Practitioners				
	Restriction type: ☒Restricted benefit				
	Indication: Chronic stable plaque type psoriasis vulgaris				
	Clinical criteria:				
	The condition must be inadequately controlled by potent topical corticosteroid monotherapy.				

60 Day Dispensing

Add new medicinal product as follows:

MEDICINAL PRODUCT medicinal product pack	PBS item code	Max. qty packs	Max. qty units	№.of Rpts	Available brands
CALCIPOTRIOL + BETAMETHASONE DIPROPIONATE					
calcipotriol 0.005% + betamethasone (as dipropionate) 0.05% ointment, 30 g	13577N	2	2	1	Daivobet 50/500 Ointment
calcipotriol 0.005% + betamethasone (as dipropionate) 0.05% gel, 60g	*NEW*	*2*	*2*	*1*	*Actobet 50/500 Gel*
Restriction Summary [16503] / Treatment of Concept: [14236]					
	Category / Program: ☒ GENERAL - General Schedule (Code GE)				
	Prescriber type: ☒Medical Practitioners ☒Nurse Practitioners				
	Restriction type: ☒Restricted benefit				
	Indication: Chronic stable plaque type psoriasis vulgaris				
	Clinical criteria:				
	The condition must be stable for the prescriber to consider the listed maximum quantity of this medicine suitable for this patient				
	AND				
	Clinical criteria:				
	The condition must be inadequately controlled by potent topical corticosteroid monotherapy.				

These restrictions may be subject to further review. Should there be any changes made to the restriction the sponsor will be informed.

9 Context for Decision

The PBAC helps decide whether and, if so, how medicines should be subsidised through the Pharmaceutical Benefits Scheme (PBS) in Australia. It considers applications regarding the listing of medicines on the PBS and provides advice about other matters relating to the operation of the PBS in this context. A PBAC decision in relation to PBS listings does not necessarily represent a final PBAC view about the merits of the medicine or the circumstances in which it should be made available through the PBS. The PBAC welcomes applications containing new information at any time.

10 Sponsor's Comment

The sponsor had no comment.