

# BC PharmaCare Drug Information

The drug below is 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 drug	
Generic name (scientific name)	<b>dexamethasone</b>
Brand name	<b>Ozurdex®</b>
Manufacturer	Allergan Inc.
Indication	Diabetic Macular Edema
Has the drug been reviewed by the Common Drug Review (CDR)? (see the note below this table.)	Yes For more information about the CDR’s review of dexamethasone (Ozurdex®), you can <a href="#">Search the CDR Reports</a> .
Public input start date	Wednesday January 24, 2018
Public input closing date	Wednesday February 21, 2018 <b>AT MIDNIGHT</b>
How is the drug taken?	Ozurdex is administered as an intravitreal (into the eye) injection.
How often is the drug is taken?	Quarterly or biannually, as needed.

Information about the drug	
General drug and/or drug study information	<p>Diabetic Macular Edema (DME) is a swelling of the light-sensitive layer at the back of the eye called the macula. DME is a condition that affects some people with diabetes.</p> <p>Ozurdex is used to treat vision loss due to DME, if the patient has already had an operation for cataracts.</p> <p>Ozurdex works by reducing swelling of the macula which helps to lessen or prevent more damage to the macula. Ozurdex also works by reducing the inflammation of the back of the eye.</p> <p>Studies looked at the following to determine if Ozurdex is safe and effective for the treatment of DME:</p> <ul style="list-style-type: none"> <li>• Best Corrected Visual Acuity (BCVA) mean change from baseline</li> <li>• The difference in the proportion of patients achieving a <math>\geq 15</math> letter improvement</li> <li>• Average change from baseline in central retinal thickness (CRT)</li> <li>• Vision-related outcomes evaluated using the National Eye Institute Visual Functioning Questionnaire 25 (NEI-VFQ-25)</li> <li>• Bad reactions</li> <li>• Serious bad reactions</li> <li>• Bad reactions of special interest-elevated intraocular (within the eye) pressure, cataracts, and blepharitis (inflammation of the eyelid)</li> </ul>
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 per Eye
dexamethasone implant (Ozurdex)	Non-Benefit for Retinal Vein Occlusion (RVO)  Under Review for Diabetic Macular Edema (DME)	700 mcg intravitreally, as needed	\$1,400 to \$5,600 (1 to 4 injections)
<b><i>Vascular Endothelial Growth Factor (VEGF) inhibitors for the treatment of retinal conditions</i></b>			

<b>Cost of the drug under review compared to other drugs used to treat the same indication</b>			
<b>generic name (Brand Name) of Drug Comparator</b>	<b>PharmaCare Status (if and how the drug is already covered)</b>	<b>Usual Dose</b>	<b>Annual Cost of Therapy per Eye</b>
aflibercept (Eylea®)	Coverage provided through the <i>Provincial Retinal Diseases Treatment Program</i> for wet Age-Related Macular Degeneration (AMD), DME and RVO.	2 mg intravitreally once every four weeks for first 5 consecutive doses, then 1 injection every 8 weeks	First year: \$12,762 (9 injections) Subsequent years: \$8,508 to \$9,926 (6 to 7 injections)
ranibizumab (Lucentis®)	Coverage provided through the <i>Provincial Retinal Diseases Treatment Program</i> for wet AMD, DME and RVO.	0.5 mg intravitreally monthly until maximum visual acuity achieved (i.e., stable for 3 consecutive months). Resume if vision loss recurs.	Maximum: \$18,900 (12 injections) Observed in trial: \$11,025 in the first year (7 injections) and \$4,725 to \$6,300 in subsequent years (3 to 4 injections)
<b>Other VEGF inhibitors – not indicated for Diabetic Macular Edema (DME)</b>			
bevacizumab (Avastin®)	Coverage provided through the <i>Provincial Retinal Diseases Treatment Program</i> for wet AMD, DME and RVO.	1.25 mg intravitreally every four to six weeks	\$4,631 to \$6,690 (9 to 13 injections)
<b>Other corticosteroid therapies – not indicated for DME</b>			
triamcinolone acetonide (Kenalog®-40, generics)	Regular Benefit	4 mg intravitreally once every 3-4 months	Up to \$25 to \$34 (3 to 4 injections)
triamcinolone acetonide (Triesence™)	Non-Benefit	1 to 4 mg intravitreally every 3-4 months	\$125 to \$167 (3 to 4 injections)
<b>Other treatments</b>			
Laser photocoagulation	Coverage through the <i>Provincial Retinal Diseases Treatment Program</i> for AMD.	As needed when retreatment criteria met; no more than every 12 weeks	\$183 to \$914 (1 to 5 treatments)

### 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.