

UPDATE

Update, May 2009

An Official Accompaniment to the Alberta Health and Wellness Drug Benefit List (AHWDBL)

The Expert Committee on Drug Evaluation and Therapeutics (ECDET)

produced by Alberta Blue Cross

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Effective May 1, 2009, Gen-Clozapine (clozapine) (GPM) 25 mg and 100 mg tablets will be designated as interchangeable with the innovator, Clozaril 25 mg and 100 mg tablets. Application of Least Cost Alternative to Gen-Clozapine 25 mg and 100 mg

In April 2009, the Expert Committee on Drug Evaluation and Therapeutics—the advisory committee to the Minister of Health and Wellness on issues that pertain to the Alberta Health and Wellness Drug Benefit List (AHWDBL)—reviewed a resubmission from Genpharm ULC requesting that Gen-Clozapine be deemed interchangeable with the brand name product, Clozaril. Like Clozaril, Gen-Clozapine is available only through a distribution system (GenCAN®) that requires regular hematological testing (weekly, every two weeks, or every four weeks) prior to dispensing the next period's supply. A request to list Gen-Clozapine in an interchangeable grouping with Clozaril was first considered by the Expert Committee in 2003. At that time, Genpharm ULC had successfully demonstrated bioequivalence between the two products, however, the Committee withheld a recommendation of interchangeability pending evidence of successful interaction between clozapine monitoring systems. In the resubmission, the manufacturer provided information supporting the successful interface between GenCAN® and the monitoring and distribution system for Clozaril (CSAN). Based on the information provided, the Expert Committee recommended that Gen-Clozapine be designated as interchangeable with Clozaril and the Least Cost Alternative (LCA) policy applied.

Gen-Clozapine 25 mg and 100 mg tablets will be designated as interchangeable with the innovator, Clozaril 25 mg and 100 mg tablets, effective May 1, 2009 and the LCA pricing policy will be applied effective September 1, 2009. With the application of the LCA pricing policy, savings of over \$2.4 million to all government-sponsored drug programs over the first year of listing may be realized.

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