the DBL report

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An Official Accompaniment to the Alberta Health and Wellness Drug Benefit List (AHWDBL) produced by Alberta Blue Cross

The Expert Committee on Drug Evaluation and Therapeutics (ECDET)

In this issue:

Brief Summary of Drug Review Activities

The Expert Committee on Drug Evaluation and Therapeutics met on September 23, 2010. The Committee considered information regarding 17 Drug Products, including manufacturer submissions and various supplementary assessments.

Seventeen generic Drug Products underwent Expedited Review for listing on the *AHWDBL* effective October 1, 2010. An additional two generic Drug Products met criteria for Expedited Review for listing, effective November 1, 2010.

The following articles provide highlights of recent changes to the *AHWDBL* and other topics of general interest. A complete list of changes, as well as the full *AHWDBL* may be accessed at https://www.ab.bluecross.ca/dbl/publications.html.

Highlights of New Products Added

■ **GLUCAGEN & GLUCAGEN HYPOKIT** (glucagon, rDNA origin) (NNA) **1 mg/vial injections** have been added to the *AHWDBL* as regular benefits. The addition of each of these Drug Products offers a therapeutic advantage in providing an alternative source for glucagon, as well as potential cost savings due to a lower price relative to the currently listed Drug Product, GLUCAGON (LIL).

■ **SANTYL** (collagenase) (HPC) **250 u/g topical ointment** has been added to the *AHWDBL* as a regular benefit. It has a potential therapeutic advantage as a relatively rapid and selective treatment, which is useful in the homecare setting. In addition, **SANTYL** provides a potential cost advantage when considering the total cost of alternative treatment methods.

■ The following products have been added to the *AHWDBL* in Interchangeable (IC) Groupings:

- **AMOXICILLIN** (amoxicillin) (SNS) **250 mg chewable tablet**
- **MINT-TOPIRAMATE** (topiramate) (MPI) **25 mg, 100 mg & 200 mg tablets**
- **GD-ATORVASTATIN** (atorvastatin calcium) (GMD) **10 mg, 20 mg, 40 mg & 80 tablets**

Special Authorization Criteria Change

■ **VALCYTE** (valaganciclovir hydrochloride) (HLR) **450 mg tablet** – The results of the IMPACT study (Humar, et al.) were considered. It was concluded that the risks of a longer duration of **VALCYTE** therapy may be outweighed by the potential prevention of CMV disease in kidney transplant patients. Accordingly, the coverage period has been extended for the prevention of post-transplant CMV disease in kidney transplant patients at risk. Special authorization may now be granted for 200 days.

A complete list of changes, as well as the full AHWDBL may be accessed at https://www.ab.bluecross.ca/dbl/publications.html.
Please refer to the current AHWDBL for explanations of coverage, including a listing of coverage criteria (where applicable).*

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