

**Information Sheet for Health Professionals**  
**MOVE INTO PART 3 EXCEPTION DRUG STATUS (EDS)**  
**PROTON PUMP INHIBITORS (PPI's)**  
**FOR PHARMACARE AND FAMILY SERVICES CLIENTS**

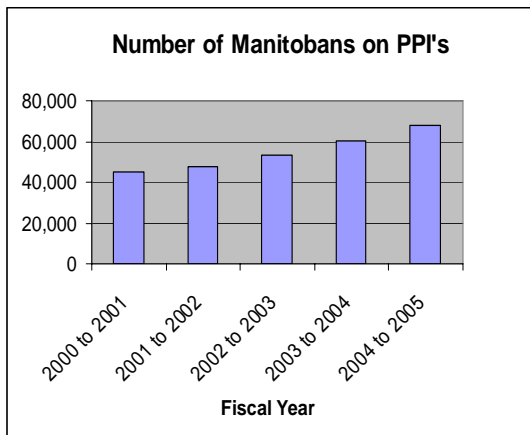
*Affected PPI's include the drugs lansoprazole, omeprazole, pantoprazole and rabeprazole*

**Introduction and Background**

Drug costs nationally have been the fastest growing component of health sector expenses. Manitoba Provincial Drug Programs expenditures have grown by 18% in the last few fiscal years. Pharmacare expenditures for 2004-2005 were \$194.4M. This trend is expected to continue as our population ages and new drugs are introduced.

Proton Pump Inhibitor (PPI) utilization has risen dramatically over the last five years. Drug Program expenditures for these medications totalled approximately \$15.5M in 2003-2004.

Effective March 13, 2006, all Pharmacare and Family Services Drug Program clients being started on a PPI will require Part 3 Exception Drug Status (EDS) approval to receive drug program benefits.



Patients identified by Manitoba Health as currently receiving benefit coverage for a PPI have been granted Part 3 EDS approval until January 15, 2007.

Savings achieved with the move of PPI's into Part 3 EDS will be available to fund significant new therapies that will be coming in the future and will help to ensure the viability of the Pharmacare Program

**Proton Pump Inhibitors**

The Pharmacare and Family Services Drug Programs list the following Proton Pump Inhibitors (PPI's) as Part 2 benefits:

omeprazole (Losec®, Apo-Omeprazole®), pantoprazole (Pantoloc®), lansoprazole (Prevacid®) and rabeprazole (Pariet®).

Clinical evidence has indicated that there are no significant differences between PPIs and that these drugs are similar in effect and safety.<sup>1,2</sup> Therefore, to be eligible for EDS benefit coverage for Pantoloc 40 mg, Prevacid 15 mg or 30 mg it will be required that both the lower cost products, omeprazole and rabeprazole, have been tried and failed or were not tolerated.

<sup>1</sup> Canadian Consensus Conference on the Management of GERD, Can J Gastroenterol, Vol. 19, No. 1, Jan 2005 Gastroenterology.

<sup>2</sup> Drug Effectiveness Review Project, Drug Class Review on PPI's, Oregon Health & Science University.

### Criteria for Part 3 EDS:

The new criteria for coverage of Proton Pump Inhibitors effective March 13, 2006 are:

- For Gastroesophageal Reflux Disease (GERD): (up to a 3-year approval)  
In treatment of symptoms of gastroesophageal reflux disease.  
NOTE: Patients with non-erosive GERD could potentially be reduced to step-down therapy with an H2 antagonist depending on symptom resolution. Patients may also be trialled by dosing on alternate days or by using a lower dose PPI e.g. Pariet 10mg –one tablet per day instead of 2 tablets per day.
- For Gastro-Protection for NSAID's: (up to a 1-year approval)  
For use in the prevention of NSAID induced ulcers in patients who continue on a non-selective NSAID therapy and who have any one of the following risk factors:
  - History of peptic or duodenal ulcer
  - Age >65 years
  - Concomitant warfarin use
  - Concomitant corticosteroid use

Coverage is renewable for patients if discontinuation of offending agents or replacement with less damaging alternatives is not feasible.

- For Peptic Ulcer Treatment (approved for 8 weeks of therapy)
- For H. pylori Eradication (approved for 7-14 days)

**Note: Apo-Omeprazole® is not indicated in the treatment of H. pylori infection.**

- For PPIs in Zollinger-Ellison Syndrome and Barrett's Esophagus (up to a 3-year approval)

Physicians making a request to the Exception Drug Status (EDS) program for benefit coverage for PPI's can contact the program at:

phone: (204) 788-6388  
1-800-557-4303

fax: (204) 942-2030  
1-877-208-3588

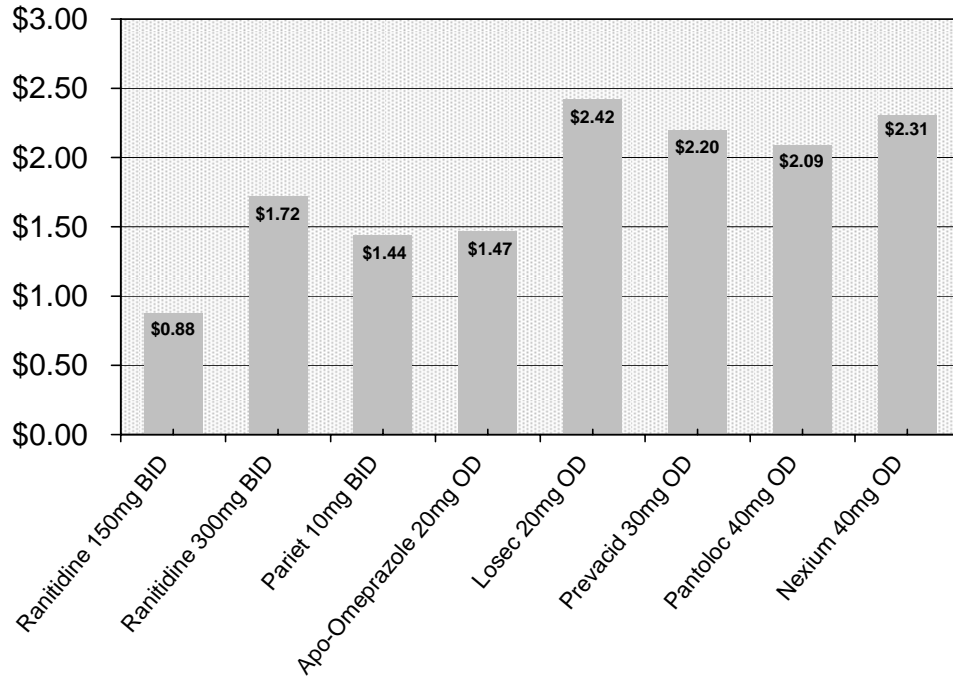
mail: Exception Drug Status Program  
Manitoba Health  
300 Carlton Street  
Winnipeg MB R3B 3M9

<b>Cost Comparison of Various Drugs used in Acid Suppression</b>			
<b>DRUG</b>	<b>STRENGTH</b>	<b>PRICE</b>	<b>BENEFIT STATUS AS OF MARCH 13, 2006</b>
Ranitidine (Zantac and generics)	150mg	\$0.44	Part 1 (regular benefit)
Ranitidine (Zantac and generics)	300mg	\$0.86	Part 1 (regular benefit)
Rabeprazole (Pariet)	10mg 2 x 10mg	\$0.72 \$1.44	Part 3 EDS Part 3 EDS
Omeprazole (Apo-Omeprazole)	20mg	\$1.47	Part 3 EDS
Omeprazole (Losec)	10mg 20mg	\$1.93 <sup>1</sup> \$2.42 <sup>2</sup>	Part 3 EDS Part 3 EDS
Lansoprazole (Prevacid)	15mg 30mg	\$2.20 \$2.20	Part 3 EDS Part 3 EDS
Pantoprazole (Pantoloc)	20mg 40mg	\$1.87 \$2.09	Not covered Part 3 EDS
Esomeprazole (Nexium)	40mg	\$2.31	Not covered

<sup>1</sup> Coverage is only for pediatric patients unable to take the 20 mg dosage.

<sup>2</sup> PDP will consider this eligible up to the price of generic omeprazole.

## Cost per Day



**For more information please contact:**

Exception Drug Status Program  
Manitoba Health  
300 Carlton Street  
Winnipeg MB R3B 3M9

Telephone:  
(204) 788-6388 or 1-800-557-4303

<http://www.gov.mb.ca/health/mdbif/index>