

Proposal to widen access to febuxostat for the treatment of gout

16 September 2026

What we're proposing

Tell us what you think about this proposal to widen access to febuxostat for the treatment of gout from **1 February 2027**.

Consultation closes at **11:59pm, Wednesday 30 September 2026** and feedback can be provided through [our online form](#).

What would the effect be?

From **1 February 2027**, febuxostat would be funded for people with gout whose symptoms cannot be adequately controlled with allopurinol or who cannot tolerate allopurinol. The proposed implementation date of 1 February 2027 is to ensure the supplier has enough time to manufacture more stock to meet the demand.

Currently, people must trial two other medicines, allopurinol and probenecid, before becoming eligible for funded febuxostat. The changes would remove the requirement to trial probenecid. This would give patients and clinicians two options for second-line treatment: febuxostat or probenecid.

We estimate that around 5,500 people would benefit from treatment within the first year of funding. This would increase to 7,300 people by year 5.

Who we think will be interested

- People with gout and their whānau
- Rheumatologists
- General Practitioners
- Nurse Practitioners
- Nephrologists
- Te Ora | Māori Medical Practitioners Association
- General Physicians/Internal Medicine specialists
- Pasifika Medical Association
- Hospital and community pharmacists
- Arthritis New Zealand
- Gout Action Aotearoa
- New Zealand Rheumatology Association
- Māori and Pacific health providers
- PHOs and primary care networks

About gout and febuxostat

Gout is a form of arthritis caused by a build-up of uric acid in the body. When uric acid levels become too high, urate crystals can form in and around the joints, leading to painful gout attacks that can cause sudden swelling, redness, tenderness, and severe pain.

Around 90% of uric acid levels are influenced by genetic factors and how effectively the kidneys remove uric acid from the body. Some genetic variants that reduce the body's ability to remove uric acid are more common in Māori and Pacific populations, contributing to a higher risk of developing gout. If uric acid levels remain elevated, urate crystals can continue to build up over time. Without effective treatment, these crystals may cause permanent joint damage and can also affect kidney health.

Febuxostat is a urate-lowering medicine used to treat gout. It works by reducing the production of uric acid, helping to dissolve existing urate crystals and prevent new crystals from forming. Taking febuxostat can help prevent gout attacks and reduce the risk of long-term joint and kidney damage caused by ongoing crystal build-up.

Why we're proposing this

Pharmac received a funding application to widen access to febuxostat for the second-line treatment of gout in 2015. Pharmac received advice on this application from our Pharmacology and Therapeutics Advisory Committee (PTAC) and Rheumatology Subcommittee who recommended the application be funded with a medium priority.

You can read more about the advice here:

- [Application Tracker | Febuxostat for the second-line treatment of gout](#)
 - [PTAC meeting record August 2015 \[PDF\]](#)
 - [Rheumatology Subcommittee meeting record October 2015 \[PDF\]](#)

Pharmac initially ranked this proposal on our Options for Investment list (OFI) in 2016. As a result of the lowered cost of febuxostat through Pharmac's annual tender process, Pharmac is proposing progress this funding application.

These changes would give patients and clinicians two options for second-line treatment: febuxostat or probenecid. For some people, febuxostat may be the preferred option because it only needs to be taken once a day and it can be easier to adjust the dose if needed.

Details about our proposal

From **1 February 2027**, febuxostat would be funded for people with gout whose symptoms cannot be adequately controlled with allopurinol or who cannot tolerate allopurinol.

Access would be subject to the following amended Special Authority criteria (affected criteria shown only, additions in **bold**, deletions in ~~strike through~~) as follows:

Initial application — (Gout) from any relevant practitioner. Approvals valid without further renewal unless notified for applications meeting the following criteria:

Both:

- 1 Patient has been diagnosed with gout; and
- 2 Any of the following:

- 2.1 The patient has a serum urate level greater than 0.36 mmol/l despite treatment with allopurinol at doses of at least 600 mg/day **and up to 900 mg/day** ~~and addition of probenecid at doses of up to 2 g per day or maximum tolerated dose~~; or
- 2.2 The patient has experienced intolerable side effects from allopurinol such that treatment discontinuation is required ~~and serum urate remains greater than 0.36 mmol/l despite use of probenecid at doses of up to 2 g per day or maximum tolerated dose~~; or
- 2.3 ~~The patient has renal impairment such that probenecid is contraindicated or likely to be ineffective and serum urate remains greater than 0.36 mmol/l despite optimal treatment with allopurinol; or~~
- 2.4—The patient has previously had an initial Special Authority approval for benzbromarone for treatment of gout.

Similar eligibility criteria would apply in Part II of Section H of the Pharmaceutical Schedule.

The Febuxostat (Teva) brand of febuxostat would continue to the funded brand of febuxostat tablets in New Zealand, there would be no changes to the Principal Supply Status arrangements notified for febuxostat tablets in [May 2026](#).

To provide feedback

Fill out [our online form](#) by **11.59pm, Wednesday 30 September 2026**.

All feedback received before the closing date will be considered by Pharmac's Board (or its delegate) prior to making a decision on this proposal.

Your feedback may be shared

When you give feedback on a consultation, your feedback becomes official information that Pharmac holds. Pharmac has legal responsibilities for how we manage this official information, under laws such as the Official Information Act and Privacy Act.

Pharmac may receive a request from people for official information, which could include your feedback. Legally, Pharmac must consider whether your feedback should be released.

We will consider your views when assessing whether the feedback has to be released. Tell us if there is anything about your feedback that you would prefer wasn't released.

If your feedback is proposed for release, then Pharmac will contact you, unless there is a legal reason that we can't.

Note that Pharmac collects and holds your information in line with our [Privacy Statement](#).