

Ontario Drug Benefit Formulary/Comparative Drug Index

Edition 43

Summary of Changes – February 2024
Effective February 29, 2024

Drug Programs Policy and Strategy Branch
Health Programs and Delivery Division
Ministry of Health

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New Single Source Products

Generic Name: ESTRADIOL HEMIHYDRATE & PROGESTERONE

DIN/PIN	Product Name	Strength	Dosage Form	Mfr	DBP
02505223	Bijuva	1mg & 100mg	Cap	KNT	0.8962

New Multi-Source Products

Where applicable, please consult the respective brand reference product's drug profile on the ODB e-Formulary for the details of the Limited Use (LU) code and criteria, and/or any associated Therapeutic Notes (TN).

DIN/PIN	Product Name	Strength	Dosage Form	Mfr	DBP
02535319	Accel-Ondansetron ODT	4mg	ODT	ACC	2.5450
02535327	Accel-Ondansetron ODT	8mg	ODT	ACC	3.8840

(Interchangeable with Zofran ODT – LU)

DIN/PIN	Product Name	Strength	Dosage Form	Mfr	DBP
02497743	Auro-Cephalexin	25mg/mL	Pd for Oral Susp	AUR	0.1535/mL

(Interchangeable with Keflex – GB)

DIN/PIN	Product Name	Strength	Dosage Form	Mfr	DBP
02528436	Jamp Cephalexin Suspension	25mg/mL	Pd for Oral Susp	JPC	0.1535/mL
02528444	Jamp Cephalexin Suspension	50mg/mL	Pd for Oral Susp	JPC	0.2573/mL

(Interchangeable with Keflex – GB)

DIN/PIN	Product Name	Strength	Dosage Form	Mfr	DBP
02508893	Jamp Escitalopram	10mg	Tab	JPC	0.3109
02508907	Jamp Escitalopram	20mg	Tab	JPC	0.3310

(Interchangeable with Cipralex – GB)

New Multi-Source Products (Continued)

DIN/PIN	Product Name	Strength	Dosage Form	Mfr	DBP
02479532	Mint-Atorvastatin	80mg	Tab	MIN	0.2342

(Interchangeable with Lipitor – GB)

New Off-Formulary Interchangeable (OFI) Products

DIN/PIN	Product Name	Strength	Dosage Form	Mfr	Unit Cost
02511738	Daptomycin for Injection	500mg/Vial	Pd for Inj Sol-Vial Pk	JUN	162.3500/Vial

(Interchangeable with Cubicin)

DIN/PIN	Product Name	Strength	Dosage Form	Mfr	Unit Cost
02535335	Esomeprazole	20mg	DR Tab	SAI	1.8690

(Interchangeable with Nexium)

DIN/PIN	Product Name	Strength	Dosage Form	Mfr	Unit Cost
02531798	Jamp Ticagrelor	60mg	Tab	JPC	1.2844

(Interchangeable with Brilinta)

DIN/PIN	Product Name	Strength	Dosage Form	Mfr	Unit Cost
02537427	Mint-Finasteride	1mg	Tab	MIN	1.1453

(Interchangeable with Propecia)

New Off-Formulary Interchangeable (OFI) Products (Continued)

DIN/PIN	Product Name	Strength	Dosage Form	Mfr	Unit Cost
02240433	Perichlor	0.12%	Oral Rinse	PEN	0.0253/mL

(Interchangeable with Peridex)

DIN/PIN	Product Name	Strength	Dosage Form	Mfr	Unit Cost
02538415	Sandoz Desvenlafaxine	50mg	ER Tab	SDZ	2.3409
02538423	Sandoz Desvenlafaxine	100mg	ER Tab	SDZ	2.3409

(Interchangeable with Pristiq)

Revision of Limited Use Criteria

Revisions to LU criteria for products with the LU codes below that contain lansoprazole, omeprazole magnesium, pantoprazole sodium and combination products containing lansoprazole, clarithromycin and amoxicillin.

Revised Clinical Criteria

Code 295

H. pylori-positive Peptic Ulcers

For the treatment of H. pylori-positive peptic ulcers where H. pylori is documented, by serology, urea breath test or endoscopy, for a course of up to 14 days in combination with antimicrobial therapy. Retreatment of H. pylori-positive peptic ulcers must be documented by persistent H. pylori infection on urea breath test or endoscopy.

Maximum duration: 14 days (for retreatment, a four-week period must elapse since the end of the previous treatment).

LU Authorization Period: 1 year

Code 306

For the treatment of H. pylori-positive peptic ulcers where H. pylori is documented, by serology, breath test or endoscopy, for a course of up to 14 days.

Maximum duration: 14 days.

LU Authorization Period: 1 year

Revision of Limited Use Criteria (Continued)

Code 307

For the retreatment of H. pylori-positive peptic ulcers where H. pylori recurrence or persistence is documented, by breath test or endoscopy, for a course of up to 14 days.

Maximum duration: 14 days (after a four-week period has elapsed since the end of the previous treatment)

Retreatment decisions should be based upon positive symptoms and positive endoscopy or positive urea breath test. Retreatment should not be based on a positive serology test, as serology tests may remain positive indefinitely. An alternative antibiotic regimen is recommended when initial therapy fails due to concerns of antimicrobial resistance.

LU Authorization Period: 1 year

Manufacturer Name Changes

DIN/PIN	Product Name	Strength	Dosage Form	Current Mfr	New Mfr
00363839	Buscopan	20mg/mL	Inj Sol	SAC	SCO
00363812	Buscopan	10mg	Tab	SAC	SCO
01926853	Flagyl	500mg	Cap	ODN	SAC

Product Name and Manufacturer Name Changes

DIN/PIN	Current Product Name	Current Mfr	New Product Name	New Mfr	Strength	Dosage Form
02126222	Apo-Ipravent Inhalation Solution	APX	AA-Ipravent	AAP	250mcg/mL	Inh Sol-20mL Pk
02493268	Apo-Risedronate DR	APX	AA-Risedronate DR	AAP	35mg	DR Tab
01990403	PMS-Amantadine HCL	PMS	PDP-Amantadine Hydrochloride Capsules	PEN	100mg	Cap
02229323	PMS-Desonide	PMS	PDP-Desonide	PEN	0.05%	Oint

Changes in Generic Name and Product Strength Displayed

Current Displayed Generic Name: budesonide & formoterol fumarate dihydrate & glycopyrronium

New Displayed Generic Name: budesonide & glycopyrronium (glycopyrronium bromide) & formoterol fumarate dihydrate

DIN/PIN	Product Name	Dosage Form	MFR	Current Strength	New Strength
02518058	Breztri Aerosphere	Metered Dose Inh-120 Dose Pk	AZC	170mcg & 5.3mcg & 7.7mcg/Act	160mcg & 7.2mcg & 5mcg/Act

Drug Benefit Price (DBP) Changes

DIN/PIN	Product Name	Strength	Dosage Form	Mfr	DBP/Unit Price
02536390	Dexlansoprazole	30mg	DR Cap	ALH	2.1655
02536404	Dexlansoprazole	60mg	DR Cap	ALH	2.1655
00342106	Teva-Cephalexin 125	25mg/mL	Pd for Oral Susp	TEV	0.1535/mL
00342092	Teva-Cephalexin 250	50mg/mL	Pd for Oral Susp	TEV	0.2573/mL
02298376	Teva-Risedronate	5mg	Tab	TEV	1.7567

Discontinued Products

(Some products will remain on Formulary for six months to facilitate depletion of supply)

DIN/PIN	Product Name	Strength	Dosage Form	Mfr
02236859	Agrylin	0.5mg	Cap	TAK
02242785	Mobicox	7.5mg	Tab	BOE
02242786	Mobicox	15mg	Tab	BOE
02367289	Viramune XR	400mg	ER Tab	BOE

Delisted Products

DIN/PIN	Product Name	Strength	Dosage Form	Mfr
02493780	Acarbose Tablets	50mg	Tab	STR
02493799	Acarbose Tablets	100mg	Tab	STR
02495805	Cyclosporine Capsules	25mg	Cap	STR
02495821	Cyclosporine Capsules	50mg	Cap	STR
02495813	Cyclosporine Capsules	100mg	Cap	STR
02453797	Entecavir Tablets	0.5mg	Tab	STR
02504006	Oseltamivir Phosphate Capsules	30mg	Cap	STR
02504014	Oseltamivir Phosphate Capsules	45mg	Cap	STR
02504022	Oseltamivir Phosphate Capsules	75mg	Cap	STR
00664553	PMS-Docusate Calcium	240mg	Cap	PMS
02479540	Rivastigmine Patch 5	9mg/5 Sq Cm	Trans Patch	STR
02479559	Rivastigmine Patch 10	18mg/10 Sq Cm	Trans Patch	STR
02479567	Rivastigmine Patch 15	13.3mg/24hr	Trans Patch	STR

