The Drug Utilisation Sub-Committee (DUSC) of the Pharmaceutical Benefits Advisory Committee (PBAC) held its 102nd meeting on the 3 – 4 June 2021.

DUSC has a national focus of excellence in collecting, analysing and interpreting data on the utilisation of medicines in Australia for use by the PBAC. Review of the utilisation of medicines is an essential management tool in facilitating the objectives of the National Medicines Policy.

The PBAC is also committed to understanding consumer perspectives and integrating them into consideration of medicines and vaccines. Consumers are able to provide their views about medicine utilisation reviews to the PBAC via a [web interface](http://www.health.gov.au/internet/main/publishing.nsf/Content/PBAC_online_submission_form).

## Submissions to the PBAC

DUSC noted that nine category 1, 14 category 2 and three standard re-entry submissions had been received for the July 2021 meeting of PBAC. DUSC provided detailed advice to the PBAC on projected usage and financial cost for the submissions where there was high cost, uncertain utilisation, first medicine in class or quality use of medicines concerns. The agenda for the July 2021 PBAC meeting can be found on the [PBS website](http://www.pbs.gov.au/pbs/industry/listing/elements/pbac-meetings/agenda/March-2020-PBAC-Meeting).

## Utilisation of PBS Listed Medicines

DUSC regularly examines utilisation of Pharmaceutical Benefits Scheme (PBS) items when there is at least 24 months of prescription data available and where DUSC or the PBAC has highlighted items of interest. When an analysis of utilisation is to be undertaken sponsors are notified, provided with a copy of the report and an opportunity to comment prior to the DUSC meeting. Reviews to be considered by the PBAC are also published in the [PBAC meeting agenda](http://www.pbs.gov.au/pbs/industry/listing/elements/pbac-meetings/agenda/March-2020-PBAC-Meeting). All reports, Sponsor comments and DUSC assessment of the reports are subsequently provided to the PBAC.

DUSC reviewed the utilisation of the following PBS medicines in June 2021:

**Evolocumab for heterozygous familial hypercholesterolaemia**

DUSC reviewed the use of evolocumab for the treatment of heterozygous familial hypercholesterolaemia. The submission was based on familial hypercholesterolaemia; both homozygous or heterozygous. In 2020, 2,693 patients were supplied at least one prescription for familial hypercholesterolaemia and, of these, 923 patients were supplied their first PBS-subsidised evolocumab prescription for this indication. Evolocumab is most frequently supplied as a dose of 280 mg or 420 mg in quantities of two or three 140 mg/mL pen devices. In 2020, 88% (17,181) of evolocumab prescriptions and 95% (43,675) of the total quantity supplied for familial hypercholesterolaemia were for the 140 mg/mL pen device.

DUSC requested that the report be provided to the PBAC.

**Guanfacine for ADHD**

DUSC reviewed the use of ADHD medications with particular attention to guanfacine. Over the seven year period 2014-2020 the number of prevalent patients treated with R/PBS medicines for ADHD had risen at a yearly average growth rate of 12%. From 2014-2017 the yearly average growth rate was 10%, whereas from 2018-2020 the yearly growth rate was 16%. The substantial increase since 2018 was due to the listing of guanfacine in September 2018. The most commonly used medicine in terms of prevalent patients was the modified-release formulation of methylphenidate.For all age groups more males than females were treated. For >6 year olds, 76% of prevalent patients were boys and for 6-12 year 72% of prevalent patients were boys. Children aged 6-12 years accounted for 43% of patients supplied ADHD medications while adults aged over 19 years accounted for 33%.

The listing of guanfacine in September 2018 had contributed towards an increase in the use of ADHD medicines. The listing of guanfacine had not resulted in substitution of ADHD medicines and thus a corresponding reduction in the use of other ADHD medications. There were 18,030 and 25,580 prevalent R/PBS patients treated with guanfacine in 2019 and 2020 respectively.

DUSC considered that it was unclear whether there was overdiagnosis of ADHD in children and adolescents. DUSC noted the harms associated with untreated ADHD and that the decision to use medication for this condition was influenced by several factors, including the attitude of parents.

DUSC requested that the report be provided to the PBAC.

**Somatropin**

DUSC reviewed the use of somatropin for growth hormone therapy. In 2018, 2,174 patients were dispensed 6,373 scripts. In 2019, 2,717 patients were dispensed 8,595 somatropin scripts. In 2020 3,178 patients were dispensed 12,439 scripts. Paediatric patients were most commonly treated with somatropin for short stature and slow growth whilst adult patients were most commonly treated with somatropin for severe growth hormone deficiency.

DUSC requested that the report be provided to the PBAC.

## Upcoming Utilisation Analysis of PBS Listed Medicines

Utilisation of the following medicines has been selected for consideration at future DUSC meetings.

**Predicted versus Actual Utilisation Analysis**

* Golimumab for the treatment of non-radiographic axial spondyloarthritis.
* Nivolumab in combination with ipilimumab as the first line treatment of Stage IV clear cell variant renal cell carcinoma.
* Pembrolizumab for the treatment of locally advanced or metastatic urothelial cancer.
* Tolvaptan for the treatment of autosomal dominant polycystic kidney disease.

**Analysis of single or multiple medicines in a treatment area**

* Medicines for the treatment or prevention of HIV, including a predicted versus actual utilisation analysis of bictegravir + emtricitabine + tenofovir alafenamide and a predicted versus actual utilisation analysis of dolutegravir + rilpivirine.
* Medicines for the treatment of multiple sclerosis, including a predicted versus actual utilisation analysis of cladribine.

An outcome statement will be available following each meeting of DUSC. For further information, please contact the DUSC Secretariat at DUSC@health.gov.au.

Professor Christopher Etherton-Beer

Chair

Drug Utilisation Sub-Committee