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Reference: 2021/06/30/EDP/01

## **NOTICE: INTERFERON BETA-1a**

Interferon beta was approved for inclusion on the Tertiary and Quaternary Essential Medicines List (EML) for relapsing remitting multiple sclerosis in January 2020. At the time, both interferon beta-1a [Avonex®; Litha Pharma (Pty) Ltd] and interferon beta-1b [Betaferon®; Bayer (Pty) Ltd] were awarded on the National Contract HP04-2020ONC: Supply and delivery of oncology and immunological agents to the Department of Health for the period 01 July 2020 to 30 June 2022.

As of 1 July 2022, a new national contract, HP04-2022ONC, for the period 01 July 2022 to 30 June 2024 will take effect. As per this updated contract, Rebif 44® [Merck (Pty) Ltd] has been awarded as the interferon beta-1a product and will replace Avonex®. Interferon beta-1b, in the form Betaferon®, remains available as per this updated contract.

Due to the differences in strengths, dosing and routes of administration between these interferon beta-1a products, this circular outlines comparative dosing to facilitate changing patients from product to another as well as highlighting differences in adverse effects (see table 1 below). Please note: A neurologist should guide in all management decisions associated with multiple sclerosis and any change in therapy should be done under their guidance.

Table 1: Interferon beta-1a products

Product	Avonex®	Rebif®
Active and strength	Interferon beta-1a 30 mcg/ml	Interferon beta-1a 44 mcg/0.5ml
Dose/frequency/route	30 mcg IMI weekly	44 mcg SC 3 times weekly
Adverse events to consider		<ul> <li>More injection site related adverse events.</li> <li>Thyroid dysfunction more common in patients with pre-existing thyroid disorders.</li> </ul>
See package insert	Annexure 1	Annexure 2

IMI – intramuscular injection; SC - subcutaneously

Provinces and Healthcare Facilities are requested to distribute and communicate this information in consultation with their Pharmaceutical and Therapeutics Committees.

Kindly share with all healthcare professional and relevant stakeholders.

Comments may be submitted via e-mail:

Stock queries:

Clinical queries:

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Kind regards

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