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05-103865-479

Provincial and Territorial Deputy Ministers of Health Provincial and Territorial Drug Program Managers Deans of Pharmacy Registrars of Provincial Medical and Pharmacy Associations Industry and Consumer Associations Regulatory and Health Professional Associations Other Interested Parties

Dear Sir/Madam:

Re: Food and Drug Regulations - Project 1439 - Schedule F

This letter is to provide an opportunity for comment on the proposed addition of 5 medicinal ingredients to Part I of Schedule F to the *Food and Drug Regulations* to the *Food and Drugs Act*.

Schedule F is a list of medicinal ingredients, the sale of which is controlled under sections C.01.041 to C.01.049 of the *Food and Drug Regulations*. Part I of Schedule F lists ingredients that require a prescription for human use and for veterinary use. Part II of Schedule F lists ingredients that require a prescription for human use, but do not require a prescription for veterinary use if so labelled or if in a form unsuitable for human use.

The Drug Schedule Status Committee determined the necessity for prescription status for each of the medicinal ingredients in this proposed amendment on the basis of established and publicly available criteria. These criteria include, but are not limited to, concerns related to toxicity, pharmacological properties and therapeutic applications.



Description of the medicinal ingredients:

- 1. Adalimumab is a synthetic protein that binds to tumor necrosis factor alpha and blocks its inflammatory effects in rheumatoid arthritis. It reduces inflammation, tenderness and swelling of joints in patients with rheumatoid arthritis, and slows or prevents the progressive destruction of joints in those patients. Adalimumab is indicated for patients who have had inadequate response to disease-modifying anti-rheumatic drugs, and is intended for use under the guidance and supervision of a practitioner. Adalimumab may have undesirable or severe side effects at normal therapeutic dosage levels.
- 2. **Cinacalcet** *and its salts* is a calcimimetic. It activates calcium receptors and decreases the secretion of parathyroid hormone. Cinacalcet is used to treat high serum calcium levels in patients with secondary over-activity of the parathyroid gland resulting from chronic kidney failure. Individualized instructions and/or direct supervision by a practitioner are required. The patient may also require treatment with other drugs or routine laboratory monitoring. Cinacalcet may have undesirable or severe side effects at normal therapeutic dosage levels. It has not been in clinical use long enough to establish the pattern or frequency of long-term toxic effects in humans.
- 3. **Eletriptan** *and its salts* is a serotonin receptor agonist used for the acute treatment of severe migraine headaches. Eletriptan should only be used where a clear diagnosis of migraine has been established and it should not be used to prevent migraine headaches. Eletriptan can cause serious side effects in patients with history or risk factors of heart disease or stroke. Safe use of eletriptan therefore requires individualized instruction and assessment by a practitioner.
- 4. **Frovatriptan** *and its salts* is a serotonin receptor agonist and is used for the acute treatment of severe migraine headaches. Frovatriptan can cause serious side effects in patients with history or risk factors of heart disease or stroke. Safe use of frovatriptan therefore requires individualized instruction and assessment by a practitioner.
- 5. **Voriconazole** is a triazole antifungal agent used to treat life-threatening fungal infections in immune-compromised patients following chemotherapy or organ transplant. Voriconazole is indicated for the treatment of a serious, often fatal fungal infection, which, due to the presence of flu like symptoms, could be easily mis-diagnosed by the public. Voriconazole may cause undesirable or severe side effects at normal therapeutic dosage levels. There is a narrow margin of safety between therapeutic and toxic doses. Therefore, administration of voriconazole requires direct practitioner supervision.

The degree of regulatory control afforded by Schedule F (prescription drug) status coincides with the risk factors associated with each medicinal ingredient. Oversight by a practitioner is necessary to ensure that adequate risk/benefit information is available before the drug containing the medicinal ingredient is administered, and to ensure that the drug therapy is properly monitored.

Alternatives

Any alternatives to the degree of regulatory control recommended in this amendment would need to be established through additional scientific information and clinical experience.

No other alternatives were considered.

Benefits and Costs

The amendment will impact on the following sectors:

Public

Prescription access to drug products containing these medicinal ingredients would benefit Canadians by decreasing the opportunities for improper use and by ensuring the guidance and care of a practitioner.

• Health Insurance Plans

Drug products for human use containing medicinal ingredients listed on Schedule F may be covered by both provincial and private health care plans.

Provincial Health Care Services

The provinces may incur costs to cover practitioners' fees for services. However, the guidance and care provided by the practitioners would reduce the need for health care services that may result from improper use of drug products for human use that contain medicinal ingredients listed on Schedule F. The overall additional costs for health care services should therefore be minimal.

Compliance and Enforcement

This amendment will not alter existing compliance mechanisms under the provisions of the *Food and Drugs Act* and the *Food and Drug Regulations* enforced by the Health Products and Food Branch Inspectorate.

Consultation

The manufacturers affected by this proposed amendment were made aware of the intent to recommend these medicinal ingredients for inclusion on Schedule F during the review of the drug submission.

Direct notice of this regulatory proposal was provided to provincial and territorial ministers of health, medical and pharmacy licensing bodies, and industry, consumer and professional associations on November 19, 2004 with a 30-day comment period. This initiative was also posted on the Therapeutic Products Directorate (TPD) website. One comment was received, and it was in support of the proposed amendment.

The process for this further consultation with stakeholders is described in the Memorandum of Understanding (MOU) to streamline regulatory amendments to Schedule F, which came into effect on February 22, 2005. The MOU is posted on the Health Canada website.

This letter is being sent by email to stakeholders and is also being posted on the Health Canada website and the "Consulting Canadians" website with a **75-day** comment period.

Any comments regarding this proposed amendment should be addressed to Karen Ash, Policy Division, Policy Bureau, Therapeutic Products Directorate, 1600 Scott Street, Holland Cross, Tower 'B', 2nd Floor, Address Locator 3102C5, Ottawa, Ontario, K1A 1B6, by facsimile at 613-941-6458 or by email to karen_ash@hc-sc.gc.ca within **75** days of the date of posting of this letter on the Health Canada website.

Final Approval

In accordance with the MOU process, it is anticipated that this amendment will proceed directly from this consultation to consideration for final approval by the Governor in Council, approximately 6 to 8 months from the date of posting of this letter on the Health Canada website. If approved by the Governor in Council, publication in the *Canada Gazette*, Part II, would follow. The amendment would come into force on the date of registration.

Yours sincerely,

Original Signed by

Diane Gorman Assistant Deputy Minister