

26 July 2024

PHARMAC
PO Box 10254
The Terrace
Wellington 6143

Sent via email to: consult@pharmac.govt.nz

Dear Sir/Madam,

Re: Proposal to fund fosfomycin in the community for urinary tract infections and zonisamide for some types of epilepsy

The Pharmacy Guild of New Zealand (Inc.) (the Guild) is a national membership organisation representing community pharmacy owners. We provide leadership on all issues affecting the sector and advocate for the business and professional interests of community pharmacy.

Our proposal focuses on Guild members' concerns around general economic, funding and supply issues. Guild submissions should not be taken as any endorsement of, or any attempt to comment on, issues of safety, efficacy, or individual patient utility.

We strongly support the proposal to fund fosfomycin for uncomplicated urinary tract infections and zonisamide for some types of epilepsy in the community. The funding of these medicines should address current gaps in the treatment of these illnesses in community settings and offer significant benefits for patients and the healthcare system, by positively enhancing patient outcomes, reducing healthcare costs, and providing essential treatment options for those with unmet medical needs.

Fosfomycin for uncomplicated urinary tract infections

Urinary tract infections (UTIs) are among the most commonly occurring human infections and there is now evidence that there are increasing rates of resistance to commonly used antibiotics for the treatment of uncomplicated UTIs in the community. Given this emergence, widening access for patients to receive fosfomycin via community pharmacy pursuant to a prescription will allow patients with uncomplicated UTIs to receive effective treatment without the need for hospitalisation.

Oral fosfomycin has shown to demonstrate a high treatment efficacy in the treatment of uncomplicated UTIs and a single dose of oral fosfomycin is convenient for patients. The Anti-Infective Advisory Committee has indicated that around 80% of cases could be successfully treated in the community, highlighting the efficacy and suitability of fosfomycin for this purpose.

Enabling the community-based treatment of uncomplicated UTIs with fosfomycin would in turn reduce hospital admissions, leading to considerable cost savings for the healthcare system. This shift aligns with the goals of reducing hospital burden and providing patient-centric care.

We would like to express concern about the one-month validity of the special authority for the funding of fosfomycin. Given the potential delay in obtaining bacteriological culture results, a longer validity period would ensure patients receive timely and adequate care given culture

turnaround times. Furthermore, for patients with contraindications or documented intolerance to other common antibiotics, e.g., trimethoprim, nitrofurantoin, amoxicillin, cefalexin, amoxicillin with clavulanic acid, and norfloxacin, fosfomycin may be a critical ongoing treatment option. We recommend that the special authority for the funding of fosfomycin for these patients is not restricted to one month but is evergreen to minimise administrative burdens and costly re-testing procedures, as well as suffering of those patients who cannot be treated until the results have been received.

Additionally, we urge Pharmac to support the availability of the Conporto network system for community pharmacies to allow pharmacists to view a patient history of past treatments from anywhere in the motu and to verify patient eligibility for the fosfomycin special authority criteria.

Zonisamide for certain types of epilepsy

Epilepsy is a chronic condition, and lack of adequate control can have important consequences, including injury with seizure, an inability to drive or work in certain occupations, affects education, and results in reduced quality of life.

The proposal to fund zonisamide offers a valuable treatment option for individuals with specific epilepsy types, particularly DEE and refractory focal epilepsy, and we support community pharmacy being able to assist in providing eligible patients additional treatment options so that they are able to manage their seizures.

Currently, some patients receive zonisamide through Pharmac's Named Patient Pharmaceutical Assessment (NPPA) pathway. This process involves extensive paperwork and time-consuming administrative tasks, which can be a barrier to the timely access to this product and efficient patient care. The proposed changes will streamline the process for patients to access zonisamide, allowing pharmacists to focus more on the care of their patients rather than administrative duties.

If you have any questions about our response, please contact our Senior Advisory Pharmacists, Martin Lewis (martin@pgnz.org.nz, 04 802 8218) or Cathy Martin (cathy@pgnz.org.nz, 04 802 8214).

Yours sincerely,



Nicole Rickman

General Manager – Membership and Professional Services