

Fluticasone propionate 50 microgram (FP 50mcg) prescribing restrictions



On 1st April, [restrictions](#) were imposed by the Pharmaceutical Benefits Advisory Committee (PBAC) which removed GPs' ability to initiate PBS-subsidised prescriptions of fluticasone propionate 50microgram (Flixotide Junior®, Axotide Junior®). For patients under 6 years, an Authority became required (Telephone/ Online). This was limited to patients whose fluticasone was initiated by a respiratory physician or paediatrician. For children aged 6 and older, FP 50mcg was delisted from the PBS entirely.

RACGP [wrote](#) to PBAC with our concerns and requested a reversal of this decision. RACGP also combined advocacy efforts with Asthma Australia and other medical groups in a letter to the Federal Health Minister.

PBAC [acted on our requests](#) announcing easing of restrictions which are expected to come into effect from July 2023 (exact date to be advised). Repeats on your patient's current prescription dated before 1st April 2023 can still be used.

April-June 2023*

- Requires initiation by a respiratory physician or a paediatrician. Then GPs can continue to prescribe under PBS. Authority Required (telephone or electronic)
- Indicated only for the treatment of asthma
- Restricted to patients aged under 6 years

July 2023 onwards*

- Removal of criterion that treatment must be initiated by a respiratory physician or paediatrician
- Authority Required (STREAMLINED)
- Patients who start and are stabilised on treatment before 6 years of age can continue PBS access beyond 6 years of age

* exact date to be advised when known

During this interim period, we would like to help you understand your options.

For children under 6 years of age, the options are limited, especially if your patient cannot afford a private script.

Options include:

- Rapid access and assessment by paediatrician or respiratory specialist
- Private prescription (prices vary between \$11 and \$28 depending on the pharmacy)

You might support your patients to endure this cost knowing it will be short lived.

Children 6 years and older for whom inhaled corticosteroid (ICS) is indicated can be switched to an alternative PBS reimbursed medicine or consider private prescription of FP 50mcg. If children are switched to an alternative ICS from FP 50mcg, it is recommended to complete a clinical review in 4-8 weeks, since switching inhaled preventer medicine, even within class, can sometimes result in changed asthma control.

Equivalent dosing to FP 50mcg twice daily	Children 6 years and older
Budesonide, 100 micrograms per actuation powder for inhalation, 200 actuations	100 micrograms Twice a day
Beclometasone dipropionate 50 micrograms per actuation breath activated inhalation, 200 actuations	50 micrograms Twice a day
Beclometasone dipropionate 50 micrograms per actuation inhalation, 200 actuations	50 micrograms Twice a day
Ciclesonide 80 micrograms per actuation inhalation, 120 actuations	80 micrograms Once daily

A summary of PBS-subsidised or private script ICS options for both aged groups is provided below:

Age	Private script	PBS
6 years or older	Fluticasone propionate 50mcg	Beclometasone 50mcg Ciclesonide 80mcg Budesonide 100 mcg
Under 6 years	Fluticasone propionate 50mcg	Fluticasone Propionate 50mcg (initiated via specialist) Beclometasone 50mcg (from 5 yo)

Asthma Australia can help answer your patients' questions. They can call 1800 ASTHMA (1800 278 462) or visit asthma.org.au

[A fact sheet has also been developed to assist.](#)



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