

# PHARMACEUTICAL BENEFITS

## PRICING AUTHORITY

### ANNUAL REPORT

For the year ended 30 June 2007





**PHARMACEUTICAL**

**BENEFITS**

**PRICING**

**AUTHORITY**

**Annual Report**

**For the year ended 30 June 2007**

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Minister The Hon Nicola Roxon MP  
Minister for Health and Ageing  
Parliament House  
CANBERRA ACT 2600

Dear Ms Roxon

I present herewith the twentieth annual report of the Pharmaceutical Benefits Pricing Authority on the operations of the PBPA, and on the PBPA's interpretation of its operating guidelines for the year ended 30 June 2007.

This report is made in accordance with the requirement of sub-section 34C(2) of the Acts Interpretation Act 1901, that in the absence of specific requirements to the contrary, an annual report should be furnished to you as soon as practicable after the end of the report period.

Yours sincerely



Michael Nahan

Chair

2007

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## PREFACE

This is the twentieth annual report of the Pharmaceutical Benefits Pricing Authority covering the operations of the PBPA for the year ended 30 June 2007.

### Tabling requirements

It is a requirement of sub section 34C(3) of the *Acts Interpretation Act 1901*, that in the absence of specific requirements to the contrary, the annual report shall be laid before each House of the Parliament within 15 sitting days of that House after the day on which the Minister receives the report.

### Structure of report

The report is divided into three chapters:

- chapter 1 provides basic information about the PBPA's genesis, membership and financial arrangements;
- chapter 2 addresses the factors considered by the PBPA for pricing of pharmaceutical benefits made available under the Government's Pharmaceutical Benefits Scheme administered by the Department of Health and Ageing;
- chapter 3 contains related tables and figures.

## CHAPTER 1

### Pharmaceutical Benefits Pricing Authority

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The Pharmaceutical Benefits Pricing Authority (PBPA) is an independent non-statutory body established in 1988 which is required to:

- review the prices of products supplied under the Pharmaceutical Benefits Scheme (PBS) and, since 2006, the vaccines on the National Immunisation Program (NIP); and
- recommend prices for new items that are recommended for listing on the PBS and, since 2006, the NIP.

### Membership

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The PBPA's membership for the 2006–2007 financial year was:

Chair	Ms Joan Corbett (acting) – with effect from 1 July 2006. Dr Michael Nahan – appointed with effect from December 2006.
Industry nominees	Mr Duncan O'Brien – appointed with effect from January 2007, as the nominee of Medicines Australia. Mr Mike Hobbs – appointed with effect from March 2007, as the nominee of the Generic Medicines Industry Association.
Consumer nominee	Ms Jo Watson – appointed with effect from February 2002, as the nominee of the Consumers' Health Forum, Australian Consumer's Association and Australian Federation of Aids Organisations.
Department of Health and Ageing Representative	Ms Joan Corbett – appointed with effect from 4 March 2003, resigned December 2006. Mr Stephen Dellar – appointed with effect from December 2006.
Department of Industry, Tourism and Resources	Mr Michael Schwager – appointed with effect from December 2005.

## Secretariat Support

The PBPA is serviced by a Secretariat staffed within the Pharmaceutical Evaluation Branch of the Department of Health and Ageing.

The PBPA supports best management practice in communicating with Responsible Persons and other interested parties to make the PBPA's decisions and decision making processes as transparent as possible, subject to the confidences in which certain commercially sensitive information must be held.

Consultation with respective Secretariat staff on the interpretation of the PBPA's guidelines, practices and procedures is encouraged to ensure that all interested parties gain a clear understanding of those matters and have the maximum opportunity to make their views known to the PBPA.

## Co-ordination to achieve timely outcomes

Pricing Authority meetings are coordinated with meetings of the Pharmaceutical Benefits Advisory Committee (PBAC), so that PBAC outcomes can be dealt with as soon as possible consistent with the need to collect pricing information.

## Financial arrangements

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The Department of Health and Ageing budget, in addition to financing the PBS, provides funds for:

- the fees and expenses incurred by the Chairman, industry and consumer nominees, in accordance with determinations made from time to time by the Remuneration Tribunal;
- the day to day operations of dealing with pricing matters under the Scheme; and
- the costs of associated meetings, seminars and other related expenses.

For the year ended 30 June 2007 the PBPA operating costs were:

<i>PBPA operating costs 2006–2007</i>	<i>Total costs \$</i>
Direct costs including Chairman's, industry and consumer nominees' expenses	7,902
Salaries	554,292
Members & secretariat travel and allowances	9,875
Administrative costs	4,707
Total costs	576,776

## CHAPTER 2

### Pharmaceutical Benefits Scheme

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The PBPA's objective in reviewing prices of items listed under the PBS is to secure a reliable supply of pharmaceutical products at the most reasonable cost to Australian taxpayers and consumers and consistent with maintaining a sustainable pharmaceutical industry in Australia.

Under its terms of reference the PBPA is required to determine or recommend to the Minister for Health and Ageing prices of items listed as pharmaceutical benefits or recommended by the PBAC for listing. The Secretariat also conducts negotiations with Responsible Persons, where necessary, on proposed prices.

### Factors considered by the PBPA

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In reviewing the price of listed items and in considering the price of items recommended for listing, the PBPA takes account of the following factors:

- (a) PBAC comments on clinical and cost effectiveness aspects of items;
- (b) the prices of alternative brands of a drug;
- (c) comparative prices of items containing drugs in the same Anatomical Therapeutic Chemical (ATC) Group;
- (d) costs information, when provided by the Responsible Person or estimated by the PBPA;
- (e) prescription volumes, economies of scale and other factors such as expiry dates, storage requirements, product stability and special manufacturing requirements;
- (f) level of activity being undertaken by the company in Australia, including new investment, production, research and development;\*
- (g) prices of items containing the drug in reasonably comparable overseas countries;
- (h) other relevant factors which the applicant company may wish the PBPA to consider; and
- (i) any directions of the Minister.

Price adjustments for items require the approval of the Minister for Health and Ageing.

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\* Factor (f) is presently not taken into consideration in determining prices. The Pricing Authority is presently seeking advice on this matter.

## Establishing prices for new listings

For new or extended listings recommended by the PBAC, the PBPA may advise the prices to be negotiated by the Department of Health and Ageing.

The PBAC recommendation is a major consideration in determining initial prices.

Increasingly, the PBPA considers the use of risk sharing arrangements to contain overall costs of drugs on the PBS and to manage the financial risks to the Government resulting from uncertainty about drugs utilisation.

One type of arrangement is a price-volume agreement, where the Responsible Person of a particular drug agrees to a price reduction for any sales that exceed a pre-agreed sales volume.

*Example: A Responsible Person agrees to reduce the price of the drug by 15% if the sales volume exceeds \$20 million in any year.*

There are a number of other types of risk sharing arrangements negotiated with pharmaceutical companies. Some examples include:

1. Estimating the potential use outside the PBS restrictions and rebating a proportion of this use.

*Example: The Responsible Person accepts that up to 25% of a particular drug's sales may be supplied for conditions which are not subsidised on the PBS. To compensate the usage outside of the PBS restrictions the Responsible Person agrees to rebate 20% of that drug's total sales to the government.*

2. Agreeing to annual caps (based on cost or script volumes) for a drug and rebating any excess over the caps.
3. Agreeing to common annual sales caps for all drugs used to treat a particular condition and rebating any excess over these caps according to each Responsible Persons' market share.

*Example: Four drugs are used to treat a particular condition and the agreed cap for their combined sales is \$80 million per year. If in the year sales are \$100 million, with the four Responsible Persons having sold: \$10 million, \$20 million, \$30 million and \$40 million respectively, the Responsible Persons agree to rebate a total of \$20 million to the government, paying: \$2 million, \$4 million, \$6 million and \$8 million, respectively.*

Other types of risk sharing arrangements might be negotiated between the Department of Health and Ageing and Responsible Persons.

At 30 June 2007 there were 55 risk sharing arrangements in place or in development.

All proposed listings with a predicted net cost to the PBS in excess of \$10 million per annum in at least one of the first five years of listing must be considered by Cabinet. This means that, where the Department of Health and Ageing, in consultation with the Department of Finance and Administration, has estimated the cost of a proposed new listing or extension to listing as being above this threshold, Cabinet consideration will be required before the listing can be finalised.

The following products expected to cost more than \$10 million per annum were listed in 2006–2007:

Lumiracoxib (Prexige®) – Prexige® is a drug for the treatment of osteoarthritis. It was listed on the PBS on 1 August 2006. It is a new COX-2 inhibitor and has a very similar action to other PBS-listed drugs in this class, eg. celecoxib. These drugs have been developed to reduce the risk of gastro-intestinal bleeding, an adverse risk of traditional anti-inflammatory drugs, but have to be used with caution with regard to cardiovascular and other adverse effects.

**NOTE** – the Responsible Person has requested that this drug be de-listed from the PBS from 1 October 2007.

Rituximab (Mabthera®) – Listing extension on 1 August 2006 making it available for the treatment of follicular lymphoma in patients who have not had treatment for this condition. PBS availability for this particular condition was previously restricted to patients who had relapsed, or those who did not show adequate response to chemotherapy. These patients would have otherwise been treated with chemotherapy alone and will benefit from a treatment with Mabthera® in combination with chemotherapy by a significantly greater reduction in tumour mass and an improvement in survival time.

Peginterferon alfa-2a (Pegasys®) – Listing extension on 1 October 2006 for the treatment of hepatitis B. Prior to this, Pegasys® was PBS-listed only for the treatment of chronic hepatitis C. Pegasys® is more effective than current treatment in clearing the hepatitis B virus from the blood and provides a better long term prognosis with reduced risk of cirrhosis and liver cancer.

Etanercept (Enbrel®), Adalimumab (Humira®), and Infliximab (Remicade®) – Listing extensions on 1 August 2006 of Enbrel®, Humira® and Remicade® for the treatment of psoriatic arthritis. Patients may try each of the drugs in turn to find the one most suitable for their particular condition. The three drugs can help to preserve bone structure and improve pain relief to bring about improved quality of life, compared with that achieved with existing anti-inflammatory drugs.

Insulin Glargine (Lantus®) and Insulin Detemir (Levemir®) – Lantus® and Levemir® were listed on 1 October 2006 for the treatment of diabetes. Lantus® and Levemir® will be used to maintain a basic insulin level and are expected to reduce the incidence of episodes of low blood-sugar levels compared with current therapy.

Docetaxel (Taxotere®) and Paclitaxel (Anzatax®) – The extensions to listings of docetaxel and paclitaxel from 1 October 2006 are for the combined therapy of patients with lymph node positive early breast cancer. Compared to the previously most commonly used treatment regimens increased survival and a delay before recurrence of tumour growth is expected from the use of docetaxel or paclitaxel.

Trastuzumab (Herceptin®) – Herceptin® was listed on 1 October 2006. Herceptin® targets a particular type of early-stage breast cancer which produces an increased amount of a protein molecule called human epidermal growth factor receptor 2 (HER2). The HER2 protein is associated with more aggressive disease and a poorer prognosis. The addition of Herceptin® to existing treatment regimens will improve current treatment with a significant improvement in freedom from cancer recurrence. Herceptin® has been subsidised since 2001 for women with late-stage breast cancer under a special program.

Alendronate (Fosamax® Once Weekly and Alendro® Once Weekly) – Listing extension for alendronate on 1 April 2007 is for the treatment of osteoporosis in patients at high risk of fracture who are over 70 years of age with a bone mineral density of less than three standard deviations below the young normal mean. The improvement of bone mineral density in these patients reduces risk of fracture and the morbidity and mortality that occur as a result of an osteoporotic fracture.

### Reviewing prices for existing items

The main mechanisms used by the PBPA for reviewing prices of pharmaceutical benefits supplied through the PBS are:

- reference pricing, i.e. comparing the prices of products that are considered by the PBAC to produce similar health benefits; or, where this is not available;
- on the basis of further cost effectiveness justification by the Responsible Person to the PBAC; and/or
- a margin on the cost of manufacture, or landed cost.

The PBPA may also request additional data from Responsible Persons, including drug utilisation data, so that relevant treatment costs can be independently calculated.

The Weighted Average Monthly Treatment Cost (WAMTC) is a form of reference pricing applied to specified groups of drugs considered by the PBAC as having similar therapeutic outcomes.

## Confidentiality of information

All information provided on a confidential basis to the PBPA is strictly treated as such. This confidential information is not disclosed to any person apart from members of the PBPA and relevant officers of the Department of Health and Ageing and the Department of Industry, Tourism and Resources without the express permission of the Chair and the Responsible Person concerned.

## Therapeutic Relativities

The PBPA issues relativity sheets that identify the basis of pricing comparisons between therapeutically similar products. These are mainly based on the advice from the PBAC. If necessary, clarification can be obtained from the Secretariat, and the relativities may be changed by the presentation of further data to the PBAC.

## Effects of price adjustments

Prices or price adjustments determined or recommended by the PBPA have an impact on:

- Responsible Persons through adjusted selling prices;
- wholesalers through the margin on the prices of products to pharmacist;
- pharmacists through the mark-up on wholesale prices;
- hospitals dispensing highly specialised drugs to community-based patients through the special distribution arrangements provided for under Section 100 of the *National Health Act 1953*; and
- consumers and taxpayers that, either directly or indirectly, bear part or all of the cost of items dispensed under the PBS.

The prices set by the PBPA cover not only subsidised products, but also products listed in the Schedule priced below the maximum co-payment for general patients. The co-payment for general patients for the period of the report was \$29.50 changing to \$30.70 effective 1 January 2007, while the concessional co-payment was \$4.70, changing to \$4.90 effective 1 January 2007.

## Brand Substitution

Since 1 December 1994 there has been a policy of brand substitution. Under the policy, a pharmacist can substitute a brand other than that prescribed by the patient's doctor without reference back to the prescriber. This practice is only allowed in cases where the brand to be substituted is equivalent to that prescribed by the doctor.

Equivalent brands are shown in the Schedule of Pharmaceutical Benefits as having been demonstrated to be bioequivalent or therapeutically equivalent, or that justification for not needing bioequivalence or therapeutic equivalence data has been provided to and accepted by the Therapeutic Goods Administration. If other brands are not shown in this way it does not imply that they are not equivalent, but simply that it is unknown whether or not they are equivalent.

Since 1 May 1999 Responsible Persons have been able to vary claimed prices or reduce approved prices to pharmacist without reference to the PBPA.

The following table shows the effect of brand substitution\*.

	<i>June 2004</i>	<i>June 2005</i>	<i>June 2006</i>	<i>June 2007</i>
Number of products** with a premium	323	335	345	360
Average brand premium	\$2.85	\$2.78	\$2.76	\$2.88
Weighted average brand premium***	\$1.89	\$1.77	\$1.76	\$1.83
Brand premium range	\$0.06 to \$79.48	\$0.06 to \$79.48	\$0.06 to \$79.48	\$0.09 to \$76.86
Prescriptions dispensed with a brand premium during the year (million)	28.5	30.0	30.1	27.9
Prescriptions dispensed at the benchmark level during the year (million)	43.1	50.5	51.9	52.7
Percentage at the benchmark level	60%	63%	63%	65%
Products** at the benchmark price	979	996	1014	1089

\* Figures only include those scripts processed by Medicare Australia, so general scripts that fall under the co-payment are not included.

\*\* Product is defined as a unique combination of "brand name" and "form & strength".

\*\*\* Weighted average brand premium is calculated by:

Scripts x premium = total premium value,

Total premium value/total scripts = weighted average brand premium

## Special Patient Contributions (SPC)

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Special patient contributions may apply when a manufacturer and the Government cannot agree about the price of a product listed on the PBS. In these cases, the product continues to be listed on the PBS, but patients pay an amount in addition to the standard patient co-payment. These additional amounts are paid to the Responsible Person, not to the Government.

The advantage of special patient contributions is that patients are not denied subsidised access to the drugs altogether, increasing the treatment options available for doctors and patients. There are usually means of avoiding special patient contributions.

There are three types of special patient contributions, which are discussed below.

### Brand Premium Policy

The Brand Premium Policy was introduced in December 1990, at the request of the industry. The policy allows Responsible Persons to set their own prices on PBS listed brands in particular circumstances. It applies mainly to drugs which are no longer under patent.

The policy operates where there are a number of therapeutically equivalent brands available. The Government subsidises each of the available brands to the level of the lowest priced brand. Responsible Persons of other brands are able to set a price higher than the price of the lowest priced brand. Patients then pay the difference between the price of the lowest priced brand and the price of the brand which is dispensed to them – this is known as the brand premium.

The brand premium is not paid to the Government. The Responsible Person receives the benefit of the brand premium paid.

The principle is that there should always be available at least one therapeutically equivalent brand without a brand premium. Unless the prescribing doctor or dentist has specifically indicated otherwise on the prescription, a pharmacist can dispense another brand of the same medicine at the patient's request. In this way, patients can avoid paying a brand premium.

As at 30 June 2007, 360 of the approximately 2800 brands listed on the PBS attracted a brand premium. The average brand premium was \$2.88, and premiums ranged from \$0.09 to \$76.86. The majority of brand premiums were in the range of \$1.00 to \$4.00.

## Therapeutic Group Premium Policy

The Therapeutic Group Premium Policy was introduced in 1998.

The policy applies within specifically defined groups of drugs which have similar safety and health outcomes. Within these groups, the drugs can be interchanged at the patient level. The Government subsidises all drugs within a group to the level of the lowest priced drug. The difference in price between the lowest priced drug and higher priced drugs within the group is called a therapeutic group premium (TGP). The TGP is paid by the patient and goes to the Responsible Person, not to the Government.

The principle is that there is always at least one drug within each group of drugs available without a TGP. In addition, when a patient, for a medical reason, is only able to take a drug with a premium, the prescribing doctor can request an exemption from the premium from Medicare Australia.

As at 30 June 2007, there were four groups of drugs affected by the Therapeutic Group Premium Policy. These are ACE inhibitors and Calcium Channel Blockers that are used to treat cardiovascular disease, HMG CoA reductase inhibitors (statins) used for lowering blood cholesterol, the H2 receptor antagonists for the treatment of peptic ulcers. The prices of items in these groups are reviewed by the PBPA each year, as for all drugs listed on the PBS. As at 30 June 2007, there were 69 items within the four groups. Four of the items attracted TGPs, which ranged from \$1.07 to \$4.18.

## Other Special Patient Contributions

There are currently nine drugs with special patient contributions other than brand or therapeutic group premiums listed on the PBS. Eight of these have been introduced because the companies and the Minister could not agree on a new price when a price reduction was required by the 12.5% price reduction policy. The ninth, bleomycin, has had a special patient contribution for a number of years.

<i>Drug</i>	<i>Use</i>	<i>SPC</i>
Bleomycin	Some cancers	\$445.90
Levetiracetam	Epilepsy	\$7.13 – \$19.84
Topiramate	Epilepsy	\$2.32 – \$2.62
Escitalopram	Depression	\$4.33
Pemetrexed	Non-small cell lung cancer	\$398.72
Lansoprazole(oral solution)	Proton pump inhibitor	\$3.63
Amoxicillin (paediatric drops)	Antibiotic for use in children	\$0.58
Naratriptan*	Migraine	\$2.66
Zolmitriptan*	Migraine	\$2.64

- \* The Government has ensured that patients will not be financially disadvantaged with the introduction of two new special patient contributions. The treating doctor can seek an authority from Medicare Australia to waive this type of special patient contribution where there is no clinically suitable alternative listed on the PBS at the benchmark price. Doctors are encouraged to seek a waiver whenever appropriate so that patients are not financially disadvantaged. Bleomycin is the only drug for which the SPC cannot be waived.

### Implementation of the Weighted Average Monthly Treatment Cost (WAMTC) Methodology

The comparison of monthly treatment costs is a pricing tool which has been used by the PBPA to review prices of closely related drugs for many years.

The WAMTC methodology applies to groups of drugs that are considered to be therapeutically similar by the PBAC. Under the evidence-based approach used for the listing and pricing of drugs, it is the practice to price these at the same level.

Each WAMTC group is reviewed annually in line with PBPA meetings, and may be subject to ad hoc reviews if a price reduction is offered by a Responsible Person of a drug in a WAMTC group.

There are two categories of drug groups to which the WAMTC methodology applies:

- Therapeutic Group drugs; and
- Non-Therapeutic Group drugs, where the mode of action is not necessarily the same but the drugs have been listed on a cost minimisation basis as providing similar health outcomes. It may be that the group could form a Therapeutic Group but has not been designated so by a decision of the Government.

There are currently six Therapeutic Group WAMTC groups:

- H2 receptor antagonists (cimetidine, ranitidine, nizatidine, famotidine)
- Calcium Channel Blockers (CCB) (dihydropyridines) (amlodipine, felodipine, lercanidipine, nifedipine)
- ACE inhibitors (captopril, enalapril, fosinopril, lisinopril, perindopril, quinapril, ramipril, trandolapril)
- HMGs (statins) (pravastatin and simvastatin only)
- Proton Pump Inhibitors (PPIs) (esomeprazole, lansoprazole, omeprazole, pantoprazole, rabeprazole)
- Angiotensin II receptor antagonists (ATRA) (candesartan, eprosartan, irbesartan, telmisartan)

There is one non-Therapeutic Group WAMTC group :

- Selective Serotonin Re-uptake Inhibitors (SSRIs-plus) (citalopram, fluoxetine, fluvoxamine, mirtazapine, moclobemide, reboxetine, paroxetine, sertraline)

The SSRIs-plus WAMTC review was conducted in August 2006 with resultant price adjustments commencing from 1 December 2006. This was the final SSRIs-plus WAMTC review to be conducted. The SSRIs-plus group, with the introduction of PBS Reforms effective 1 August 2007, will no longer be subject to WAMTC reviews.

The PPIs and H2 receptor antagonists were reviewed in December 2006, with resultant price adjustments commencing from 1 April 2007.

The ATRA and Statins were reviewed in April 2007, with resultant price adjustments commencing from 1 August 2007.

The ACE inhibitors and CCBs were also reviewed in April 2007. These reviews were delayed due to issues raised by Responsible Persons regarding the data periods utilised in this review. The PBPA decided at its April 2007 meeting to re-run these WAMTC reviews with the results to be tabled at the August 2007 meeting.

## 12.5% Price Reduction Policy

In general, the prices Australian taxpayers pay for generic medicines are high compared to some other OECD countries. Therefore, since October 2004, for the first new generic brand of a medicine already listed on the PBS, the Responsible Person must offer a price reduction of at least 12.5% compared to the current lowest priced brand.

The first new brands subject to the price reduction were listed on 1 August 2005. In this financial year there have been three rounds of reductions, occurring in August and December 2006 and in April 2007. As at April 2007, prices of drugs in twenty-three of the (then) 112 reference pricing groups have been affected. Implementation of this policy has been through agreement with the industry rather than through legislation.

Price reductions under this policy help to reduce the cost of the PBS, thereby helping to maintain its affordability into the future.

## The Highly Specialised Drugs Program

### Program overview

In addition to the drugs available under usual PBS arrangements, a number of drugs are also made available under alternative arrangements that are considered more appropriate.

These alternative arrangements are provided for under Section 100 (s100) of the *National Health Act 1953*. One of the programs under s100 is the Highly Specialised Drugs (HSD) Program. The Australian Government provides for certain specialised medicines under the HSD Program.

Highly Specialised Drugs are for the treatment of chronic conditions which, because of their clinical use or other special features, are restricted to supply through public and private hospitals that have appropriate specialist facilities. To prescribe these drugs as pharmaceutical benefit items, medical practitioners are required to be affiliated with these specialist hospital units.

The HSD Program is administered by the Access and Systems Branch, while the process of selecting and reviewing drugs and procedures is the responsibility of the Highly Specialised Drugs Working Party.

Subsidy for drugs under this program commences following recommendation by the PBAC, approval by the Australian Government, and the States and Territories accepting the offer of subsidy.

To gain access to a Government funded drug under this program, a patient must attend a participating hospital and be a day admitted patient, a non-admitted patient or a patient on discharge. Government subsidy is not available for hospital in-patients. Patients must also be under appropriate specialist medical care, meet the specific medical criteria and be an Australian resident in Australia (or other eligible person).

A patient will be required to pay a contribution for each supply of a Highly Specialised Drug at a similar rate to the PBS.

### Highly Specialised Drugs Working Party

The Australian Health Ministers' Advisory Council established the Highly Specialised Drugs Working Party in 1991. The Working Party consists of representatives from the Health Department of each of the States and Territories, the Australian Private Hospitals Association and the Commonwealth as chair.

The Working Party's terms of reference are:

- selecting drugs proposed for inclusion in the funding arrangements for highly specialised drugs;
- referring proposed drugs with supporting information to the PBAC for consideration for listing as pharmaceutical benefits under section 100 supply arrangements;
- monitoring information on potential new highly specialised drugs which might come under the funding arrangements;
- monitoring the quality use of drugs supplied under these arrangements; and
- investigating and making recommendations on procedures to monitor drugs supplied by public hospitals under the section 100 arrangements to patients in community settings.

### Program expenditure

During 2006–2007 there were 71 drugs subsidised under the HSD Program, compared to 2005–2006 when 69 were subsidised. The new drug listings are:

1. Epoprostenol Sodium
2. Sildenafil Citrate

The two new inclusions are both for the treatment of Pulmonary Arterial Hypertension.

Before reconciliation<sup>1</sup> the expenditure for 2006–2007 amounted to \$603,304,130.

Drugs were categorised as follows:

<i>Indications Grouping</i>	<i>Number of Drugs</i>	<i>Public Hospital</i>	<i>Private Hospital</i>	<i>Combined</i>
Acromegaly Agents	3	\$13,337,574	\$6,403,005	\$19,740,578
Antiarthritic Agents	2	\$3,980,358	\$19,266,936	\$23,247,294
Bisphosphonate Agents	2	\$12,859,310	\$11,252,480	\$24,111,790
Haemopoietic Agents	2	\$96,872,424	\$29,613,386	\$126,485,810
Hepatitis B or C Agents	7	\$55,688,584	\$10,642,681	\$66,331,265
HIV/AIDS Antiretroviral Agents	23	\$116,816,431	\$1,592,266	\$118,408,697
Immunocompromised Conditions	9	\$8,003,640	\$249,805	\$8,253,445
Immunosuppressive Agents	7	\$56,192,438	\$5,407,342	\$61,599,780
Iron Overload Agents	2	\$6,241,058	\$796,581	\$7,037,640
Malignancy Agents	5	\$48,944,938	\$30,427,114	\$79,372,052
Other Conditions	5	\$45,601,301	\$3,456,406	\$49,057,707
Pulmonary Arterial Hypertension Agents	4	\$3,527,437	\$16,132,547	\$19,659,984
Grand Total	71	\$468,065,494	\$135,238,636	\$603,304,130

1. On receipt of a certified statement of acquittal, financial adjustments are made for each State/Territory to account for actual utilisation as compared to forecast usage.

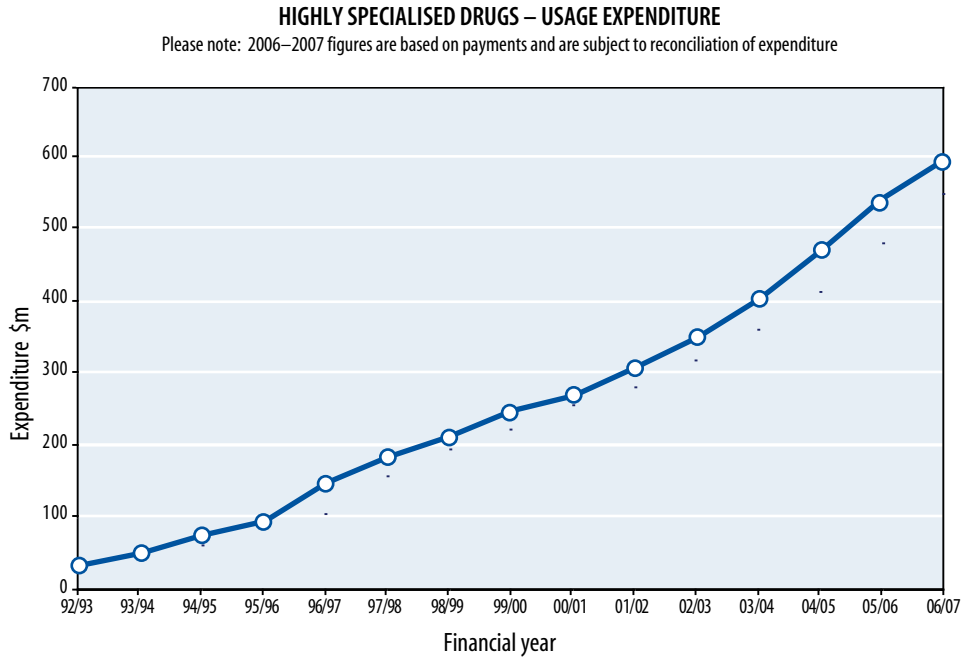
The expenditure through the HSD program in 2005–2006 was \$531.2 million. Before reconciliation, 2006–2007 costs totalled \$603.3 million, an increase of 13.6% from 2005–2006. At the end of the financial year, payments made to public hospitals via grants to the States and Territories will be reconciled against the actual drug usage.

Australian Government expenditure for HSDs is processed through two avenues; a grant process for public hospitals and through Medicare Australia for private hospitals. For 2006–2007 the expenditure in public hospitals was \$468.1 million, an increase of 10.9% from the 2005–2006 expenditure of \$427.5 million. HSD expenditure processed through Medicare Australia showed an increase of 13.7% from the \$98.5 million in 2005–2006 to \$135.3 million in 2006–2007.

The HSD Program continues to increase at a steady rate across both public and private hospitals. The increase in expenditure over the last few years is due to the increase in number of drugs listed on the program, patients accessing drugs and number of new hospitals, specifically private, participating in the program.

## Highly Specialised Drugs – Usage Expenditure Chart

The Highly Specialised Drugs Usage Expenditure chart outlines the program expenditure from 1992–1993 to 2006–2007 financial years.



## Anatomical Therapeutic Chemical (ATC) Group Reviews

The PBPA reviews annually the price of each drug listed in the PBS by ATC groupings. Responsible Persons are asked to submit cost and other data that they wish the PBPA to consider in reviewing product prices.

## Results of ATC group reviews 2006–2007

In the 2006–2007 financial year, the PBPA held three ATC group reviews, the summary results of which are compared below with those for the previous year:

<i>Product review results</i>	<i>2005–2006</i>	<i>2006–2007</i>
Number of brands reviewed:	2,780	3,045
Number of brands for which price applications were received:	449 16.15%	385 12.64%
Number of brands for which price increases were granted:	140 5.04%	163 5.35%
Number of vaccines for which price applications were received:*	n/a	7
Number of vaccines for which price increases were granted:	n/a	5

The number of new items recommended for listing and new items actually listed for the financial year 2006–2007 was:

Number of items recommended for listing by the PBAC:	52	67
Section 100 (based on PBAC meetings held in 2006–2007 financial year, includes different strengths):	14	15
Number of items listed:	138	125
Section 100 (based on new items listed in the PBS Schedules for 2006–2007):	13	33
Number of vaccines recommended for listing by the PBAC on the National Immunisation Program:	n/a	3
Estimate of additional cost of drugs for new, or extensions to, listings during 2006–07:**	–	\$212 million***

\* PBPA assumed responsibility for pricing vaccines in 2006–07.

\*\* Values are estimated net costs to the PBS and Repatriation Pharmaceutical Benefits Scheme (RPBS) for the financial year for each drug listed on the PBS, between 1 July 2006 and 30 June 2007. Note that drugs are listed at stages throughout the year so the value is not the estimated cost to the PBS and RPBS for the full 2006–07 financial year. This is \$153 million more than the estimate for 2005–2006 and \$118 million of this amount is attributable to Herceptin.

\*\*\* \$26.3 million of this value is for drugs that were not considered by Cabinet

## Estimated cost of price increases of existing items 2006–2007

The general price increases granted to Responsible Persons in 2006–2007 are collectively estimated to add \$15.9 million to the cost of the PBS in a full year based on the latest available twelve months prescription volume for each item at the time of review. A comparison with the estimated full year costs in the previous year is set out below:

<i>Approval of price increases</i>	<i>2005–2006 \$ million</i>	<i>2006–2007 \$ million</i>
Recommended by the PBPA and subsequently approved by the Minister	14.4	15.9

## Cost of Pharmaceutical Benefits Scheme, 2006–2007

The total cost of the PBS for 2006–2007 was \$6,428.30 million. This comprised \$4,445.21 million for persons covered by concession cards, and \$1,048.21 million for general patients not covered by concession cards. Other PBS expenditure was \$934.88 million, which includes expenditure on other categories including Highly Specialised Drugs, Doctor's Bag and Safety Net Card supply.

<i>Category</i>	<i>Processed Script numbers # million</i>	<i>Cost to Government (excludes patient contributions) \$ million</i>
General	24.58	1,048.21
Concessional	143.59	4,445.21
PB Other	*	934.88
Total	168.17**	6,428.30

\* PB Other contains diverse programs. The majority of data is collected by State Governments and script volume is unavailable.

\*\* Does not include Doctor's Bag (0.36 million)

Note: For the general public, where a pharmaceutical benefit has a dispensed price below the general patient contribution (that is, below \$30.70), the consumer pays the full amount. The above figures do not include these amounts.

## List of Acronyms

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Acronyms	Full Meaning
ATC	Anatomical Therapeutic Chemical
HSD	Highly Specialised Drugs
NIP	National Immunisation Program
OECD	Organisation for Economic Co-operation and Development
PBAC	Pharmaceutical Benefits Advisory Committee
PBPA	Pharmaceutical Benefits Pricing Authority
PBS	Pharmaceutical Benefits Scheme
RPBS	Repatriation Pharmaceutical Benefits Scheme
SPC	Special Patient Contribution
TGP	Therapeutic Group Premium
WAMTC	Weighted Average Monthly Treatment Cost

## CHAPTER 3

### Tables and figures

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*NOTE: The drug names presented in the following tables will be amended in the next Annual Report to reflect the terminology that came into effect on 1 August 2007.*

Table 1:	Pharmaceutical Benefits Scheme – Summary of ATC Group Reviews for 2006–2007
Table 2:	Pharmaceutical Benefits Scheme – Highest Cost Items – 12 Months to 30 June 2007
Table 3:	Pharmaceutical Benefits Scheme – Most Prescribed Items – 12 Months to 30 June 2007
Table 4:	Pharmaceutical Benefits Scheme – Top 20 Responsible Persons by Total Cost for 2006–2007 (from processed PBS prescriptions)
Table 5:	Pharmaceutical Benefits Scheme – Top 20 Responsible Persons by Market Share (Scripts) for 2006–2007 (from processed PBS prescriptions)
Table 6a:	Pharmaceutical Benefits Scheme – Significant Drug Groups (incl Doctor’s Bag) by Highest Government Cost – Year End June 2006 to Year End June 2007
Table 6b:	Pharmaceutical Benefits Scheme – Significant Drug Groups (incl Doctor’s Bag) by Highest Script Volume – Year End June 2006 to Year End June 2007
Table 7a:	Pharmaceutical Benefits Scheme – Significant Drugs (incl Doctor’s Bag) Sorted by Highest Change to Government Cost – Year End June 2006 to Year End June 2007
Table 7b:	Pharmaceutical Benefits Scheme – Significant Drugs (incl Doctor’s Bag) – Sorted by Highest Volume Change – Year End June 2006 to Year End June 2007

Table 1: Pharmaceutical Benefits Scheme Summary of ATC Group Reviews for 2006–2007

ATC group	Minor Group	No. of Items Reviewed	Script Volume	Govt cost (\$)	Total cost (\$)	Estimated cost to Government of Price Increases (\$)
A02	Drugs for acid related disorders	87	14,272,813	434,141,215	573,695,315	–
A04	Antiemetics and antinauseants	61	800,673	14,484,910	19,877,710	–
A06	Laxatives	20	637,448	10,301,694	12,476,663	8,137
A07	Antidiarrheals, intestinal antiinflammatory/ antiinfective agents	32	859,287	41,689,380	50,540,419	2,719,185
A10	Drugs used in diabetes	99	5,901,044	243,343,604	272,928,041	–
B01	Antithrombotic agents	44	5,905,564	207,810,703	240,679,115	1,521,712
B05	Blood substitutes and perfusion solutions	11	40,116	1,032,195	1,263,370	–
C01	Cardiac therapy	68	3,168,212	57,525,015	70,642,970	403,056
C02	Antihypertensives	24	718,120	10,155,478	12,900,835	62,711
C03	Diuretics	40	2,209,688	19,664,121	28,017,454	186,430
C07	Beta blocking agents	69	5,193,142	88,823,307	111,249,228	255,523
C08	Calcium channel blockers	69	7,434,563	149,870,376	194,565,135	–
C09	Agents acting on the renin-angiotensin system	171	19,021,931	383,234,232	491,173,773	–
C10	Lipid modifying agents	122	18,757,397	1,004,444,984	1,207,798,678	–
D07	Corticosteroids, dermatological preparations	38	2,222,401	19,348,480	29,373,156	–
D10	Anti-acne preparations	9	135,320	16,137,702	19,362,047	–
G03	Sex hormones and modulators of the genital system	133	3,054,211	69,145,674	87,630,656	497,429
H02	Corticosteroids for systemic use	34	1,649,122	11,428,576	17,527,794	153,449
J01	Antibacterials for systemic use	343	11,148,512	117,628,541	168,131,891	702,297
J05	Antivirals for systemic use	32	454,023	78,767,338	88,483,568	286,737
L01	Antineoplastic agents	143	483,536	248,328,728	254,841,867	74,980
L02	Endocrine therapy	37	471,456	130,326,918	135,995,882	–

Table 1: Pharmaceutical Benefits Scheme Summary of ATC Group Reviews for 2006–2007 (continued)

ATC group	Minor Group	No. of Items Reviewed	Script Volume	Govt cost (\$)	Total cost (\$)	Estimated cost to Government of Price Increases (\$)
L03	Immunostimulants	18	90,744	96,504,365	98,106,489	25,430
L04	Immunosuppressive agents	55	346,688	134,764,102	139,780,063	–
M01	Antiinflammatory and antirheumatic products	79	5,410,482	95,828,832	128,813,167	256,859
M03	Muscle relaxants	18	134,893	6,388,555	7,507,308	–
M04	Antigout preparations	17	889,220	7,208,835	10,485,138	30,390
M05	Drugs for treatment of bone diseases	19	3,339,910	161,686,762	185,082,726	134,408
N02	Analgesics	138	10,601,676	175,061,343	216,028,173	293,278
N03	Antiepileptics	120	1,717,260	94,622,131	110,959,993	8,060
N04	Anti-Parkinson drugs	39	650,812	36,004,839	40,260,145	70,269
N05	Psycholeptics	118	7,368,402	340,353,389	373,784,333	122,153
N06	Psychoanaleptics	144	11,937,641	329,862,635	446,666,885	289,811
R03	Drugs for obstructive airway diseases	86	8,873,593	351,948,877	427,016,832	–
S01	Ophthalmologicals	95	6,690,838	101,450,265	133,151,476	898,283
V03	All other therapeutic products	12	37,544	4,752,360	5,152,922	114,075
V04	Diagnostic agents	30	458,795	21,016,763	23,625,390	–
V06	General nutrients	70	63,091	21,597,361	22,675,678	–
	*Ad hoc	301	5,385,351	139,770,951	169,524,110	5,746,416
	Total (excludes section 100 drugs)	3,045	168,535,519	5,476,455,535	6,627,776,394	14,861,078

\* Ad hoc — comprised of groups with less than 4 Responsible Persons and/or less than 10 items (for confidentiality).

Table 2: Pharmaceutical Benefits Scheme – Highest Cost Items – 12 Months to 30 June 2007

Rank	Item	Drug	Form	Volume	Govt Cost (\$)	Total Cost (\$)	Average Price (\$)
1	8215	ATORVASTATIN CALCIUM	Tablet 40mg (atorvastatin)	3,057,246	206,519,411	243,856,510	79.76
2	8214	ATORVASTATIN CALCIUM	Tablet 20mg (atorvastatin)	3,424,052	157,887,926	198,922,878	58.10
3	8358	CLOPIDOGREL HYDROGEN SULFATE	Tablet 75mg (base)	2,111,423	157,471,339	173,226,770	82.04
4	8173	SIMVASTATIN	Tablet 40mg	2,448,471	137,817,896	162,645,894	66.43
5	8521	ATORVASTATIN CALCIUM	Tablet 80mg (atorvastatin)	1,094,501	109,150,495	122,285,089	111.73
6	8333	OMEPRAZOLE	Tablet 20mg	3,198,775	92,965,762	124,031,657	38.77
7	8187	OLANZAPINE	Tablet 10mg	272,868	88,868,480	90,938,902	333.27
8	8601	ESOMEPRAZOLE MAGNESIUM TRIHYDRATE	Tablet (enteric coated), equivalent to 40mg esomeprazole	1,636,584	82,530,849	100,711,452	61.54
9	8511	ALENDRONATE SODIUM	Tablet equivalent to 70mg alendronic acid	1,771,362	80,231,208	92,596,397	52.27
10	8626	TIOTROPIUM BROMIDE MONOHYDRATE	Capsule containing powder for oral inhalation 18micrograms (base) (for use in HandiHaler)	1,140,278	79,611,499	86,441,011	75.81
11	2012	SIMVASTATIN	Tablet 20mg	2,027,661	78,573,830	96,757,663	47.72
12	8008	PANTOPRAZOLE SODIUM SESQUIHYDRATE	Tablet (enteric coated), equivalent to 40mg pantoprazole	2,230,390	70,577,747	92,178,046	41.33
13	8600	ESOMEPRAZOLE MAGNESIUM TRIHYDRATE	Tablet (enteric coated), equivalent to 20mg esomeprazole	2,349,249	62,690,298	89,957,563	38.29
14	8519	FLUTICASON PROPRIONATE with SALMETEROL XINAFOATE	Oral pressurised inhalation 250micrograms – 25micrograms (base) per dose (120 doses), CFC-free formulation	881,458	58,107,683	68,571,264	77.79
15	8197	PRAVASTATIN SODIUM	Tablet 40mg	1,012,764	56,394,675	66,024,225	65.19
16	8213	ATORVASTATIN CALCIUM	Tablet 10mg (atorvastatin)	1,864,828	56,174,519	76,460,708	41.00
17	8302	VENLAFAXINE HYDROCHLORIDE	Capsule 150mg (base) (modified release)	1,118,859	54,747,569	70,683,847	63.17
18	8313	SIMVASTATIN	Tablet 80mg	646,323	53,591,738	60,269,649	93.25
19	8432	FLUTICASON PROPRIONATE with SALMETEROL XINAFOATE	Powder for oral inhalation in breath actuated device 500micrograms – 50micrograms (base) per dose (60 doses)	657,606	44,177,446	51,813,472	78.79
20	8405	IRBESARTAN with HYDROCHLOROTHIAZIDE	Tablet 300mg – 12.5mg	2,051,503	43,354,111	61,792,401	30.12
21	8508	RABEPRAZOLE SODIUM	Tablet 20mg (enteric coated)	1,389,218	42,509,361	58,254,799	41.93
22	8093	GOSERELIN ACETATE	Subcutaneous implant (long acting) 10.8mg (base) in pre-filled injection syringe	36,928	40,645,139	40,918,668	1108.07
23	8101	INTERFERON BETA-1b	Injection set comprising 1 vial powder for injection 8,000,000.i.u. (250micrograms) and solvent	33,977	39,304,558	39,894,454	1174.16
24	8134	VALACICLOVIR HYDROCHLORIDE	Tablet 500mg (base)	263,196	39,078,833	45,021,947	171.06
25	8243	LATANOPROST	Eye drops 50micrograms per mL (0.005%), 2.5mL	1,329,235	38,701,591	48,390,204	36.40
26	8757	EZETIMIBE	Tablet 10mg	629,871	37,228,345	44,145,572	70.09

Table 2: Pharmaceutical Benefits Scheme – Highest Cost Items – 12 Months to 30 June 2007 (continued)

Rank	Item	Drug	Form	Volume	Govt Cost (\$)	Total Cost (\$)	Average Price (\$)
27	8301	VENLAFAXINE HYDROCHLORIDE	Capsule 75mg (base) (modified release)	1,024,204	32,181,998	47,685,253	46.56
28	8449	PERINDOPRIL with INDAPAMIDE HEMIHYDRATE	Tablet containing 4mg perindopril erbumine–1.25mg indapamide hemihydrate	1,251,301	30,453,833	37,868,602	30.26
29	8431	FLUTICASONI PROPIONATE with SALMETEROL XINAFOATE	Powder for oral inhalation in breath actuated device 250micrograms–50micrograms (base) per dose (60 doses)	675,987	29,951,707	39,395,682	58.28
30	8248	IRBESARTAN	Tablet 300mg	1,212,821	29,527,815	34,290,232	28.27
31	8440	CELECOXIB	Capsule 200mg	1,218,706	28,583,479	37,509,611	30.78
32	8741	ADALIMUMAB	Injection 40mg in 0.8mL pre-filled syringe	15,969	27,773,770	27,987,090	1752.59
33	8220	CITALOPRAM HYDROBROMIDE	Tablet 20mg (base)	1,011,619	27,577,288	34,674,145	34.28
34	8185	OLANZAPINE	Tablet 5mg	211,393	26,648,985	28,433,005	134.50
35	8179	ANASTROZOLE	Tablet 1mg	142,316	25,150,653	27,120,026	190.56
36	8288	SALBUTAMOL SULFATE	Oral pressurised inhalation 100micrograms (base) per dose (200 doses), CFC-free formulation	1,993,424	25,095,621	32,534,722	16.32
37	8621	RISEDRONATE SODIUM	Tablet 35mg	550,801	24,941,049	28,834,816	52.35
38	8470	RAMIPRIL	Capsule 10mg	1,057,827	24,605,072	30,516,447	28.85
39	8258	CARVEDILOL	Tablet 25mg	231,485	24,035,575	25,986,272	112.26
40	8562	MELOXICAM	Tablet 15mg	1,040,527	23,758,364	31,983,544	30.74
41	2242	PAROXETINE HYDROCHLORIDE	Tablet 20mg (base)	904,811	23,381,474	33,425,590	36.94
42	1763	INSULIN NEUTRAL-INSULIN ISOPHANE (N.P.H.), (MIXED) (Biphasic isophane)	Injections (human) 100units (80units–70units) per mL, 3mL, 5	109,405	23,351,333	24,118,969	220.46
43	8294	RITUXIMAB	Solution for i.v. infusion 500mg in 50mL	9,285	23,151,212	23,295,819	2508.97
44	8848	OXALIPLATIN	Solution concentrate for i.v. infusion 100mg in 20mL	11,844	22,914,391	23,100,861	1950.43
45	8862	ETANERCEPT	Injection set containing 4 vials powder for injection 50mg and 4 pre-filled syringes solvent 1mL	13,128	22,829,115	22,998,655	1751.88
46	8247	IRBESARTAN	Tablet 150mg	1,179,774	22,648,902	27,367,220	23.20
47	2237	SERTRALINE HYDROCHLORIDE	Tablet 100mg (base)	952,978	22,481,395	33,422,564	35.07
48	9039	INSULIN GLARGINE	Injections (human analogue) 100units per mL, 3mL, 5	57,208	22,384,393	23,172,317	405.05
49	2241	LANSOPRAZOLE	Capsule 30mg	727,641	22,065,664	30,377,409	41.75
50	8609	INSULIN ASPART-INSULIN ASPART PROTAMINE SUSPENSION	Injections (human analogue) 100units (30units–70units) per mL, 3mL, 5	85,232	21,376,261	22,179,211	260.22

**Table 3: Pharmaceutical Benefits Scheme – Most Prescribed Items – 12 Months to 30 June 2007**

Rank	Item	Drug	Form	Volume	Govt Cost (\$)	Total Cost (\$)	Average Price (\$)
1	8214	ATORVASTATIN CALCIUM	Tablet 20mg (atorvastatin)	3,424,052	157,887,926	198,922,878	58.10
2	8333	OMEPRAZOLE	Tablet 20mg	3,198,775	92,965,762	124,031,657	38.77
3	8215	ATORVASTATIN CALCIUM	Tablet 40mg (atorvastatin)	3,057,246	206,519,411	243,856,510	79.76
4	1081	ATENOLOL	Tablet 50mg	2,964,234	19,899,816	31,280,882	10.55
5	8173	SIMVASTATIN	Tablet 40mg	2,448,471	137,817,896	162,645,894	66.43
6	8600	ESOMEPRAZOLE MAGNESIUM TRIHYDRATE	Tablet (enteric coated), equivalent to 20mg esomeprazole	2,349,249	62,690,298	89,957,563	38.29
7	8008	PANTOPRAZOLE SODIUM SESQUIHYDRATE	Tablet (enteric coated), equivalent to 40mg pantoprazole	2,230,390	70,577,747	92,178,046	41.33
8	8358	CLOPIDOGREL HYDROGEN SULFATE	Tablet 75mg (base)	2,111,423	157,471,339	173,226,770	82.04
9	8405	IRBESARTAN with HYDROCHLOROTHIAZIDE	Tablet 300mg–12.5mg	2,051,503	43,354,111	61,792,401	30.12
10	2012	SIMVASTATIN	Tablet 20mg	2,027,661	78,573,830	96,757,663	47.72
11	8288	SALBUTAMOL SULFATE	Oral pressurised inhalation 100micrograms (base) per dose (200 doses), CFC-free formulation	1,993,424	25,095,621	32,534,722	16.32
12	1215	CODEINE PHOSPHATE with PARACETAMOL	Tablet 30mg–500mg	1,882,105	9,540,837	16,497,196	8.77
13	8213	ATORVASTATIN CALCIUM	Tablet 10mg (atorvastatin)	1,864,828	56,174,519	76,460,708	41.00
14	2089	TEMAZEPAM	Tablet 10mg	1,843,355	6,464,769	12,917,038	7.01
15	8511	ALENDRONATE SODIUM	Tablet equivalent to 70mg alendronic acid	1,771,362	80,231,208	92,596,397	52.27
16	3119	CEPHALEXIN	Capsule 500mg	1,670,985	11,611,223	18,412,635	11.02
17	8601	ESOMEPRAZOLE MAGNESIUM TRIHYDRATE	Tablet (enteric coated), equivalent to 40mg esomeprazole	1,636,584	82,530,849	100,711,452	61.54
18	1746	PARACETAMOL	Tablet 500mg	1,623,756	7,357,499	12,452,470	7.67
19	2430	METFORMIN HYDROCHLORIDE	Tablet 500mg	1,447,434	14,830,253	19,927,144	13.77
20	3162	DIAZEPAM	Tablet 5mg	1,436,265	5,096,771	10,527,676	7.33
21	8508	RABEPRAZOLE SODIUM	Tablet 20mg (enteric coated)	1,389,218	42,509,361	58,254,799	41.93
22	8243	LATANOPROST	Eye drops 50micrograms per mL (0.005%), 2.5mL	1,329,235	38,701,591	48,390,204	36.40
23	8449	PERINDOPRIL with INDAPAMIDE HEMIHYDRATE	Tablet containing 4mg perindopril erbumine–1.25mg indapamide hemihydrate	1,251,301	30,453,833	37,888,602	30.26
24	8440	CELECOXIB	Capsule 200mg	1,218,706	28,583,479	37,509,611	30.78
26	8247	IRBESARTAN	Tablet 150mg	1,179,774	22,648,902	27,367,220	23.20
27	1889	AMOXYCILLIN	Capsule 500mg	1,146,189	7,606,774	12,419,168	10.84
28	8626	TIOTROPIUM BROMIDE MONOHYDRATE	Capsule containing powder for oral inhalation 18micrograms (base) (for use in HandiHaler)	1,140,278	79,611,499	86,441,011	75.81

Table 3: Pharmaceutical Benefits Scheme – Most Prescribed Items – 12 Months to 30 June 2007 (continued)

Rank	Item	Drug	Form	Volume	Govt Cost (\$)	Total Cost (\$)	Average Price (\$)
29	8302	VENLAFAXINE HYDROCHLORIDE	Capsule 150mg (base) (modified release)	1,118,859	54,747,569	70,683,847	63.17
30	8521	ATORVASTATIN CALCIUM	Tablet 80mg (atorvastatin)	1,094,501	109,150,495	122,285,089	111.73
31	8254	AMOXYCILLIN with CLAVULANIC ACID	Tablet 875mg–125mg	1,065,518	13,003,134	17,362,373	16.29
32	8784	PARACETAMOL	Tablet 500mg	1,058,604	10,052,310	13,433,828	12.69
33	8470	RAMIPRIL	Capsule 10mg	1,057,827	24,605,072	30,516,447	28.85
34	8562	MELOXICAM	Tablet 15mg	1,040,527	23,758,364	31,983,544	30.74
35	8301	VENLAFAXINE HYDROCHLORIDE	Capsule 75mg (base) (modified release)	1,024,204	32,181,998	47,685,253	46.56
36	8197	PRAVASTATIN SODIUM	Tablet 40mg	1,012,764	56,394,675	66,024,225	65.19
37	8220	CITALOPRAM HYDROBROMIDE	Tablet 20mg (base)	1,011,619	27,577,288	34,674,145	34.28
38	8202	ASPIRIN	Tablet 100mg	1,006,279	3,301,745	6,736,840	6.69
39	2412	FRUSEMIDE	Tablet 40mg	996,274	4,961,641	8,142,136	8.17
40	2236	SERTRALINE HYDROCHLORIDE	Tablet 50mg (base)	982,847	19,673,477	29,896,453	30.42
41	2237	SERTRALINE HYDROCHLORIDE	Tablet 100mg (base)	952,978	22,481,395	33,422,564	35.07
42	2752	AMLODIPINE	Tablet 10mg (as besylate)	943,030	18,598,790	30,266,968	32.10
43	9007	PERINDOPRIL	Tablet containing 5mg perindopril arginine	933,534	16,995,938	20,784,043	22.26
44	2242	PAROXETINE HYDROCHLORIDE	Tablet 20mg (base)	904,811	23,381,474	33,425,590	36.94
45	2751	AMLODIPINE	Tablet 5mg (as besylate)	903,949	14,994,720	18,539,604	20.51
46	3133	OXAZEPAM	Tablet 30mg	895,581	2,793,092	5,892,981	6.58
47	8519	FLUTICASONE PROPIONATE with SALMETEROL XINAFOATE	Oral pressurised inhalation 250micrograms–25micrograms (base) per dose (120 doses), CFC-free formulation	881,458	58,107,683	68,571,264	77.79
48	9008	PERINDOPRIL	Tablet containing 10mg perindopril arginine	828,778	15,460,913	25,557,985	30.84
49	8513	MIRTAZAPINE	Tablet 30mg	801,913	21,078,199	29,345,440	36.59
50	1946	RAMIPRIL	Tablet 5mg	796,760	11,895,098	15,265,878	19.16

Table 4: Pharmaceutical Benefits Scheme – Top 20 Responsible Persons by Total Cost for 2006–2007 (from processed PBS prescriptions)

Rank	Responsible Person	Script Volume	Govt Cost (\$)	Total Cost (\$)	Sales (Ex-Manufacturer) (\$)
1	Pfizer	21,145,470	857,492,949	1,061,329,758	781,319,222
2	AstraZeneca	11,556,866	462,495,305	567,209,993	418,812,308
3	Alphapharm	26,692,042	410,847,426	545,361,346	333,719,092
4	Sanofi-Aventis	15,640,492	458,427,304	542,787,883	383,749,117
5	GlaxoSmithKline	8,663,629	353,613,272	431,826,493	316,335,770
6	Merck Sharp & Dohme	6,230,738	275,071,166	325,808,707	240,668,449
7	Bristol Myers Squibb	6,749,731	246,171,669	288,805,452	209,590,385
8	Arrow	7,006,521	208,721,760	257,576,921	181,540,809
9	Eli Lilly	1,348,723	220,609,964	231,757,395	184,530,823
10	Wyeth	3,740,697	172,095,843	216,107,470	164,458,681
11	Janssen-Cilag	2,646,248	165,088,581	190,215,130	146,320,170
12	Boehringer	4,154,640	150,230,655	173,093,159	124,358,331
13	Roche Products	2,043,107	155,177,918	169,183,859	134,056,152
14	Servier	5,769,725	103,702,838	137,644,363	88,664,943
15	Novartis	2,937,156	104,066,167	122,468,484	89,100,459
16	Novo Nordisk	951,519	111,579,484	118,765,716	94,731,579
17	Sigma	9,494,274	75,980,297	112,443,339	50,736,731
18	Bayer	1,472,827	90,738,275	101,921,587	79,682,076
19	Abbott	1,459,180	81,592,768	88,842,093	70,033,749
20	Hexal	2,972,612	68,377,091	87,178,195	59,130,445
	Others	25,859,322	704,374,803	857,449,051	593,856,379
	Total	168,535,519	5,476,455,535	6,627,776,394	4,745,395,670

Note: Includes branded and unbranded scripts and Doctor's bag scripts. 'Others' contains scripts written for extemporaneously-prepared items and where the manufacturer is unknown.

**Table 5: Pharmaceutical Benefits Scheme – Top 20 Responsible Persons by Market Share (Scripts) for 2006–2007 (from processed PBS prescriptions)**

Rank	Responsible Person	Script Volume	Govt Cost (\$)	Total Cost (\$)	% of Total	Sales (Ex-Manufacturer) (\$)
1	Alphapharm	26,692,042	410,847,426	545,361,346	15.84	333,719,092
2	Pfizer	21,145,470	857,492,949	1,061,329,758	12.55	781,319,222
3	Sanofi-Aventis	15,640,492	458,427,304	542,787,883	9.28	383,749,117
4	AstraZeneca	11,556,866	462,495,305	567,209,993	6.86	418,812,308
5	Sigma	9,494,274	75,980,297	112,443,339	5.63	50,736,731
6	GlaxoSmithKline	8,663,629	353,613,272	431,826,493	5.14	316,335,770
7	Arrow	7,006,521	208,721,760	257,576,921	4.16	181,540,809
8	Bristol Myers Squibb	6,749,731	246,171,669	288,805,452	4.00	209,590,385
9	Merck Sharp & Dohme	6,230,738	275,071,166	325,808,707	3.70	240,668,449
10	Servier	5,769,725	103,702,838	137,644,363	3.42	88,664,943
11	Boehringer	4,154,640	150,230,655	173,093,159	2.47	124,358,331
12	Wyeth	3,740,697	172,095,843	216,107,470	2.22	164,458,681
13	GenRx	3,084,212	61,870,315	79,647,299	1.83	52,014,558
14	Hexal	2,972,612	68,377,091	87,178,195	1.76	59,130,445
15	Novartis	2,937,156	104,066,167	122,468,484	1.74	89,100,459
16	Janssen-Cilag	2,646,248	165,088,581	190,215,130	1.57	146,320,170
17	Aspen	2,544,816	20,495,610	30,480,140	1.51	14,166,644
18	Mayne	2,114,151	57,554,909	68,202,230	1.25	48,248,773
19	Roche Products	2,043,107	155,177,918	169,183,859	1.21	134,056,152
20	Solvay	1,795,406	47,727,561	62,320,893	1.07	43,540,935
	Total Top 20	146,982,533	4,455,208,637	5,469,691,113	87%	3,880,531,975
	Others	21,552,986	1,021,246,898	1,158,085,281	13%	864,863,696
	Total	168,535,519	5,476,455,535	6,627,776,394	100%	4,745,395,670

Note: Includes branded and unbranded scripts and Doctor's bag scripts. 'Others' contains scripts written for extemporaneously-prepared items and where the manufacturer is unknown.

**Table 6a: Pharmaceutical Benefits Scheme – Significant Drug Groups (incl. Dr’s Bag) by Highest Government Cost – Year End June 2006 to Year End June 2007**

ATC Group Level 2	Year Ending June 2006					Year Ending June 2007					
	Script Volume	Govt Cost (\$)	Total Cost (\$)	Average Price (\$)	Script Volume	(%diff)	Govt Cost (\$)	Total Cost (\$)	(%diff)	Average Price (\$)	(%diff)
Lipid modifying agents	17,365,169	940,650,611	1,114,784,039	64.20	18,757,397	8.0	1,004,444,984	1,207,798,678	8.3	64.39	0.3
Drugs for acid related disorders	13,680,432	503,996,202	626,749,699	45.81	14,272,813	4.3	434,141,215	573,695,315	-8.5	40.19	-12.3
Agents acting on the renin-angiotensin system	19,798,050	417,340,415	561,004,067	28.34	19,021,931	-3.9	383,234,232	491,173,773	-12.4	25.82	-8.9
Drugs for obstructive airway diseases	9,178,632	363,842,287	439,271,899	47.86	8,873,593	-3.3	351,948,877	427,016,832	-2.8	48.12	0.6
Psycholeptics	7,316,315	313,394,268	344,069,028	47.03	7,368,402	0.7	340,353,389	373,784,333	8.6	50.73	7.9
Psychoanaesthetics	12,180,626	329,593,062	457,698,732	37.58	11,937,641	-2.0	329,862,635	446,666,885	-2.4	37.42	-0.4
Antineoplastic agents	464,943	226,591,528	232,540,826	500.15	483,536	4.0	248,328,728	254,841,867	9.6	527.04	5.4
Drugs used in diabetes	5,508,145	208,163,251	232,935,447	42.29	5,901,044	7.1	243,343,604	272,928,041	17.2	46.25	9.4
Antithrombotic agents	5,501,332	194,777,668	222,238,098	40.40	5,905,564	7.3	207,810,703	240,679,115	8.3	40.75	0.9
Analgesics	10,699,437	159,517,995	197,291,243	18.44	10,601,676	-0.9	175,061,343	216,028,173	9.5	20.38	10.5
Drugs for treatment of bone diseases	3,145,888	163,735,344	184,117,926	58.53	3,339,910	6.2	161,686,762	185,082,726	0.5	55.42	-5.3
Calcium channel blockers	7,388,143	150,892,812	193,191,326	26.15	7,434,563	0.6	149,870,376	194,565,135	0.7	26.17	0.1
Immunosuppressive agents	298,609	97,629,573	101,562,542	340.12	346,688	16.1	134,764,102	139,780,063	37.6	403.19	18.5
Endocrine therapy	431,599	121,472,024	126,212,143	292.43	471,456	9.2	130,326,918	135,995,882	7.8	288.46	-1.4
Antibacterials for systemic use	11,306,843	129,317,850	178,650,723	15.80	11,148,512	-1.4	117,628,541	168,131,891	-5.9	15.08	-4.6
Ophthalmologicals	6,678,446	96,022,823	125,016,769	18.72	6,690,838	0.2	101,450,265	133,151,476	6.5	19.90	6.3
Immunostimulants	86,915	93,733,051	95,194,421	1095.26	90,744	4.4	96,504,365	98,106,489	3.1	1081.13	-1.3

**Table 6b. Pharmaceutical Benefits Scheme — Significant Drug Groups (incl. Dr's Bag) by Highest Script Volume — Year End June 2006 to Year End June 2007**

ATC Group Level 2	Year Ending June 2006					Year Ending June 2007					
	Script Volume	Govt Cost (\$)	Total Cost (\$)	Average Price (\$)	(%diff)	Script Volume	Govt Cost (\$)	Total Cost (\$)	(%diff)	Average Price (\$)	(%diff)
Agents acting on the renin-angiotensin system	19,798,050	417,340,415	561,004,067	28.34	-3.9	19,021,931	383,234,232	491,173,773	-12.4	25.82	-8.9
Lipid modifying agents	17,365,169	940,650,611	1,114,784,039	64.20	8.0	18,757,397	1,004,444,984	1,207,798,678	8.3	64.39	0.3
Drugs for acid related disorders	13,680,432	503,996,202	626,749,699	45.81	4.3	14,272,813	434,141,215	573,695,315	-8.5	40.19	-12.3
Psychoanaesthetics	12,180,626	329,593,062	457,698,732	37.58	-2.0	11,937,641	329,862,635	446,666,885	-2.4	37.42	-0.4
Antibacterials for systemic use	11,306,843	129,317,850	178,650,723	15.80	-1.4	11,148,512	117,628,541	168,131,891	-5.9	15.08	-4.6
Analgesics	10,699,437	159,517,995	197,291,243	18.44	-0.9	10,601,676	175,061,343	216,028,173	9.5	20.38	10.5
Drugs for obstructive airway diseases	9,178,632	363,842,287	439,271,899	47.86	-3.3	8,873,593	351,948,877	427,016,832	-2.8	48.12	0.6
Calcium channel blockers	7,388,143	150,892,812	193,191,326	26.15	0.6	7,434,563	149,870,376	194,565,135	0.7	26.17	0.1
Psycholeptics	7,316,315	313,394,268	344,069,028	47.03	0.7	7,368,402	340,353,389	373,784,333	8.6	50.73	7.9
Ophthalmologicals	6,678,446	96,022,823	125,016,769	18.72	0.2	6,690,838	101,450,265	133,151,476	6.5	19.90	6.3
Antithrombotic agents	5,501,332	194,777,668	222,238,098	40.40	7.3	5,905,564	207,810,703	240,679,115	8.3	40.75	0.9
Drugs used in diabetes	5,508,145	208,163,251	232,935,447	42.29	7.1	5,901,044	243,343,604	272,928,041	17.2	46.25	9.4
Antiinflammatory and antirheumatic products	5,873,572	100,691,700	140,410,880	23.91	-7.9	5,410,482	95,828,832	128,813,167	-8.3	23.81	-0.4
Beta blocking agents	5,097,677	83,529,703	103,618,010	20.33	1.9	5,193,142	88,823,307	111,249,228	7.4	21.42	5.4
Drugs for treatment of bone diseases	3,145,888	163,735,344	184,117,926	58.53	6.2	3,339,910	161,686,762	185,082,726	0.5	55.42	-5.3
Cardiac therapy	3,251,681	60,275,692	72,610,876	22.33	-2.6	3,168,212	57,525,015	70,642,970	-2.7	22.30	-0.1
Sex hormones and modulators of the genital system	3,245,802	72,495,895	91,135,898	28.08	-5.9	3,054,211	69,145,674	87,630,656	-3.8	28.69	2.2

**Table Za: Pharmaceutical Benefits Scheme – Significant Drugs (incl Dr’s Bag) – Sorted by Highest Change to Government Cost – Year End June 2006 to Year End June 2007**

Rank	Drug	Year Ending June 2006			Year Ending June 2007			Change			
		Volume	Govt Cost (\$)	Total Cost(\$)	Average Price (\$)	Volume	Govt Cost (\$)	Total Cost (\$)	Average Price (\$)	Govt Cost (\$)	%
1	ATORVASTATIN CALCIUM	8,498,869	487,476,160	581,529,412	68.42	9,440,627	529,732,351	641,525,185	67.95	42,256,191	8.67
2	EZETIMIBE with SIMVASTATIN	15,800	2,115,539	2,319,789	146.82	188,615	24,715,372	26,926,292	142.76	22,599,833	1068.28
3	INSULIN GLARGINE	0	0	0	0.00	57,208	22,384,393	23,172,317	405.05	22,384,393	New
4	ETANERCEPT	18,945	35,804,211	36,037,059	1902.19	31,202	55,231,086	55,682,765	1,784.59	19,426,874	54.26
5	RISEDONATE SODIUM and CALCIUM CARBONATE	12,212	560,595	654,822	53.62	381,216	17,187,343	19,952,992	52.34	16,626,748	2965.91
6	ROSUAVASTATIN CALCIUM	0	0	0	0.00	273,563	16,562,490	20,731,959	75.78	16,562,490	New
7	RISPERIDONE	346,117	59,497,765	61,959,424	179.01	425,783	73,468,307	76,539,539	179.76	13,970,543	23.48
8	ADALIMUMAB	13,481	25,266,309	25,432,217	1886.52	21,752	37,812,832	38,116,256	1,752.31	12,546,523	49.66
9	ALENDRONATE SODIUM with COLECALCIFEROL	0	0	0	0.00	276,142	12,410,410	14,376,114	52.06	12,410,410	New
10	ROSLIGITAZONE MALEATE	281,991	19,081,627	21,587,065	76.55	456,491	30,103,140	34,377,811	75.31	11,021,513	57.76
11	CLOPIDOGREL HYDROGEN SULFATE	1,893,034	146,814,709	159,334,336	84.17	2,111,423	157,471,339	173,226,770	82.04	10,656,630	7.26
12	BUPRENORPHINE	33,770	1,094,391	1,316,617	38.99	248,909	9,060,529	10,401,537	41.79	7,966,139	727.91
13	LUMIRACOXIB	0	0	0	0.00	347,301	7,955,715	10,376,659	29.88	7,955,715	New
14	ANASTROZOLE	88,983	17,277,676	18,421,585	207.02	142,316	25,150,653	27,120,026	190.56	7,872,976	45.57
15	RITUXIMAB	28,440	52,613,723	53,037,304	1864.88	33,170	60,378,949	60,911,674	1,836.35	7,765,226	14.76
16	QUETIAPINE FUMARATE	206,853	42,356,058	43,954,847	212.49	248,778	49,131,811	51,160,789	205.65	6,775,753	16.00
17	OXYCODONE HYDROCHLORIDE	1,087,412	35,703,079	40,137,611	36.91	1,306,152	42,153,128	47,892,021	36.67	6,450,049	18.07
18	VENLAFAXINE HYDROCHLORIDE	1,940,639	82,006,292	108,713,231	56.02	2,203,061	88,183,494	119,902,894	54.43	6,177,202	7.53

**Table Za: Pharmaceutical Benefits Scheme – Significant Drugs (incl Dr's Bag) – Sorted by Highest Change to Government Cost – Year End June 2006 to Year End June 2007**  
(continued)

Rank	Drug	Year Ending June 2006				Year Ending June 2007				Change	
		Volume	Govt Cost (\$)	Total Cost(\$)	Average Price (\$)	Volume	Govt Cost (\$)	Total Cost (\$)	Average Price (\$)	Govt Cost (\$)	%
19	CANDESARTAN CILEXETIL	1,137,079	23,319,372	29,375,764	25.83	1,317,408	29,214,705	35,309,561	26.80	5,895,333	25.28
20	LATANOPROST with TIMOLOL MALEATE	6,627	232,022	292,679	44.16	175,140	6,111,426	7,570,711	43.23	5,879,404	2533.99
21	EZETIMIBE	514,861	31,529,685	36,939,746	71.75	629,871	37,228,345	44,145,572	70.09	5,698,660	18.07
22	INSULIN DETEMIR	0	0	0	0.00	13,890	5,593,328	5,818,682	418.91	5,593,328	New
23	TIOTROPIUM BROMIDE MONOHYDRATE	1,025,874	74,100,445	79,677,993	77.67	1,140,278	79,611,499	86,441,011	75.81	5,511,053	7.44
24	DOCETAXEL	8,948	15,813,012	15,955,639	1783.15	10,776	20,234,496	20,425,910	1,895.50	4,421,484	27.96
25	EFALIZUMAB	282	302,437	308,019	1,092.27	4,277	4,469,399	4,558,085	1,065.72	4,166,962	1,377.79
26	INSULIN ASPART	72,512	17,458,058	18,487,130	254.95	92,766	21,624,331	22,996,468	247.90	4,166,274	23.86
27	LERCANIDIPINE HYDROCHLORIDE	978,108	23,801,008	29,738,641	30.40	1,185,730	27,933,582	36,143,280	30.48	4,132,574	17.36
28	AMLODIPINE BESYLATE with ATORVASTATIN CALCIUM	0	0	0	0.00	52,446	4,094,681	4,733,323	90.25	4,094,681	New
29	FENTANYL	83,857	10,002,385	10,509,233	125.32	143,355	13,951,015	14,923,894	104.10	3,948,630	39.48
30	OLANZAPINE	708,783	149,601,053	154,832,750	218.45	740,843	153,342,138	159,247,225	214.95	3,741,085	2.50
31	CAPECITABINE	15,056	10,418,958	10,581,477	702.81	19,952	13,906,333	14,134,709	708.44	3,487,375	33.47
32	FENOFIBRATE	73,646	1,947,561	2,883,236	39.15	210,099	5,402,500	8,078,396	38.45	3,454,939	177.40
33	OXALIPLATIN	17,982	28,965,149	29,245,127	1,626.36	19,884	32,201,052	32,517,406	1,635.36	3,235,903	11.17
34	THYROXINE SODIUM	646,424	8,120,176	10,483,010	16.22	673,674	11,352,221	13,972,541	20.74	3,232,045	39.80
35	BISOPROLOL FUMARATE	122,662	8,026,954	8,870,259	72.31	173,466	10,993,153	12,310,069	70.97	2,966,199	36.95

**Table 7b: Pharmaceutical Benefits Scheme — Significant Drugs (incl Dr's Bag) — Sorted by Highest Volume Change — Year End June 2006 to Year End June 2007**

Rank	Drug	Year Ending June 2006				Year Ending June 2007				Change	
		Volume	Govt Cost (\$)	Total Cost (\$)	Average Price (\$)	Volume	Govt Cost (\$)	Total Cost (\$)	Average Price (\$)	Govt Cost (\$)	%
1	ATORVASTATIN CALCIUM	8,498,869	487,476,160	581,529,412	68.42	9,440,627	529,732,351	641,525,185	67.95	42,256,191	8.67
2	EZETIMIBE with SIMVASTATIN	15,800	2,115,539	2,319,789	146.82	188,615	24,715,372	26,926,292	142.76	22,599,833	1068.28
3	INSULIN GLARGINE	0	0	0	0.00	57,208	22,384,393	23,172,317	405.05	22,384,393	New
4	ETANERCEPT	18,945	35,804,211	36,037,059	1902.19	31,202	55,231,086	55,682,765	1,784.59	19,426,874	54.26
5	RISEDONATE SODIUM and CALCIUM CARBONATE	12,212	560,595	654,822	53.62	381,216	17,187,343	19,952,992	52.34	16,626,748	2965.91
6	ROSUVASTATIN CALCIUM	0	0	0	0.00	273,563	16,562,490	20,731,959	75.78	16,562,490	New
7	RISPERIDONE	346,117	59,497,765	61,959,424	179.01	425,783	73,468,307	76,539,539	179.76	13,970,543	23.48
8	ADALIMUMAB	13,481	25,266,309	25,432,217	1886.52	21,752	37,812,832	38,116,256	1,752.31	12,546,523	49.66
9	ALENDRONATE SODIUM with COLECALCIFEROL	0	0	0	0.00	276,142	12,410,410	14,376,114	52.06	12,410,410	New
10	ROSLIGLITAZONE MALEATE	281,991	19,081,627	21,587,065	76.55	456,491	30,103,140	34,377,811	75.31	11,021,513	57.76
11	CLOPIDOGREL HYDROGEN SULFATE	1,893,034	146,814,709	159,334,336	84.17	2,111,423	157,471,339	173,226,770	82.04	10,656,630	7.26
12	BUPRENORPHINE	33,770	1,094,391	1,316,617	38.99	248,909	9,060,529	10,401,537	41.79	7,966,139	727.91
13	LUMIRACOXIB	0	0	0	0.00	347,301	7,955,715	10,376,659	29.88	7,955,715	New
14	ANASTROZOLE	88,983	17,277,676	18,421,585	207.02	142,316	25,150,653	27,120,026	190.56	7,872,976	45.57
15	RITUXIMAB	28,440	52,613,723	53,037,304	1864.88	33,170	60,378,949	60,911,674	1,836.35	7,765,226	14.76
16	QUETIAPINE FUMARATE	206,853	42,356,058	43,954,847	212.49	248,778	49,131,811	51,160,789	205.65	6,775,753	16.00
17	OXYCODONE HYDROCHLORIDE	1,087,412	35,703,079	40,137,611	36.91	1,306,152	42,153,128	47,892,021	36.67	6,450,049	18.07
18	VENLAFAXINE HYDROCHLORIDE	1,940,639	82,006,292	108,713,231	56.02	2,203,061	88,183,494	119,902,894	54.43	6,177,202	7.53

Table 7b: Pharmaceutical Benefits Scheme — Significant Drugs (incl Dr's Bag) — Sorted by Highest Volume Change — Year End June 2006 to Year End June 2007 (continued)

Rank	Drug	Year Ending June 2006				Year Ending June 2007				Change	
		Volume	Govt Cost (\$)	Total Cost (\$)	Average Price (\$)	Volume	Govt Cost (\$)	Total Cost (\$)	Average Price (\$)	Govt Cost (\$)	%
19	CANDESARTAN CILEXTEL	1,137,079	23,319,372	29,375,764	25.83	1,317,408	29,214,705	35,309,561	26.80	5,895,333	25.28
20	LATANOPROST with TIMOLOL MALEATE	6,627	232,022	292,679	44.16	175,140	6,111,426	7,570,711	43.23	5,879,404	2533.99
21	EZETIMIBE	514,861	31,529,685	36,939,746	71.75	629,871	37,228,345	44,145,572	70.09	5,698,660	18.07
22	INSULIN DETEMIR	0	0	0	0.00	13,890	5,593,328	5,818,682	418.91	5,593,328	New
23	TIOTROPIUM BROMIDE MONOHYDRATE	1,025,874	74,100,445	79,677,993	77.67	1,140,278	79,611,499	86,441,011	75.81	5,511,053	7.44
24	DOCETAXEL	8,948	15,813,012	15,955,639	1783.15	10,776	20,234,496	20,425,910	1,895.50	4,421,484	27.96
25	EFALZUMAB	282	302,437	308,019	1,092.27	4,277	4,469,399	4,558,085	1,065.72	4,166,962	1,377.79
26	INSULIN ASPART	72,512	17,458,058	18,487,130	254.95	92,766	21,624,331	22,996,468	247.90	4,166,274	23.86
27	LERCANIDIPINE HYDROCHLORIDE	978,108	23,801,008	29,738,641	30.40	1,185,730	27,933,582	36,143,280	30.48	4,132,574	17.36
28	AMLODIPINE BESYLATE with ATORVASTATIN CALCIUM	0	0	0	0.00	52,446	4,094,681	4,733,323	90.25	4,094,681	New
29	FENTANYL	83,857	10,002,385	10,509,233	125.32	143,355	13,951,015	14,923,894	104.10	3,948,630	39.48
30	OLANZAPINE	708,783	149,601,053	154,832,750	218.45	740,843	153,342,138	159,247,225	214.95	3,741,085	2.50
31	CAPECITABINE	15,056	10,418,958	10,581,477	702.81	19,952	13,906,333	14,134,709	708.44	3,487,375	33.47
32	FENOFIBRATE	73,646	1,947,561	2,883,236	39.15	210,099	5,402,500	8,078,396	38.45	3,454,939	177.40
33	OXALIPLATIN	17,982	28,965,149	29,245,127	1,626.36	19,884	32,201,052	32,517,406	1,635.36	3,235,903	11.17
34	THYROXINE SODIUM	646,424	8,120,176	10,483,010	16.22	673,674	11,352,221	13,972,541	20.74	3,232,045	39.80
35	BISOPROLOL FUIMARATE	122,662	8,026,954	8,870,259	72.31	173,466	10,993,153	12,310,069	70.97	2,966,199	36.95







