



australasian society of clinical immunology and allergy

23 January 2025

Chair, Pharmaceutical Benefits Advisory Committee (PBAC)
Department of Health and Ageing
GPO Box 9848 Canberra ACT 2601
Email: pbac@health.gov.au

Dear PBAC Chair,

Re: Extension of PBS listing of Dupixent® (dupilumab) for patients aged less than 12 years

On behalf of the Australasian Society of Clinical Immunology and Allergy (ASCIA) we are writing in support of the request by Sanofi-Aventis Australia Pty Ltd for the Pharmaceutical Benefits Scheme (PBS) listing of Dupixent® (dupilumab), as outlined in table below, for review at the March 2025 PBAC meeting.

Table with 3 columns: Product details (Dupilumab forms, brand name, manufacturer), Indications (Severe atopic dermatitis, Uncontrolled severe asthma), and Request details (Extension to General Schedule Authority Required and Section 100 listing for patients aged less than 12 years and 6 to 11 years).

ASCIA supports this request for following reasons:

- Dupixent® can make a significant difference to the health and quality of life for people with chronic severe atopic dermatitis (eczema) and/or uncontrolled severe asthma, and PBS listing ensures equitable access for Australians with these conditions.
• Dupixent® is a fully human monoclonal antibody and is not an immunosuppressant. Prior to the PBS listing of Dupixent® for severe eczema and asthma, if patients failed to achieve a good response to topical treatments (e.g. ointments and/or inhalers), the only option to consider was usually systemic immunosuppressive treatments (e.g. oral corticosteroids for asthma, and methotrexate or ciclosporin for eczema) which have a limited evidence base, considerable possible short- and long-term adverse effects (including on growth and development), and require frequent monitoring, including blood tests.
• Clinical immunology/allergy specialists regularly manage patients less than 12 years with severe eczema and/or severe asthma, and are experienced in appropriate selection and monitoring of

patients being treated using immune modulating agents, including Dupixent®. It is important to have this treatment option for this age group, which is not feasible without PBS listing.

We hope that this letter provides sufficient information for the PBAC to consider extending the PBS listings for Dupixent® to patients less than 12 years, with chronic severe atopic dermatitis (eczema) and/or uncontrolled severe asthma.

Yours sincerely,

Dr Michael O'Sullivan  
ASCIA President

Jill Smith  
ASCIA CEO

Correspondence: Email [jill@allergy.org.au](mailto:jill@allergy.org.au)