

Addendum

to

ACERH Research Report No.7*

Original statement: Entecavir is subsidised only as a second line therapy for patients who have failed lamivudine therapy (p.22).

Correction: Entecavir has been available on the Pharmaceutical Benefits Scheme (PBS) for the first line treatment of chronic hepatitis B patients since 1 December 2006.

Reference:

<http://www.health.gov.au/internet/main/publishing.nsf/Content/pbac-outcomes-and-public-summary-documents>

Original statement: Adefovir may be used in combination with lamivudine as first line therapy (p.22).

Correction: Adefovir was never approved by the PBS as first line therapy, either as monotherapy or combination therapy. Up until 2008, adefovir could be used as monotherapy in lamivudine-resistant patients. The PBS restriction for adefovir was changed in 2008 to allow for concurrent use with lamivudine in lamivudine-resistant patients being treated for CHB.

Reference:

<http://www.health.gov.au/internet/main/publishing.nsf/Content/pbac-psd-adefov-07>

Additional reference, section 3.3.2:

A paper by Arnold *et al* (2008)[#] was not included in the literature review because it did not appear in searches at the time of preparation of the literature review.

* Butler JRG, Korda RJ, Watson KJR and Watson DAR, "The impact of chronic hepatitis B in Australia: Projecting mortality, morbidity and economic impact", Australian Centre for Economic Research on Health, Research Report No.7, September 2009.

Arnold E, Yuan Y, Iloeje U and Cook G, "Cost-effectiveness analysis of entecavir versus lamivudine in the first-line treatment of Australian patients with chronic hepatitis B", *Applied Health Economics and Health Policy*, Vol.6 No.4, December 2008, pp.231-46 (appeared April 2009).