

BC PharmaCare Drug Information

The drug below is being considered for coverage under the BC PharmaCare program. PharmaCare is a government-funded drug plan that helps B.C. residents with the cost of eligible prescription drugs and medical supplies. For more information about PharmaCare, visit the [PharmaCare website](#).

PharmaCare reviews each drug for treating a specific illness or medical condition (also called an “indication”). If PharmaCare decides to cover a drug, that coverage applies only to the indication(s) specified. In some cases, PharmaCare covers a drug only for people who have not responded to other drugs that treat the same indication.

More information about the PharmaCare drug review process is provided on the last page of this document.

Drug information	
Generic name (scientific name)	Ruxolitinib cream
Brand name	Opzelura®
Manufacturer	Incyte Biosciences Canada Corporation
Indication	Topical treatment of nonsegmental vitiligo in adult and pediatric patients 12 years of age and older.
Has the drug been reviewed by CDA-AMC, or will CDA-AMC be reviewing it? (See note below.)	Yes For more information about the CDA-AMC Reimbursement Review (CRR) of ruxolitinib (Opzelura), Search the CDA-AMC Reports .
Public input start date	Wednesday February 26, 2025
Public input closing date	Tuesday, March 25, 2025, at 11:59 pm
How is the drug taken?	Ruxolitinib cream is applied topically (to the skin)
How often is the drug taken?	Ruxolitinib cream is applied twice per day up to a maximum of 10% of body surface area (BSA) for each application.

Drug information	
General drug and/or drug study information	<p>Ruxolitinib cream is being reviewed for the topical treatment of nonsegmental vitiligo in adult and pediatric patients 12 years of age and older. Nonsegmental vitiligo is an autoimmune disease that causes white or pink (depigmented) patches of skin on both sides of the body.</p> <p>Ruxolitinib cream works by blocking certain enzymes called Janus kinases (JAKs) in the skin. Ruxolitinib cream reduces the body's attack on pigment-producing cells. This allows the skin to restore pigment and achieve its normal color.</p> <p>Studies looked at the following:</p> <ul style="list-style-type: none"> • Proportion of patients achieving an improvement of at least 75% in Facial Vitiligo Area Scoring Index (F-VASI) scores (F-VASI75) at week 24 • Proportion of patients achieving an improvement of at least 90% in F-VASI scores (F-VASI90) at week 24 • Proportion of patients achieving an improvement of at least 50% in F-VASI scores (T-VASI50) • Proportion of patients achieving a Vitiligo Noticeability Scale (VNS) score of "4- A lot less noticeable" or "5-No longer noticeable" at week 24 • Health-related quality of life (HRQoL) as measured by changes from baseline to week 24 in Vitiligo-specific quality of life (VitiQoL) scores • Changes from baseline to week 24 in Modified Fitzpatrick Skin Type Body Surface Area (F-BSA) scores • Bad reactions • Serious bad reactions • Patients leaving the trial due to bad reactions • Bad reactions of special interest, such as application site reactions.
Other considerations	None

Note:

CDA-AMC ([Canada's Drug Agency-L'Agence des Médicaments du Canada](#)) is a national organization that reviews drugs on behalf of Canadian public sector plans when drug manufacturers want those plans to provide coverage for the drug. For detailed information about the PharmaCare drug review process, including the role of the CDA-AMC Reimbursement Review (CRR) in that process, visit [How PharmaCare Decides Which Drugs to Cover](#).

Generic Name (Brand Name) of Drug Comparator	PharmaCare Status (if and how the drug is already covered)	Dosage Form	Usual Dose	Annual Cost of Therapy ^a or Cost Per Gram or mL of Topical Treatment or Per Treatment
ruxolitinib (Opzelura)	Under Review	100 g aluminum tube	Apply to affected area twice daily, up to a maximum of 10% of body surface area (BSA) for each application	Annual cost: \$30,504 ^b
Topical corticosteroids				
betamethasone dipropionate (generic)	Regular Benefit, Subject to LCA	0.05% Cream 0.05% Lotion 0.05% Ointment	Apply a thin layer to affected area twice daily.	Cream: \$0.22/g Lotion: \$0.22/g Ointment: \$0.24/g
betamethasone valerate (generic)	Regular Benefit, Subject to LCA	0.05% Cream 0.1% Cream 0.1% Ointment 0.1% Lotion	Apply a thin layer to affected area twice daily.	0.05% Cream: \$0.06/g 0.05% Ointment: \$0.08/g 0.1% Cream: \$0.11/g 0.1% Ointment: \$0.13 0.1% Lotion: \$0.09
clobetasol propionate (generic)	Regular Benefit, Subject to LCA	0.05 % Cream 0.05 % Ointment	Apply a thin layer to affected area twice daily for two months on and two months off.	Cream: \$0.28/g Ointment: \$0.28/g
	Non-Benefit	0.05 % Lotion		Lotion: \$0.20/g ^c

^a All prices as per PharmaCare Formulary, unless otherwise specified. Weight-based dosing assumes an average weight of 60 kg.

^b Price as per CDA-AMC Pharmacoeconomic Review Report for ruxolitinib (Opzelura) plus 5% markup.

^c Price as per CDA-AMC Pharmacoeconomic Review Report for ruxolitinib (Opzelura)

Generic Name (Brand Name) of Drug Comparator	PharmaCare Status (if and how the drug is already covered)	Dosage Form	Usual Dose	Annual Cost of Therapy ^a or Cost Per Gram or mL of Topical Treatment or Per Treatment
mometasone furoate (generic)	Regular Benefit, Subject to LCA	0.1% Cream 0.1% Ointment 0.1% Lotion	Apply thin layer to affected area once or twice daily for two months on and two months off.	Cream: \$0.68/g Ointment: \$0.65/g Lotion: \$0.42/mL
Topical calcineurin inhibitors				
pimecrolimus (Elidel)	Non-Benefit for nonsegmental vitiligo Limited Coverage for the treatment of eczema	1% Cream	Apply to affected area twice daily.	\$3.14/g
tacrolimus (Protopic)	Non-Benefit for nonsegmental vitiligo Limited Coverage for the treatment of eczema	0.03% Ointment 0.10% Ointment	Apply to affected area twice daily.	0.03%: \$3.34/g 0.1%: \$3.58/g
Systemic corticosteroids				
methotrexate (generic)	Regular Benefit, Subject to LCA	2.5 mg tablet	Once weekly	Annual cost: \$56
prednisone (Winpred, generic)	Regular Benefit, Subject to LCA	1 mg, 5 mg, 50 mg Tablet	0.3 mg/kg once daily	Annual cost: \$63
Phototherapy				
Ultraviolet light therapy	Non-Benefit	NA	Administered 3 to 5 times per week	\$7.85 per treatment

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 [Canada's Drug Agency-L'Agence des médicaments du Canada \(CDA-AMC\)](#)
- what the drug costs and whether it is a good value to the citizens of B.C.
- ethical considerations related to 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:

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

For more information about the drug review process in B.C., visit: the [How PharmaCare decides which drugs to cover](#).

This document provides information only.

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