



**Australian Government**

**Department of Health and Aged Care**

Therapeutic Goods Administration

# Notice of final decisions to amend (or not amend) the current Poisons Standard

20 January 2023

**TGA** Health Safety  
Regulation

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# 1 Notice of final decisions to amend (or not amend) the current Poisons Standard

This web publication constitutes a notice for the purposes of regulation 42ZCZS and regulation 42ZCZX of the Therapeutic Goods Regulations 1990 (the **Regulations**). In accordance with regulations 42ZCZS and 42ZCZX, this notice publishes:

- the decisions made by a delegate<sup>1</sup> of the Secretary of the Department of Health and Aged Care (the **Delegate**) pursuant to regulations 42ZCZR and 42ZCZU;
- the reasons for those final decisions; and
- the date of effect of those decisions.

## 2 Final decision in relation to psilocybine and MDMA

The final decisions in relation to proposals to amend the scheduling of psilocybine and MDMA that were considered at the June 2022 meeting of the Advisory Committee on Medicines Scheduling are not published in this notice. The decision has been deferred pending further consultation and consideration by the Delegate.

## 3 Final decisions on proposed amendments referred to the Advisory Committee on Medicines Scheduling (ACMS #38, June 2022)

### 3.1 Final decision in relation to cetirizine

#### *Proposal*

The applicant proposed an amendment to the current Schedule 2 entry for cetirizine to lower the maximum age of patients for whom the substance is indicated, from 12 years and over to 6 years and over, when not scheduled in the Poisons Standard (the **Proposal**). Implementation of the Proposal would allow access to certain oral preparations of cetirizine for the treatment of seasonal allergic rhinitis from outlets such as supermarkets for individuals aged 6 years and over.

#### *Final decision*

Pursuant to regulation 42ZCZR of the Regulations, the Delegate has made a final decision to confirm the interim decision and amend the current Poisons Standard in relation to cetirizine as follows:<sup>2</sup>

#### **Schedule 4 – Amend entry**

##### **CETIRIZINE except:**

- a) when included in Schedule 2; or
- b) in divided preparations for oral use for the treatment of seasonal allergic rhinitis in adults and children ~~12~~6 years of age and over when:

<sup>1</sup> For the purposes of s 52D of the *Therapeutic Goods Act 1989* (Cth).

<sup>2</sup> Proposed additions are shown in green underlined font, proposed deletions are shown in red strikethrough font, and text without this formatting represents the current text in the Poisons Standard.

- i) in a primary pack containing not more than 10 days' supply; and
- ii) labelled with a recommended daily dose not exceeding 10 mg of cetirizine.

### **Schedule 2 – Amend entry**

CETIRIZINE in preparations for oral use except in divided preparations for the treatment of seasonal allergic rhinitis in adults and children ~~12~~6 years of age and over when:

- a) in a primary pack containing not more than 10 days' supply; and
- b) labelled with a recommended daily dose not exceeding 10 mg of cetirizine.

### **Materials considered**

In making this final decision, the Delegate considered the following material:

- The [application](#) to amend the current Poisons Standard with respect to cetirizine (the **Application**);
- The 3,148 [public submissions](#), including 6 with a written component, received in response to the [pre-meeting consultation](#) under regulation 42ZCZK of the Regulations;
- The advice received from the 38th meeting of the Advisory Committee on Medicines Scheduling (the **Committee**);
- The 4 [public submissions](#), including one written submission, received in response to the [interim decision consultation](#) under regulation 42ZCZP of the Regulations (the **Submissions**);
- Subsection 52E(1) of the *Therapeutic Goods Act 1989* (Cth) (the **Act**), in particular (a) the risks and benefits of the use of a substance; (b) the purposes for which a substance is to be used and the extent of use of a substance; (c) the toxicity of a substance; (d) the dosage, formulation, labelling, packaging and presentation of a substance; and (e) the potential for abuse of a substance;
- The [Scheduling Policy Framework](#) 2018 (the **SPF**), pursuant to paragraph 52E(2)(a) of the Act; and
- The [Scheduling handbook: Guidance for amending the Poisons Standard](#).

### **Reasons for the final decision (including findings on material questions of fact)**

I have made a final decision to confirm my interim decision to amend the current Poisons Standard with respect to cetirizine. My reasons for making the final decision are those set out in the interim decision. In making my final decision, I have taken into account the material detailed in the interim decision published on 21 October 2022 under regulation 42ZCZP of the Regulations, and the Submissions, only one of which was written and was supportive of the interim decision.

### **Implementation date**

1 February 2023.

## **3.2 Final decision in relation to budesonide**

### **Proposal**

The applicant proposed the creation of a Schedule 3 entry for inhaled budesonide in single ingredient inhaler devices for the maintenance of asthma in people aged 12 years and older

where the maximum daily dose does not exceed 800 micrograms (the **Proposal**). Inhaled formulations of budesonide are currently available only with a prescription.

### ***Final decision***

Pursuant to regulation 42ZCZR of the Regulations, the Delegate has made a final decision to confirm the interim decision and not amend the current Poisons Standard in relation to budesonide.

### ***Materials considered***

In making this final decision, the Delegate considered the following material:

- The [application](#) to amend the current Poisons Standard with respect to cetirizine (the **Application**);
- The 2,831 [public submissions](#), including 9 with a written component, received in response to the [pre-meeting consultation](#) under regulation 42ZCZK of the Regulations;
- The advice received from the 38th meeting of the Advisory Committee on Medicines Scheduling (the **Committee**);
- The 3 [public submissions](#), including one with a written component, received in response to the [interim decision consultation](#) under regulation 42ZCZP of the Regulations;
- Subsection 52E(1) of the *Therapeutic Goods Act 1989* (Cth) (the **Act**), in particular (a) the risks and benefits of the use of a substance; (b) the purposes for which a substance is to be used and the extent of use of a substance; (c) the toxicity of a substance; (d) the dosage, formulation, labelling, packaging and presentation of a substance; (e) the potential for abuse of a substance; and (f) any other matters considered necessary to protect public health;
- The [Scheduling Policy Framework](#) 2018 (the **SPF**), pursuant to paragraph 52E(2)(a) of the Act; and
- The [Scheduling handbook: Guidance for amending the Poisons Standard](#).

### ***Reasons for the final decision (including findings on material questions of fact)***

I have made a final decision to confirm my interim decision to not amend the current Poisons Standard with respect to budesonide. My reasons for making the final decision are those set out in the interim decision. In making my final decision, I have taken into account the material detailed in the interim decision published on 21 October 2022 under regulation 42ZCZP of the Regulations, and the Submissions. I note that one written submission was received, which was opposed to the interim decision.

I have considered the comments in the opposing submission, in particular that the proposed scheduling amendment was only intended for maintenance treatment of asthma with the initial diagnosis to be made by a medical practitioner. I reiterate my concerns regarding the potential for misdiagnosis of respiratory symptoms in the absence of a complete medical assessment and discussion of patient history, concerns which were echoed by Asthma Australia in the initial consultation on this matter.

This concern extends to ongoing treatment of asthma with budesonide. Maintaining budesonide as a prescription-only medicine is consistent with the Quality Use of Medicines and ensures that the medication provided to patients continues to be appropriate for their condition. Any new health concerns that may have developed since the patient's initial diagnosis, as well as assessment of any changes in the severity of the patient's asthma, can only be properly and fully addressed by a qualified medical professional.

I note the reference in the submission to the possibility of Appendix M conditions for budesonide mitigating the identified risks in this application. I consider that such conditions should be presented in a proposal that is the subject of a separate application to amend the Poisons Standard.

### 3.3 Final decision in relation to apronal (allylisopropylacetylurea)

#### *Proposal*

A proposal was initiated by a delegate of the Secretary of the Department of Health and Aged Care (the **Delegate**) to clarify the appropriate scheduling for apronal and allylisopropylacetylurea, which are currently in Schedule 4 and Schedule 10 of the Poisons Standard respectively. These entries represent the same substance.

#### *Final decision*

Pursuant to regulation 42ZCZR of the Regulations, the Delegate has made a final decision to confirm the interim decision and amend the current Poisons Standard in relation to apronal (allylisopropylacetylurea) as follows:<sup>3</sup>

##### **Schedule 4 – Delete entry**

~~APRONAL~~

##### **Index – Delete entry**

~~APRONAL~~

~~Schedule 4~~

##### **Schedule 10 – Amend entry**

APRONAL ~~ALLYLISOPROPYLACETYLUREA~~ for therapeutic use

##### **Index – Amend entry**

APRONAL

cross reference: ALLYLISOPROPYLACETYLUREA

Schedule 10

#### *Materials considered*

In making this final decision, the Delegate considered the following material:

- The delegate-initiated [application](#) to amend the current Poisons Standard with respect to apronal/allylisopropylacetylurea (the **Application**);
- The 2,748 [public submissions](#) received in response to the [pre-meeting consultation](#) under regulation 42ZCZK of the Regulations;
- The advice received from the 38th meeting of the Advisory Committee on Medicines Scheduling (the **Committee**);
- The 2 [public submissions](#), neither of which included a written component, received in response to the [interim decision consultation](#) under regulation 42ZCZP of the Regulations;

<sup>3</sup> Proposed additions are shown in green underlined font, proposed deletions are shown in red strikethrough font, and text without this formatting represents the current text in the Poisons Standard.

- Subsection 52E(1) of the *Therapeutic Goods Act 1989* (Cth) (the **Act**), in particular (a) the risks and benefits of the use of a substance; (b) the purposes for which a substance is to be used and the extent of use of a substance; (c) the toxicity of a substance; (e) the potential for abuse of a substance; and (f) any other matters considered necessary to protect public health;
- The [Scheduling Policy Framework](#) 2018 (the **SPF**), pursuant to paragraph 52E(2)(a) of the Act;
- The [Scheduling handbook: Guidance for amending the Poisons Standard](#).

***Reasons for the final decision (including findings on material questions of fact)***

I have made a final decision to confirm my interim decision to amend the current Poisons Standard with respect to apronal (allylisopropylacetylurea). My reasons for making the final decision are those set out in the interim decision. In making my final decision, I have noted that no written public submissions were received before the second closing date in response to the call for further submissions published on 21 October 2022 under regulation 42ZCZP of the Regulations.

***Implementation date***

1 February 2023.

## **4 Final decisions on proposed amendments referred to the Advisory Committee on Medicines and Chemicals Scheduling in joint session (Joint ACMS-ACCS #31, June 2022)**

### **4.1 Final decision in relation to helional**

***Proposal***

The applicant proposed the creation of new Schedule 6 and Schedule 10 entries for the substance helional, which is not currently scheduled, to prohibit internal use of helional except in low concentrations in therapeutic and food preparations, and place labelling and storage requirements on helional in most other preparations for external use (the **Proposal**). Helional is used as a fragrance and flavouring agent in foods but may be used as a precursor in the manufacture of illicit substances and may also be toxic by ingestion.

***Final decision***

Pursuant to regulation 42ZCZR of the Regulations, the Delegate has made a final decision to confirm the interim decision and amend the current Poisons Standard in relation to helional as follows: <sup>4</sup>

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<sup>4</sup> Proposed additions are shown in green underlined font, proposed deletions are shown in red strikethrough font, and text without this formatting represents the current text in the Poisons Standard.



## Appendix B – New Entry

Substance	Date of entry	Reason for listing	Area of use
<a href="#">HELIONAL</a>	<a href="#">February 2023</a>	<a href="#">a (Low Toxicity)</a>	<a href="#">7 (General)</a>

### Index – New Entry

[HELIONAL](#)

[Appendix B, Part 3](#)

### Materials considered

In making this final decision, the Delegate considered the following material:

- The [application](#) to amend the current Poisons Standard with respect to helional (the **Application**);
- The 2,667 [public submissions](#), including 3 with a written component, received in response to the [pre-meeting consultation](#) under regulation 42ZCZK of the Regulations;
- The advice received from the 31st meeting of the Advisory Committees on Medicines and Chemicals Scheduling in joint session (the **Committee**);
- The [public submission](#), which did not include a written component, received in response to the [interim decision consultation](#) under regulation 42ZCZP of the Regulations;
- Subsection 52E(1) of the *Therapeutic Goods Act 1989*, in particular (a) the risks and benefits of the use of a substance; (b) the purposes for which a substance is to be used and the extent of use of a substance; (c) the toxicity of a substance; (d) the dosage, formulation, labelling, packaging and presentation of a substance; (e) the potential for abuse of a substance; and (f) any other matters considered necessary to protect public health;
- The [Scheduling Policy Framework](#) 2018 (the **SPF**); and
- The [Scheduling handbook: Guidance for amending the Poisons Standard](#).

### Reasons for the final decision (including findings on material questions of fact)

I have made a final decision to confirm my interim decision to amend the current Poisons Standard with respect to helional. My reasons for making the final decision are those set out in the interim decision. In making my final decision, I have noted that no written public submissions were received before the second closing date in response to the call for further submissions published on 21 October 2022 under regulation 42ZCZP of the Regulations.

### Implementation date

1 February 2023.

## 4.2 Final decision in relation to hydroxypinacolone retinoate (HPR)

### Proposal

The applicant presented two proposed amendments of the Schedule 4 entry for tretinoin to exclude its salts and derivatives and/or hydroxypinacolone retinoate (HPR) for use in topical preparations containing 0.5 per cent or less of the substance (the **Proposals**).

### ***Final decision***

Pursuant to regulation 42ZCZR of the Regulations, the Delegate has made a final decision to confirm the interim decision and amend the current Poisons Standard in relation to hydroxypinacolone retinoate as follows: <sup>5</sup>

#### **Schedule 4 – Amend entry**

TRETINOIN except the ester hydroxypinacolone retinoate in preparations for dermal use containing 0.5% or less of hydroxypinacolone retinoate.

### ***Materials considered***

In making this final decision, the Delegate considered the following material:

- The [application](#) to amend the current Poisons Standard with respect to HPR (the **Application**);
- The 2,373 [public submissions](#), including 4 with a written component, received in response to the [pre-meeting consultation](#) under regulation 42ZCZK of the Regulations;
- The advice received from the 31st meeting of the Advisory Committees on Medicines and Chemicals Scheduling in joint session (the **Committee**);
- The 4 [public submissions](#), including one with a written component, received in response to the [interim decision consultation](#) under regulation 42ZCZP of the Regulations;
- Subsection 52E(1) of the *Therapeutic Goods Act 1989*, in particular (a) the risks and benefits of the use of a substance; (b) the purposes for which a substance is to be used and the extent of use of a substance; (c) the toxicity of a substance; and (d) the dosage, formulation, labelling, packaging and presentation of a substance;
- The [Scheduling Policy Framework](#) 2018 (the **SPF**); and
- The [Scheduling handbook: Guidance for amending the Poisons Standard](#).

### ***Reasons for the final decision (including findings on material questions of fact)***

I have made a final decision to confirm my interim decision to amend the current Poisons Standard with respect to hydroxypinacolone retinoate. My reasons for making the final decision are those set out in the interim decision. In making my final decision, I have taken into account the material detailed in the interim decision and the public submissions received before the second closing date in response to the call for further submissions published on 21 October 2022 under regulation 42ZCZP of the Regulations. I note that the one written public submission received was supportive of the interim decision.

### ***Implementation date***

1 February 2023.

## **4.3 Final decision in relation to MDMA and MDA nomenclature**

### ***Proposal***

This section contains two independent final decisions in respect to the nomenclature of (i) MDMA and (ii) MDA (the **Substances**). Given the current scheduling and the proposed

<sup>5</sup> Proposed additions are shown in green underlined font, proposed deletions are shown in red strikethrough font, and text without this formatting represents the current text in the Poisons Standard.

amendments to the Poisons Standard in relation to the substances are similar, the reasons for making the final decisions for both substances are substantially the same.

### *MDMA*

The applicant proposed amendment of the current Schedule 9 entry for N, $\alpha$ -dimethyl-3,4-(methylenedioxy)phenylethylamine (MDMA) to reference the international non-proprietary name (INN) midomafetamine (the **MDMA Proposal**). The original name for the substance would be included as a cross-reference in the index entry for midomafetamine.

### *MDA*

The applicant proposed amendment of the current Schedule 9 entry for 3,4-methylenedioxyamfetamine (MDA) to reference the INN tenamfetamine (the **MDA Proposal**). The original name for the substance would be included as a cross-reference in the index entry for the tenamfetamine.

### *Final decision*

Pursuant to regulation 42ZCZR of the Regulations, the Delegate has made final decisions to confirm the interim decisions and amend the current Poisons Standard in relation to MDMA and MDA nomenclature as follows:

- (i) to not amend the current Schedule 9 entry for MDMA in the Poisons Standard.
- (ii) to not amend the current Schedule 9 entry for MDA in the Poisons Standard.

Instead, the INNs for these substances are to be entered as cross references to MDMA and MDA in the index as follows:

#### **Index - Amend Entry**

**N,  $\alpha$  -DIMETHYL-3,4-(METHYLENEDIOXY)PHENYLETHYLAMINE \*(MDMA).**

cross reference: 3,4- METHYLENEDIOXY-N- $\alpha$ -DIMETHYLPHENYLETHYLAMINE, MDMA, [MIDOMAFETAMINE](#)

**3,4-METHYLENEDIOXYAMFETAMINE \*(MDA).**

cross reference: 3,4-METHYLENEDIOXYAMPHETAMINE, MDA, [TENAMFETAMINE](#).

### *Materials considered*

In making this final decision, the Delegate considered the following material:

- The [applications](#) to amend the current Poisons Standard with respect to MDMA and MDA (the **Applications**);
- The 5,350 [public submissions](#), including 2 with a written component, received in response to the [pre-meeting consultation](#) under regulation 42ZCZK of the Regulations;
- The advice received from the 31st meeting of the Advisory Committees on Medicines and Chemicals Scheduling in joint session (the **Committee**);
- The 4 [public submissions](#), none of which included a written component, received in response to the [interim decision consultation](#) under regulation 42ZCZP of the Regulations; and
- The [Scheduling handbook: Guidance for amending the Poisons Standard](#).

### *Reasons for the final decision (including findings on material questions of fact)*

I have made a final decision to confirm my interim decision to amend the current Poisons Standard with respect to MDMA and MDA, and include the INNs for these substances as cross-

references in the respective index entries for each substance. My reasons for making the final decision are those set out in the interim decision. In making my final decision, I have noted that no written public submissions were received before the second closing date in response to the call for further submissions published on 21 October 2022 under regulation 42ZCZP of the Regulations.

### ***Implementation date***

1 February 2023.

## **5 Final decisions on proposed amendments referred to the Advisory Committee on Chemicals Scheduling (ACCS #34, June 2022)**

### **5.1 Final decision in relation to dichloromethane**

#### ***Proposal***

The applicant proposed the deletion of the existing Schedule 5 entry in the Poisons Standard for dichloromethane (also known as methylene chloride), to be replaced by a new entry in Schedule 10 (the **Proposal**). This amendment would effectively prohibit any use of dichloromethane.

#### ***Final decision***

Pursuant to regulation 42ZCZR of the Regulations, the Delegate has made a final decision to vary the interim decision and amend the current Poisons Standard in relation to dichloromethane as follows:<sup>6</sup>

#### **Schedule 5**

DICHLOROMETHANE (methylene chloride) **except:**

- a) in preparations in pressurised spray packs labelled as degreasers, decarbonisers or paint strippers and containing 10% or less of dichloromethane;
- b) in other preparations in pressurised spray packs; ~~or~~
- c) in paints and tinters containing 5% or less of dichloromethane; ~~or~~
- d) in preparations for human therapeutic use.

#### ***Materials considered***

In making this final decision, the Delegate considered the following material:

- The [application](#) to amend the current Poisons Standard with respect to dichloromethane (the **Application**);
- The 2,812 [public submissions](#), including 22 with a written component, received in response to the [pre-meeting consultation](#) under regulation 42ZCZK of the Regulations;
- The advice received from the 34th meeting of the Advisory Committee on Chemicals Scheduling (the **Committee**);

<sup>6</sup> Proposed additions are shown in green underlined font, proposed deletions are shown in red strikethrough font, and text without this formatting represents the current text in the Poisons Standard.

- The 5 [public submissions](#), including 3 with a written component, received in response to the [interim decision consultation](#) under regulation 42ZCZP of the Regulations (the **Submissions**);
- Subsection 52E(1) of the *Therapeutic Goods Act 1989*, in particular (a) the risks and benefits of the use of a substance; (b) the purposes for which a substance is to be used and the extent of use of a substance; (c) the toxicity of a substance; (d) the dosage, formulation, labelling, packaging and presentation of a substance; (e) the potential for abuse of a substance; and (f) any other matters considered necessary to protect public health;
- The [Scheduling Policy Framework](#) 2018 (the **SPF**), pursuant to paragraph 52E(2)(a) of the Act; and
- The [Scheduling handbook: Guidance for amending the Poisons Standard](#).

***Reasons for the final decision (including findings on material questions of fact)***

I have made a final decision to vary my interim decision to not amend the current Poisons Standard with respect to dichloromethane. My reasons for making the final decision are those set out in the interim decision, and the reasons for varying my interim decision are outlined below. In making my final decision, I have taken into account the material detailed in the interim decision on 21 October 2022 and the Submissions.

I have considered the comments in the Submissions, in particular those regarding the discrepancy between the limit of 0.06% for dichloromethane that is included in the Therapeutic Goods (Permissible Ingredients) Determination (No.5) 2022 (the **Determination**), and the default Poisons Standard limit of 0.001% that applies to all substances in Schedules 1 to 6 (unless specified otherwise). I have noted that the limit in the Determination is consistent with that included in the [ICH guideline Q3C \(R8\) for residual solvents](#).

I am satisfied that the suitable limit for dichloromethane as a residual solvent in human medicines in Australia is provided by the Determination. While the existing scheduling for dichloromethane has been in place since February 2000, this was established in consideration of the industrial use of the substance. Therefore, I have decided to clarify the Poisons Standards entry by including a new exemption for human therapeutic preparations in the Schedule 5 entry for dichloromethane. The Determination henceforth becomes the sole applicable standard in Australia for the control of dichloromethane as a residual solvent in human therapeutic goods. This decision aligns Australian regulations with international standards in this regard.

***Implementation date***

1 February 2023.

## **5.2 Final decision in relation to ipflufenquin**

***Proposal***

The applicant, the Australian Pesticides and Veterinary Medicines Authority (APVMA), proposed to enter a new fungicide, ipflufenquin, into Appendix B of the Poisons Standard (the **Proposal**). Appendix B of the Poisons Standard contains a list of substances for which the available information indicates that inclusion in the Poisons Standard is not necessary or not the most appropriate means of controlling the risk to public health.

## Final decision

Pursuant to regulation 42ZCZR of the Regulations, the Delegate has made a final decision to confirm the interim decision and amend the current Poisons Standard in relation to ipflufenquin as follows:<sup>7</sup>

### Appendix B – New Entry

Substance	Date of entry	Reason for listing	Area for use
<u>IPFLUFENOQUIN</u>	<u>September 2022</u>	<u>a</u>	<u>1.3, 1.3.1</u>

### Index – New entry

IPFLUFENOQUIN

Appendix B, Part 3

## Materials considered

In making this final decision, the Delegate considered the following material:

- The [application](#) to amend the current Poisons Standard with respect to ipflufenquin (the **Application**);
- The 2,703 [public submissions](#), including one with a written component, received in response to the [pre-meeting consultation](#) under regulation 42ZCZK of the Regulations;
- The advice received from the 34th meeting of the Advisory Committee on Chemicals Scheduling (the **Committee**);
- The one [public submission](#), which did not include a written component, received in response to the [interim decision consultation](#) under regulation 42ZCZP of the Regulations;
- Subsection 52E(1) of the *Therapeutic Goods Act 1989*, in particular (a) the risks and benefits of the use of a substance; (b) the purposes for which a substance is to be used and the extent of use of a substance; (c) the toxicity of a substance; (d) the dosage, formulation, labelling, packaging and presentation of a substance; and (f) any other matters considered necessary to protect public health;
- The [Scheduling Policy Framework](#) 2018 (the **SPF**), pursuant to paragraph 52E(2)(a) of the Act; and
- The [Scheduling handbook: Guidance for amending the Poisons Standard](#).

## Reasons for the final decision (including findings on material questions of fact)

I have made a final decision to confirm my interim decision to amend the current Poisons Standard with respect to ipflufenquin. My reasons for making the final decision are those set out in the interim decision. In making my final decision, I have noted that no written public submissions were received before the second closing date in response to the call for further submissions published on 21 October 2022 under regulation 42ZCZP of the Regulations.

<sup>7</sup> Proposed additions are shown in green underlined font, proposed deletions are shown in red strikethrough font, and text without this formatting represents the current text in the Poisons Standard.

***Implementation date***

1 February 2023.

## 6 Amendments to the Poison Standard in relation to New Chemical Entities (NCEs)

The NCEs listed below will be included in the new Poisons Standard that will come into effect on 1 February 2023.<sup>8</sup>

### 6.1 Avacopan

Schedule 4 – New Entry

AVACOPAN

Index – New Entry

AVACOPAN

Schedule 4

### 6.2 Deucravacitinib

Schedule 4 - New Entry

DEUCRAVACITINIB

Index - New Entry

DEUCRAVACITINIB

Schedule 4

### 6.3 Edaravone

Schedule 4 - New Entry

EDARAVONE

Index - New Entry

EDARAVONE

Schedule 4

### 6.4 Lenacapavir

Schedule 4 – New Entry

<sup>8</sup> Proposed additions are shown in green underlined font, proposed deletions are shown in red strikethrough font, and text without this formatting represents the current text in the Poisons Standard.



[LENACAPAVIR](#)

**Index – New Entry**

[LENACAPAVIR](#)

[Schedule 4](#)

## 6.5 Patisiran

**Schedule 4 - New Entry**

[PATISIRAN](#)

**Index - New Entry**

[PATISIRAN](#)

[Schedule 4](#)

## 6.6 Tirzepatide

**Schedule 4 - New Entry**

[TIRZEPATIDE](#)

**Appendix L – New Entry**

[TIRZEPATIDE: Warning statement 67 \(Do not use if pregnant or likely to become pregnant\).](#)

**Index - New Entry**

[TIRZEPATIDE](#)

[Schedule 4](#)

[Appendix L](#)

## 7 Amendments to the Poisons Standard made as delegate-only decisions

### 7.1 Final decision in relation to fenpropidin

#### *Final decision*

Pursuant to regulation 42ZCZU of the Regulations, a delegate of the Secretary has made a final decision to amend the current Poisons Standard in relation to fenpropidin as follows:<sup>9</sup>

#### **Schedule 6 – New entry**

FENPROPIDIN.

#### **Index – New entry**

FENPROPIDIN

Schedule 6

#### *Materials considered*

In making this final decision, the Delegate considered the following material:

- The application to amend the current Poisons Standard with respect to fenpropidin;
- Subsection 52E(1) of the *Therapeutic Goods Act 1989* (the **Act**), in particular (a) the risks and benefits of the use of a substance; (b) the purposes for which a substance is to be used and the extent of use of a substance; (c) the toxicity of a substance; (d) the dosage, formulation, labelling, packaging and presentation of a substance; and (e) the potential for abuse of a substance;
- Pursuant to paragraph 52E(2)(a) of the Act, the [Scheduling Policy Framework](#) 2018 (**SPF**); and
- The [Scheduling handbook: Guidance for amending the Poisons Standard](#) (the **Handbook**).

#### *Reasons for the final decision (including findings on material questions of fact)*

In determining that this matter will be a delegate-only decision I have taken into account the information provided in the application from the applicant (Australian Pesticides and Veterinary Medicine Authority (APVMA)), and the matters outlined under Section 52E of the Act and the SPF. In particular, I note that:

- In relation to paragraph 52E(1)(a) of the Act, the proposed amendment to the Poisons Standard is to include a new entry for fenpropidin in Schedule 6, based upon benefits to the agricultural industry from the introduction of a novel fungicide. In its application, the APVMA provided a Human Health Risk Assessment (HHRA) which concluded that the risks to human health and safety posed by this substance are acceptable according to the criteria stipulated in Section 5A of the *Agricultural and Veterinary Chemicals Code Act (1994)*.

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<sup>9</sup> Proposed additions are shown in green underlined font, proposed deletions are shown in red strikethrough font, and text without this formatting represents the current text in the Poisons Standard.

- In relation to paragraph 52E(1)(b) of the Act, fenpropidin is fungicide that belongs to the chemical class of piperidine derivatives. Fenpropidin is a new agricultural technical grade active constituent (TGAC) in Australia for the control of powdery mildew in wine grapes and may later be considered for the control of various fungal diseases in different food producing crops. Products containing fenpropidin are approved in the European Union (EU) for the control of a range of foliar fungal diseases in cereals. Further it is also approved in other jurisdictions for the control of foliar fungal diseases in bananas, beets, and grapes.
- In relation to paragraph 52E(1)(c) of the Act, the application provided toxicity data about the TGAC and an agricultural product formulation containing fenpropidin at 375 g/L.
- The major repeated use hazard associated with fenpropidin is dermal irritation, which requires mitigation through the use of personal protective equipment. I note that in mice, rats, rabbits and dogs, repeated oral, dermal or inhalation exposure to fenpropidin resulted in irritation/inflammation of the skin, gastrointestinal, urinary or respiratory tracts. Reduced feed consumption and reduced bodyweight gain were also observed. In addition, while demyelination of peripheral nerves associated with paresis and bilateral eye lens cataracts were observed in dogs and in a single rat following sub-chronic to chronic high dose exposures, these were observed only at doses well above the no observed adverse effect levels (NOAEL) on which health-based guidance values (HBGVs) are established. Cataract and demyelination in fenpropidin studies hypothetically result from a mode of action consistent with fenpropidin's fungicidal mode of action, *i.e.* sterol metabolism disruption.
- I note that fenpropidin is unlikely to pose a carcinogenic risk to humans. Fenpropidin was not genotoxic in an adequate range of *in vitro* and *in vivo* assays and did not induce neoplasia in near life-time exposure studies in rats and mice.
- In reference to reproductive and developmental toxicity, in rats and rabbits, fenpropidin did not adversely affect reproduction or offspring survival and development in the absence of maternal toxicity. On this basis, fenpropidin is not a reproductive toxicant and is not a teratogen, but I have also considered the rare visceral (persistent truncus arteriosus) and skeletal (severely malaligned sternbrae) malformations, delayed development and slightly reduced brain weight that occurred at maternotoxic doses. The NOAEL for foetal development was 10 mg/kg bw/day, while the NOAEL for maternotoxicity was 5 mg/kg bw/day.
- Neurotoxic effects include peripheral nerve demyelination associated with paresis and reduced brain weight (~3%) of female pups in a rat dietary developmental neurotoxicity study. I agree with the APVMA that the proposed HBGVs will be protective of these effects.
- I am satisfied that, for the purposes of paragraph 52E(1)(d) of the Act, the APVMA, as the product regulator of any commercial products, will consider their dosage (application rate), formulation, labelling, packaging, and presentation.
- In relation to paragraph 52E(1)(e) of the Act, the substance has no human therapeutic value or significant pharmacological effect that would indicate a risk for diversion, misuse, or abuse.

On the basis of the above considerations and the information provided in the application, I have decided to amend the current Poisons Standard in the manner set out above. The proposed amendment was not referred to an expert advisory committee.

### **Implementation date**

1 February 2023.

## 7.2 Final decision in relation to fluralaner

### *Final decision*

Pursuant to regulation 42ZCZU of the Regulations, a delegate of the Secretary has made a final decision to amend the current Poisons Standard in relation to fluralaner as follows:<sup>10</sup>

#### **Schedule 5 – Amend entry**

FLURALANER except when in Schedule 4.

#### **Schedule 4 - New entry**

FLURALANER in injectable preparations for use in companion animals.

#### **Index – Amend entry**

FLURALANER

Schedule 5  
Schedule 4

### *Materials considered*

In making this final decision, the Delegate considered the following material:

- The application to amend the current Poisons Standard with respect to fluralaner;
- Subsection 52E(1) of the Act, in particular (a) the risks and benefits of the use of a substance; (b) the purposes for which a substance is to be used and the extent of use of a substance; (c) the toxicity of a substance; (d) the dosage, formulation, labelling, packaging and presentation of a substance; and (e) the potential for abuse of a substance.
- Pursuant to paragraph 52E(2)(a) of the Act, the [Scheduling Policy Framework](#) 2018 (**SPF**); and
- The [Scheduling handbook: Guidance for amending the Poisons Standard](#) (the **Handbook**).

### *Reasons for the final decision (including findings on material questions of fact)*

In determining that this matter will be a delegate-only decision I have taken into account the information provided in the application from the applicant (Australian Pesticides and Veterinary Medicine Authority (APVMA)), and the matters outlined under Section 52E of the Act and the SPF. In particular I note that:

- In relation to paragraph 52E(1)(a) of the Act, the proposed amendment to the Poisons Standard is to include a new Schedule 4 entry for injectable preparations containing fluralaner for the treatment of companion animals, based on its benefits to the veterinary industry as an insecticide and acaricide. Fluralaner is currently listed in Schedule 5 with no cut-offs or exceptions to other schedules. Injection into companion animals, such as cats and dogs, generally requires veterinary intervention as owners of companion animals do not have the skills or training to administer injectable products. The APVMA has concluded that the human risk posed by such a preparation containing 15 per cent fluralaner is acceptable

<sup>10</sup> Proposed additions are shown in green underlined font, proposed deletions are shown in red strikethrough font, and text without this formatting represents the current text in the Poisons Standard.

according to the criteria stipulated in Section 5A of the *Agricultural and Veterinary Chemicals Code Act (1994)*. These risks have been qualified in the APVMA's Human Health Risk Assessment (HHRA) technical report.

- In relation to paragraph 52E(1)(b) of the Act, fluralaner is a long-acting systemically active insecticide and acaricide belonging to the isoxazoline chemical group. Currently registered fluralaner products (oral chews and topical spot-ons) for companion animals provide treatment and control of flea and tick infestations for up to three months from a single treatment. A fluralaner injectable for companion animals is intended for a longer lasting single treatment for up to 12 months and is intended to be used by veterinarians only. It will be administered as a single dose subcutaneous injection from a multi-dose vial, which must be reconstituted correctly with a vehicle solution before use, and is to be re-administered every 12 months.
- In relation to paragraph 52E(1)(c) of the Act, I note that the toxicity of fluralaner was considered in [October 2014](#) and no new data is available since then. I acknowledge that fluralaner has a sufficiently low acute toxicity profile to be consistent with the Schedule 5 criteria of the SPF, and that the primary concern with this application is with the risks and benefits associated with the dosage form.
- I am satisfied that, for the purposes of paragraph 52E(1)(d) of the Act, the APVMA, as the product regulator, will consider its applicable dosage, formulation, labelling, packaging and presentation.
- In relation to paragraph 52E(1)(e) of the Act, the substance has no human therapeutic value or significant pharmacological effect that would indicate a risk for diversion, misuse, or abuse.

On the basis of the above considerations and the information provided in the application, I have decided to amend the current Poisons Standard in the manner set out in the application. The proposed amendment was not referred to an expert advisory committee.

***Implementation date***

1 February 2023.