

BC PharmaCare Drug Information

The drugs below are being considered for possible coverage under the B.C. PharmaCare program. PharmaCare is a government-funded drug plan that helps British Columbians with the cost of eligible prescription drugs and specific medical supplies. For more information on PharmaCare, visit [Ministry of Health - PharmaCare](#).

PharmaCare reviews each drug for treating a specific illness or medical condition (known as an “indication”). If a decision is made to cover the drug, it will be only for that illness or condition.

In some cases, PharmaCare may cover a drug only for people who have the illness or condition and have not responded to other drugs used to treat that illness or condition.

For more information on PharmaCare’s drug coverage review process, see the last page of this information sheet.

Information about the drugs	
Generic name (scientific name)	<p>In alphabetical order:</p> <ol style="list-style-type: none"> 1. atomoxetine 2. dextroamphetamine 3. guanfacine 4. lisdexamfetamine 5. methylphenidate 6. mixed amphetamine salts
Brand name	<p>Brand names correspond with generic names above:</p> <ol style="list-style-type: none"> 1. Strattera® 2. Dexedrine® and Dexedrine® Spansules® 3. Intuniv XR® 4. Vyvanse® 5. Biphentin®, Concerta®, Ritalin® and Ritalin® SR 6. Adderall XR®
Manufacturer	<p>Manufacturers correspond with the drugs above:</p> <ol style="list-style-type: none"> 1. Lilly and generics 2. Paladin and generics 3. Shire 4. Shire 5. Purdue Pharma, Janssen, Novartis Pharmaceuticals and generics 6. Shire and generics
Indication	Attention deficit hyperactivity disorder (ADHD)

Information about the drugs	
Have the drugs been reviewed by the Common Drug Review (CDR)? (see the note below this table.)	Some of the drugs were reviewed by the CDR as individual drug submissions. For more information about the CDR's review of atomoxetine (Strattera [®]), guanfacine (Intuniv XR [®]), lisdexamfetamine (Vyvanse [®]) and mixed amphetamine salts (Adderall XR [®]), you can Search the CDR Reports .
Public input start date	Wednesday May 4, 2016
Public input closing date	Wednesday June 1, 2016 AT MIDNIGHT
How are the drugs taken?	These drugs are taken orally (by mouth).
How often are the drugs taken?	<ul style="list-style-type: none"> • atomoxetine (Strattera[®]) is taken either as a single dose once per day or as divided doses twice per day. • dextroamphetamine (Dexedrine[®]) can be taken at intervals of 4 to 6 hours. • dextroamphetamine sustained release (Dexedrine[®] Spansules[®]) is taken once per day. • guanfacine (Intuniv XR[®]) is taken once per day. • lisdexamfetamine (Vyvanse[®]) is taken once per day. • methylphenidate controlled-release (Biphentin[®]) is taken once per day. • methylphenidate extended-release (Concerta[®]) is taken once per day. • methylphenidate (Ritalin[®]) can be taken 2 or 3 times per day. • methylphenidate sustained-release (Ritalin[®] SR) can be taken every 8 hours. • mixed amphetamine salts (Adderall XR[®]) is taken once per day.

Information about the drugs	
General drug and/or drug study information	<p>ADHD is a disorder involving symptoms of inattention, hyperactivity and/or impulsivity. Symptoms appear before the age of 12 and may continue into adulthood in some people.</p> <p>Dextroamphetamine, lisdexamfetamine, methylphenidate and mixed amphetamine salts are known as stimulant medications. Atomoxetine and guanfacine are not considered to be stimulant medications. Both stimulant and non-stimulant medications may help to reduce the symptoms of ADHD.</p> <p>Studies looked at the following:</p> <ul style="list-style-type: none"> • Symptom response (for example, inattention, hyperactivity and impulsivity) • Effect on social, academic or occupational performance • Caregiver satisfaction • Quality of life • Time to onset of effectiveness • Duration of effectiveness • Bad reactions to the drugs • Serious bad reactions to the drugs • Patients leaving the trial due to bad reactions • Misuse of the drugs
Other considerations	None

Note:

The Common Drug Review (CDR) is a national organization that reviews drugs on behalf of Canadian public sector plans when manufacturers want to have the jurisdictions provide coverage for the drugs. For detailed information on B.C. PharmaCare's drug review process, including the role of the CDR in that process, see [The Drug Review Process in B.C. - Overview](#).

Cost of the drug under review compared to other drugs used to treat the same indication			
generic name (Brand Name) of Drug Comparator	PharmaCare Status (if and how the drug is already covered)	Usual Dose	Annual Cost of Therapy
atomoxetine (Strattera [®] , generics)	Non-Benefit	Children (up to 70 kg): 1.2 mg/kg/day	\$1,459 (calculated based on 50 kg patient)
		Children (over 70 kg), adults: 80 mg per day	\$1,575
dextroamphetamine (Dexedrine [®] , generics)	Regular Benefit	2.5 mg to 40 mg per day	\$102 to \$1,635

Cost of the drug under review compared to other drugs used to treat the same indication			
generic name (Brand Name) of Drug Comparator	PharmaCare Status (if and how the drug is already covered)	Usual Dose	Annual Cost of Therapy
dextroamphetamine sustained-release (Dexedrine [®] Spansules [®])	Regular Benefit	10 mg to 40 mg per day	\$411 to \$1,646
guanfacine (Intuniv XR [®])	Non-Benefit	1 mg to 7 mg per day	\$1,183 to \$3,646
lisdexamfetamine (Vyvanse [®])	Non-Benefit	30 mg to 60 mg per day	\$1,281 to \$1,911
methylphenidate controlled-release (Biphentin [®])	Non-Benefit	Children: 10 mg to 60 mg per day	\$283 to \$1,289
		Adults: 10 mg to 80 mg per day	\$283 to \$1,701
methylphenidate extended-release (Concerta [®] , generics)	Limited Coverage	Children: 18 mg to 54 mg per day	\$563 to \$910
		Adults: 18 mg to 72 mg per day	\$563 to \$1,472
Methylphenidate (Ritalin [®] , generics)	Regular Benefit	10 mg to 60 mg per day	\$32 to \$193
methylphenidate sustained- release (Ritalin [®] SR, generics)	Regular Benefit	20 mg to 60 mg per day	\$111 to \$334
mixed amphetamine salts (Adderall XR [®] , generics)	Non-Benefit	10 mg to 30 mg per day	\$818 to \$1,211

The Drug Review Process in B.C.

A manufacturer submits a request to the Ministry of Health (Ministry).

An independent group called the [Drug Benefit Council \(DBC\)](#) gives advice to the Ministry. The DBC looks at:

- whether the drug is safe and effective
- advice from a national group called the [Common Drug Review \(CDR\)](#)
- what the drug costs and whether it is a good value for the people of B.C.
- ethical considerations involved with covering or not covering the drug
- input from physicians, patients, caregivers, patient groups and drug submission sponsors

The Ministry makes PharmaCare coverage decisions by taking into account:

- the existing PharmaCare policies, programs and resources
- the evidence-informed advice of the DBC
- the drugs already covered by PharmaCare that are used to treat similar medical conditions
- the overall cost of covering the drug

For more information about the B.C. Drug Review Process, visit: [The Drug Review Process in B.C. - Overview](#).

This document is intended for information only.

It does not take the place of advice from a physician or other qualified health care provider.