

SCHEDULE OF PHARMACEUTICAL BENEFITS EFFECTIVE 1 SEPTEMBER 2017 - ERRATUM

This Erratum corrects the entry for Pegvisomant for the following:

1. The description for item codes **11167R** and **11179J** should read Pegvisomant 10 mg injection [30 vials] (&) inert substance diluent [30 syringes], 1 pack.
2. The description for item codes **11172B** and **11173C** should read Pegvisomant 15 mg injection [30 vials] (&) inert substance diluent [30 syringes], 1 pack.
3. The description for item codes **11174D** and **11181L** should read Pegvisomant 20 mg injection [30 vials] (&) inert substance diluent [30 syringes], 1 pack.
4. The description for item codes **11166Q** and **11177G** should read Pegvisomant 20 mg injection [1 vial] (&) inert substance diluent [1 syringe], 1 pack.
5. A clinical criterion under the Initial treatment restriction for the item codes of **11166Q, 11174D, 11172B, 11167R, 11177G, 11181L, 11173C** and **11179J** should read 'Patient must **have** an age- and sex-adjusted insulin-like growth factor 1 (IGF-1) concentration greater than 1.3 times upper limit of normal (ULN).'
6. A note associated with the Initial restriction for the items codes of **11166Q, 11174D, 11172B, 11167R, 11177G, 11181L, 11173C** and **11179J** should read:
'No increase in the maximum quantity or number of units may be authorised for the loading dose.'
7. A clinical criterion under the Continuing treatment restriction for the item codes of **11174D, 11172B, 11167R, 11181L, 11173C** and **11179J** should read
'Patient must have previously received PBS-subsidised treatment with this drug for this condition.'
8. Under the Continuing treatment and Grandfathering restrictions for the item codes **11174D, 11172B, 11167R, 11181L, 11173C** and **11179J**, a statement of 'No increase in the maximum number of repeats may be authorised' is to be applied.