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			
	TRAK Salamol CFC-Free CPC-Free C		Nonulin 11	COVID-10 COV	PRESCRIPTION DATA MEDICINE ASTHALIN' SON CHANGE AND AND A COMMAND SON CHANGE AND AND A COMMAND SON CHANGE AND AND AND AND AND SON CHANGE AND AND AND SON CHANGE AND AND SON CHANGE AND AND SON CHANGE SON		
Respigen	SalAir	Salamol	Ventolin	Bricanyl Turbuhaler	Asthalin		

SAMA – Short-Acting Muscarinic Antagonists (see note 3)					
IPRATROPIUM Aerosol inhaler 20mcg/puff	IPRATROPIUM Nebuliser solution 250 mcg/mL 500mcg/2mL				
THE CONTROL OF THE CO	PRESCRIPTION ONLY MEDICINE UNIVENT UNIVEN UNIVENT UNIVENT UNIVENT UNIVENT UNIVENT UNIVENT UNIVENT UNIVEN UNIVENT UNIVEN UNIV				
Atrovent	Univent				

Combination SABA & SAMA (see note 3)				
SALBUTAMOL WITH IPRATROPIUM	SALBUTAMOL WITH IPRATROPIUM			
Aerosol inhaler	Nebuliser solution			
salbutamol 100 mcg +	salbutamol 2.5 mg +			
ipratropium 20 mcg /puff	ipratropium 500 mcg /2.5 mL			
CLOINS CHARLES AND THE COLUMN COLUMNS CHARLES CHARLES	PRESCRIPTION ONLY MEDICINE DUOLING ALBUTAMOL (as subphase) 2-5mg BRATROPIUM BROWNES Salbutamol 2-5mg Ipratropium 500mcg Fex 2.5ml SOLUTION FOR INHALATION NOT FOR INJECTION			
Duolin	Duolin			

Mast Cell Stabilisers							
SODIUM CROMOGLYCATE Powder for inhalation 20mg/dose	SODIUM CROMOGLYCATE Aerosol inhaler 5mg/puff	NEDOCROMIL Aerosol inhaler 2mg/puff					
DDIUN CMOGEID 2d mg	SCOTOGO CO SECONO MAIN FORE SCOTOGO MAIN FORE SC	Tilladd North					
Intal Spincaps & Spinhaler	Intal Forte	Tilade					

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 **FORMOTEROL** (eformoterol) **SALMETEROL SALMETEROL FORMOTEROL** (eformoterol) 6mcg/dose powder for Aerosol inhaler Powder for inhalation 12mcg/dose powder for inhalation 25mcg/dose 50mcg/dose inhalation Foradil capsule containing powder for **Serevent Accuhaler** Meterol **Oxis Turbuhaler** Serevent inhalation via Aerolizer device Inhaler presentations are NOT dose equivalent with Accuhaler Oxis and Foradil are NOT dose equivalent

'Ultra' long-acting beta2
agonist (see note 3)

INDACATEROL

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



Onbrez capsules containing powder for inhalation **via Breezhaler device**

Indication - COPD

150mcg OR 300mcg

inhaled via Breezhaler ONCE daily

Special Authority required for Tiotropium see Note 1

Inhaler - 25mcg salmeterol/puff; Accuhaler - 50mcg salmeterol/dose

Aerosol inhaler TWO puffs twice daily Accuhaler ONE inhalation twice daily

LAMA – Long Acting Muscarinic Antagonists (see note 3)

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

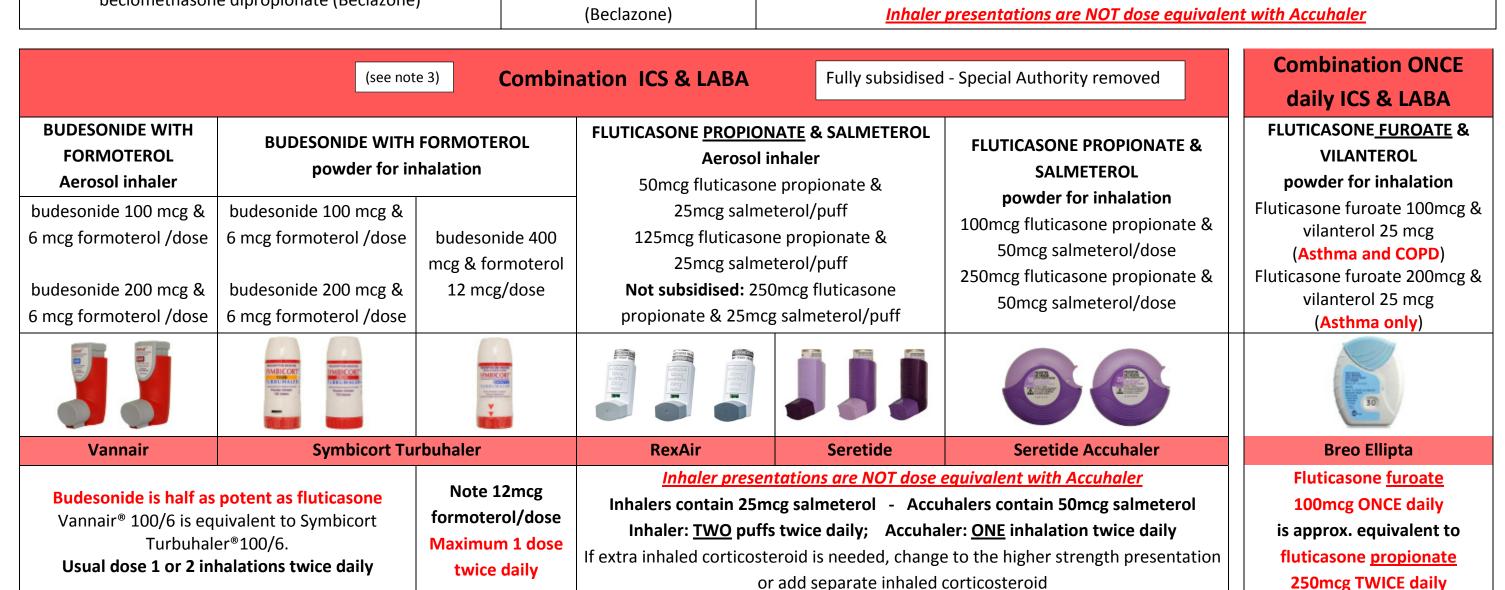
		———— Antagonis	script must be endorsed tr	script must be endorsed that patient has had COPD confirmed by spirometry			
TIOTROPIUM		TIOTROPIUM	UMECLIDINIUM	GLYCOPYRRONIUM			
Powder for inhalation 18mcg/dose solution for inhalation		solution for inhalation 2.5mcg/inhalation	powder for inhalation 62.5mcg/dose	powder for inhalation 50mcg/dose			
	HandiHaler Ti 01	Complete Solidor Management Soli	16	brendries			
	Spiriva capsule containing powder for	Spiriva Respimat	Incruse Ellipta	Seebri capsules containing powder for inhalation			
inhalation via Handihaler device		Adult dose: 2 puffs (5mcg) ONCE daily	Indication – COPD: ONE dose inhaled ONCE daily	via Breezhaler device			
	Adult dose: 18mcg inhaled ONCE daily	Addit dose. 2 parts (Sineg) office daily	maleution Cor B. ONE dose initiated office daily	Indication – COPD: 50mcg inhaled ONCE daily			

Oxis contains 6mcg/dose

Foradil contains 12mcg/capsule for inhalation

(see note 3) Comb	ination LAMA & 'ultra' long-acting beta2 agonist	(LABA) Special Authority required see Note 2		
TIOTROPIUM BROMIDE WITH OLODATEROL	UMECLIDINIUM WITH VILANTEROL	GLYCOPYRRONIUM WITH INDACATEROL		
solution for inhalation	powder for inhalation	powder for inhalation		
Tiotropium 2.5mcg with olodaterol 2.5mcg	Umeclidinium 62.5 mcg with vilanterol 25 mcg	glycopyrronium 50 mcg with indacaterol 110 mcg		
Date House		ultibro broadcas		
Spiolto Respimat Indication COPD: TWO inhalations ONCE daily	Anoro Ellipta Indication COPD: ONE inhalation ONCE daily	Ultibro capsule containing powder for inhalation via Breezhaler device Indication COPD: ONE inhalation ONCE daily		

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



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)

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	X	✓	✓	✓	✓	✓	✓	✓
SAMA	Ipratropium	✓	X	X	✓	X	X	✓	✓
SABA / SAMA	Salbutamol & Ipratropium	✓	X	X	✓	X	X	X	✓
LABA	Salmeterol Formoterol Indacaterol Vilanterol (only available in combination) Olodaterol (only available in combination)	✓	✓	✓	X	√	X	X	✓
LAMA	Tiotropium Glycopyrronium Umeclidinium	✓	х	Х	✓	X	X	✓	✓
LAMA / LABA	Tiotropium & Olodaterol Glycopyrronium & Indacaterol Umeclidinium & Vilanterol	✓	х	X	X	X	X	X	✓
ICS / LABA	Budesonide & Formoterol Fluticasone propionate & Salmeterol Fluticasone furoate & vilanterol	✓	✓	✓	X	√	X	X	✓
Mast Cell Stabilisers	Sodium cromoglycate Nedocromil	✓	✓	✓	✓	✓	✓	✓	X