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Ontario Drug Benefit Formulary/Comparative Drug Index

Edition 43

Summary of Changes – April 2026
Effective April 30, 2026

Drug Programs Policy and Strategy Branch
Health Programs and Delivery Division
Ministry of Health

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New Multi-Source Products

Where applicable, please consult the respective brand reference product's drug profile on the ODB e-Formulary for the details of the Limited Use (LU) code and criteria, and/or any associated Therapeutic Notes (TN).

DIN/PIN	Product Name	Strength	Dosage Form	Mfr	DBP
02545497	Atorvastatin	80mg	Tab	TEV	0.2342

(Interchangeable with Lipitor – GB)

DIN/PIN	Product Name	Strength	Dosage Form	Mfr	DBP
02556618	Auro-Atovaquone	750mg/5mL	O/L	AUR	1.5856/mL

(Interchangeable with Mepron – GB)

DIN/PIN	Product Name	Strength	Dosage Form	Mfr	DBP
02366061	Jamp-Folic Acid	5mg	Tab	JPC	0.0368

(Interchangeable with Folvite – GB)

DIN/PIN	Product Name	Strength	Dosage Form	Mfr	DBP
02395797	Riva-Cyproterone	50mg	Tab	RIA	1.4000

(Interchangeable with Androcur – GB)

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New Off-Formulary Interchangeable (OFI) Products

DIN/PIN	Product Name	Strength	Dosage Form	Mfr	Unit Cost
02549158	ACH-Progesterone	100mg	Cap	ACH	1.4358

(Interchangeable with Prometrium)

DIN/PIN	Product Name	Strength	Dosage Form	Mfr	Unit Cost
02560569	Femyso	200mg & 200mcg	Tab Kit	LUP	225.0000/kit

(Interchangeable with Mifegymiso DIN 02444038; please see the Executive Officer Notice for details)

DIN/PIN	Product Name	Strength	Dosage Form	Mfr	Unit Cost
02560976	Jamp Olopatadine 0.2%	0.2%	Oph Sol-2.5mL Pk	JPC	26.1300

(Interchangeable with Pataday)

Additional Limited Use Code

Generic Name	Strength	Dosage Form
Lenalidomide	2.5mg	Cap
Lenalidomide	5mg	Cap
Lenalidomide	10mg	Cap
Lenalidomide	15mg	Cap
Lenalidomide	20mg	Cap
Lenalidomide	25mg	Cap

Limited Use Code and Clinical Criteria

LU Code 741

Multiple Myeloma – Induction and Consolidation Therapy for Transplant Eligible, Newly Diagnosed Multiple Myeloma

Lenalidomide in combination with daratumumab, bortezomib and dexamethasone (DVRd) as induction therapy before, and consolidation therapy after an autologous stem cell transplantation, in patients with previously untreated, transplant-eligible, newly diagnosed multiple myeloma. Funding is for a total of 6 Cycles (i.e. 4 Induction Cycles, and 2 Consolidation Cycles).

Recommended Dose: 25mg daily

Patients should be dispensed the most appropriate strength of lenalidomide to achieve the dose recommendation and with the fewest number of capsules per day.

LU Authorization Period: 1 year

Note: Pharmacists and prescribers should be informed of a drug product's official indications and recommended dosage as set out in Health Canada's approved product monograph. Some aspects of these criteria may differ from the official indications and recommended dosage as described in the product monographs for lenalidomide or other products that may be used as part of combination therapy with lenalidomide. The Executive Officer's funding of drug products is informed by advice from expert committees that consider evidence regarding the safety, clinical efficacy, and cost-effectiveness of the drug products. Where there is a difference between a product monograph and the LU criteria described above, the LU criteria govern for the purpose of funding under the Ontario Drug Benefit Program.

Drug Benefit Price (DBP) Changes

To view the DBP changes by DIN/PIN, the ministry has posted an Excel file with the details of the listing changes for download and review (Edition 43: Summary of Changes–Drug Benefit Price Changes–April 2026). It is accessible from the ministry's website:
https://www.ontario.ca/document/ontario-drug-benefit-odb-formulary-comparative-drug-index-cdi-and-monthly-formulary-0

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Delisted Products

DIN/PIN	Product Name	Strength	Dosage Form	Mfr
02415100	Taro-Zoledronic Acid	5mg/100mL	Inj Sol-100mL Pk (Preservative-Free)	TAR