














## Subsidised Inhalers for Asthma or COPD New Zealand March 2016

SABA – Short-Acting Beta2 Agonists					
SALBUTAMOL Aerosol inhaler 100mcg/puff				TERBUTALINE powder for inhalation 250mcg/dose	SALBUTAMOL nebuliser solution 2.5mg/2.5mL nebule 5mg/2.5mL nebule
					
<b>Respigen</b>	<b>SalAir</b>	<b>Salamol</b>	<b>Ventolin</b>	<b>Bricanyl Turbuhaler</b>	<b>Asthalin</b>

SAMA – Short-Acting Muscarinic Antagonists <span style="float: right;">(see note 3)</span>	
IPRATROPIUM Aerosol inhaler 20mcg/puff	IPRATROPIUM Nebuliser solution 250 mcg/mL 500mcg/2mL
	
<b>Atrovent</b>	<b>Univent</b>

Combination SABA & SAMA <span style="float: right;">(see note 3)</span>	
SALBUTAMOL WITH IPRATROPIUM Aerosol inhaler salbutamol 100 mcg + ipratropium 20 mcg /puff	SALBUTAMOL WITH IPRATROPIUM Nebuliser solution salbutamol 2.5 mg + ipratropium 500 mcg /2.5 mL
	
<b>Duolin</b>	<b>Duolin</b>





Mast Cell Stabilisers		
SODIUM CROMOGLYCATe Powder for inhalation 20mg/dose	SODIUM CROMOGLYCATe Aerosol inhaler 5mg/puff	NEDOCROMIL Aerosol inhaler 2mg/puff
		
<b>Intal Spincaps &amp; Spinhaler</b>	<b>Intal Forte</b>	<b>Tilade</b>

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### LABA – Long Acting Beta2 Agonists

(see note 3)

**For asthma, MUST be used in combination with an inhaled corticosteroid** refer [http://www.nzf.org.nz/nzf\\_1706](http://www.nzf.org.nz/nzf_1706)

SALMETEROL Aerosol inhaler 25mcg/dose	SALMETEROL Powder for inhalation 50mcg/dose	FORMOTEROL (eformoterol) 6mcg/dose powder for inhalation	FORMOTEROL (eformoterol) 12mcg/dose powder for inhalation
			
<b>Meterol</b>	<b>Serevent</b>	<b>Serevent Accuhaler</b>	<b>Oxis Turbuhaler</b>
<p style="color: red;"><b><u>Inhaler presentations are NOT dose equivalent with Accuhaler</u></b> Inhaler - 25mcg salmeterol/puff; Accuhaler - 50mcg salmeterol/dose <b>Aerosol inhaler <u>TWO</u> puffs twice daily Accuhaler <u>ONE</u> inhalation twice daily</b></p>		<p style="color: red;"><b><u>Oxis and Foradil are NOT dose equivalent</u></b> Oxis contains 6mcg/dose Foradil contains 12mcg/capsule for inhalation</p>	





### ‘Ultra’ long-acting beta2 agonist (see note 3)

INDACATEROL powder for inhalation 150 mcg/dose or 300 mcg/dose

<b>Onbrez capsules</b> containing powder for inhalation <b>via Breezhaler device</b>
<p style="color: red;"><b><u>Indication - COPD</u></b> 150mcg OR 300mcg inhaled via Breezhaler ONCE daily</p>

### LAMA – Long Acting Muscarinic Antagonists (see note 3)

**Special Authority required for Tiotropium** see Note 1




No Special Authority required for umeclidinium or glycopyrronium – **script must be endorsed that patient has had COPD confirmed by spirometry**

TIOTROPIUM Powder for inhalation 18mcg/dose	TIOTROPIUM solution for inhalation 2.5mcg/inhalation	UMECLIDINIUM powder for inhalation 62.5mcg/dose	GLYCOPYRRONIUM powder for inhalation 50mcg/dose
			
<b>Spiriva capsule</b> containing powder for inhalation <b>via Handihaler device</b> Adult dose: 18mcg inhaled ONCE daily	<b>Spiriva Respimat</b> Adult dose: 2 puffs (5mcg) ONCE daily	<b>Incruse Ellipta</b> Indication – COPD: ONE dose inhaled ONCE daily	<b>Seebri capsules</b> containing powder for inhalation <b>via Breezhaler device</b> Indication – COPD: 50mcg inhaled ONCE daily







(see note 3)








### Combination LAMA & ‘ultra’ long-acting beta2 agonist (LABA)

**Special Authority required** see Note 2

TIOTROPIUM BROMIDE WITH OLODATEROL solution for inhalation Tiotropium 2.5mcg with olodaterol 2.5mcg	UMECLIDINIUM WITH VILANTEROL powder for inhalation Umeclidinium 62.5 mcg with vilanterol 25 mcg	GLYCOPYRRONIUM WITH INDACATEROL powder for inhalation glycopyrronium 50 mcg with indacaterol 110 mcg
		
<b>Spiolto Respimat</b> Indication COPD: TWO inhalations ONCE daily	<b>Anoro Ellipta</b> Indication COPD: ONE inhalation ONCE daily	<b>Ultibro capsule</b> containing powder for inhalation <b>via Breezhaler device</b> Indication COPD: ONE inhalation ONCE daily

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ICS – Inhaled Corticosteroids					
<b>BECLOMETHASONE dipropionate Aerosol inhaler</b> 50mcg/dose 100mcg/dose 250mcg/dose	<b>BECLOMETHASONE dipropionate Ultrafine particle Aerosol inhaler</b> 50mcg/dose 100mcg/dose	<b>BUDESONIDE powder for inhalation</b> 100mcg/dose 200mcg/dose 400mcg/dose	<b>FLUTICASONE propionate Aerosol inhalers</b> 50mcg/dose 125mcg/dose 250mcg/dose		<b>FLUTICASONE propionate powder for inhalation</b> 50mcg/dose 125mcg/dose 250mcg/dose
					
<b>Beclazone</b>	<b>QVar</b>	<b>Pulmicort Turbuhaler</b>	<b>Floair</b>	<b>Flixotide</b>	<b>Flixotide Accuhaler</b>
<p><b><u>Beclazone and QVar are NOT dose equivalent:</u></b>                      QVar is approximately twice as potent as standard beclomethasone dipropionate (Beclazone)</p>		<p>Budesonide is approximately the same potency as standard beclomethasone dipropionate (Beclazone)</p>	<p><b><u>Fluticasone and beclomethasone dipropionate are NOT dose equivalent</u></b>                      Fluticasone is approximately twice as potent as standard beclomethasone dipropionate (Beclazone)   <b><u>Inhaler presentations are NOT dose equivalent with Accuhaler</u></b></p>		

(see note 3)		<b>Combination ICS &amp; LABA</b>			Fully subsidised - Special Authority removed						
<b>BUDESONIDE WITH FORMOTEROL Aerosol inhaler</b>		<b>BUDESONIDE WITH FORMOTEROL powder for inhalation</b>		<b>FLUTICASONE PROPIONATE &amp; SALMETEROL Aerosol inhaler</b>		<b>FLUTICASONE PROPIONATE &amp; SALMETEROL powder for inhalation</b>		<b>Combination ONCE daily ICS &amp; LABA</b>			
budesonide 100 mcg & 6 mcg formoterol /dose	budesonide 200 mcg & 6 mcg formoterol /dose	budesonide 100 mcg & 6 mcg formoterol /dose	budesonide 200 mcg & 6 mcg formoterol /dose	budesonide 400 mcg & formoterol 12 mcg/dose	50mcg fluticasone propionate & 25mcg salmeterol/puff	125mcg fluticasone propionate & 25mcg salmeterol/puff	<b>Not subsidised:</b> 250mcg fluticasone propionate & 25mcg salmeterol/puff	100mcg fluticasone propionate & 50mcg salmeterol/dose	250mcg fluticasone propionate & 50mcg salmeterol/dose	Fluticasone furoate 100mcg & vilanterol 25 mcg <b>(Asthma and COPD)</b>	Fluticasone furoate 200mcg & vilanterol 25 mcg <b>(Asthma only)</b>
											
<b>Vannair</b>	<b>Symbicort Turbuhaler</b>		<b>RexAir</b>	<b>Seretide</b>	<b>Seretide Accuhaler</b>		<b>Breo Ellipta</b>				
<p><b>Budesonide is half as potent as fluticasone</b>                      Vannair® 100/6 is equivalent to Symbicort Turbuhaler®100/6.  <b>Usual dose 1 or 2 inhalations twice daily</b></p>		<p><b>Note 12mcg formoterol/dose</b>  <b>Maximum 1 dose twice daily</b></p>	<p><b><u>Inhaler presentations are NOT dose equivalent with Accuhaler</u></b>                      Inhalers contain 25mcg salmeterol - Accuhalers contain 50mcg salmeterol                      Inhaler: <b>TWO</b> puffs twice daily; Accuhaler: <b>ONE</b> inhalation twice daily                      If extra inhaled corticosteroid is needed, change to the higher strength presentation or add separate inhaled corticosteroid</p>				<p><b>Fluticasone furoate 100mcg ONCE daily</b>                      is approx. equivalent to <b>fluticasone propionate 250mcg TWICE daily</b></p>				

## Subsidised Inhalers for Asthma or COPD New Zealand March 2016

### Note 1:

#### Tiotropium Special Authority –

- SA interchangeable between Handihaler and Respimat but NOT Spiolto (combination with olodaterol) which requires a separate Special Authority (see Note 2)
- renewal no longer requires repeat spirometry
- tiotropium is not subsidised if patient receiving treatment with either glycopyrronium or umeclidinium

#### INITIAL APPLICATION

Applications only from a general practitioner or relevant specialist. Approvals valid for 2 years.

- To be used for the long-term maintenance treatment of bronchospasm and dyspnoea associated with COPD
- In addition to standard treatment, the patient has trialled a short acting bronchodilator dose of at least 40 µg ipratropium q.i.d for one month
- The patient's breathlessness Grade 4 or Grade 5
- Actual FEV1 must be below 60% of predicted
- Patient is not a smoker or patient is a smoker and has been offered smoking cessation counselling
- the patient has been offered annual influenza immunisation

#### RENEWAL

Patient is compliant with the medication and patient has experienced improved COPD symptom control (prescriber determined)

### Note 2:

#### Long-Acting Muscarinic Antagonists with 'Ultra' Long-Acting Beta-Adrenoceptor Agonists

- Tiotropium & Olodaterol
- Glycopyrronium & Indacaterol
- Umeclidinium & Vilanterol

#### INITIAL APPLICATION

Applications from any relevant practitioner. Approvals valid for 2 years.

Patient has been stabilised on a long acting muscarinic antagonist and the prescriber considers that the patient would receive additional benefit from switching to a combination product

#### RENEWAL

Applications from any relevant practitioner. Approvals valid for 2 years.

Patient is compliant with the medication and patient has experienced improved COPD symptom control (prescriber determined)

## Subsidised Inhalers for Asthma or COPD New Zealand March 2016

**Note 3 - Caution – there is risk of duplication of therapy given the range of inhalers now available**

Class	Medication	SABA	SAMA	SABA/SAMA	LABA	LAMA	LAMA/LABA	ICS/LABA	Mast cell stabiliser
SABA	Salbutamol Terbutaline	<b>X</b>	✓	✓	✓	✓	✓	✓	✓
SAMA	Ipratropium	✓	<b>X</b>	<b>X</b>	✓	<b>X</b>	<b>X</b>	✓	✓
SABA / SAMA	Salbutamol & Ipratropium	✓	<b>X</b>	<b>X</b>	✓	<b>X</b>	<b>X</b>	<b>X</b>	✓
LABA	Salmeterol Formoterol Indacaterol Vilanterol (only available in combination) Olodaterol (only available in combination)	✓	✓	✓	<b>X</b>	✓	<b>X</b>	<b>X</b>	✓
LAMA	Tiotropium Glycopyrronium Umeclidinium	✓	<b>X</b>	<b>X</b>	✓	<b>X</b>	<b>X</b>	✓	✓
LAMA / LABA	Tiotropium & Olodaterol Glycopyrronium & Indacaterol Umeclidinium & Vilanterol	✓	<b>X</b>	<b>X</b>	<b>X</b>	<b>X</b>	<b>X</b>	<b>X</b>	✓
ICS / LABA	Budesonide & Formoterol Fluticasone propionate & Salmeterol Fluticasone furoate & vilanterol	✓	✓	✓	<b>X</b>	✓	<b>X</b>	<b>X</b>	✓
Mast Cell Stabilisers	Sodium cromoglycate Nedocromil	✓	✓	✓	✓	✓	✓	✓	<b>X</b>