



Pharmaceutical Benefits Scheme – Biosimilars Denosumab

March 2026

The following biosimilars brands of denosumab are listed on the Pharmaceutical Benefits Scheme (PBS):

Brand name	Date listed on PBS
Jubbonti®	1 August 2025
Wyost®	1 August 2025
CORORA®	1 September 2025
GANVADO®	1 September 2025

These brands are listed under the General Schedule of the PBS.

What are biological and biosimilar medicines?

Biological medicines, including biosimilars, contain substances made by living cells or organisms. They are more complex to make than synthetic chemical medicines.

A biosimilar medicine is a highly similar version of a reference biological medicine, which is invariably the first brand to market. Biosimilar medicines are used to treat the same diseases, in the same way as the reference biological medicines.

Biosimilar medicines have been tested and shown to be as safe and effective as the reference biological medicines.

How is biosimilarity determined?

Biosimilar medicines are designed and engineered to be as similar as possible to the reference biological medicine. There may be minor differences (known as molecular microheterogeneity) due to natural variability and the more complex manufacturing processes required for biological medicines. Importantly, these minor differences do not affect the safety, quality or effectiveness of the biosimilar medicine.

For a biosimilar medicine to be approved by the Therapeutic Goods Administration (TGA), the structural variability of the biosimilar medicine and the reference biological medicine, and all critical quality attributes (i.e. those important for the function of the molecule) must be highly similar. There must also be no clinically meaningful differences identified in clinical studies comparing the biosimilar and reference products.

Jubbonti® and Wyost® have been assessed by the TGA on the basis of comparability (through several quality, non-clinical and clinical studies) to be highly similar to the reference brand, Prolia® and Xgeva® respectively. According to their TGA- approved Product Information CORORA® and GANVADO® are Amgen Inc. trademarks (which is the

manufacturer of the reference brands) and contain the same active ingredient as Xgeva® and Prolia® respectively. This means that Jubbonti® and CORORA® provide the same health outcomes and are as safe and effective as Prolia® and that Wyost® and GANVADO® provide the same health outcomes and are as safe and effective as Xgeva®.

What is denosumab?

Denosumab is a monoclonal antibody that binds with high affinity to RANKL which is an essential protein in the formation, function and survival of cells responsible for bone resorption (osteoclasts). Denosumab prevents RANKL from activating its receptor in the osteoclast, thereby decreasing bone resorption and increasing bone mass, making bones stronger and less likely to break.

Denosumab is listed on the PBS for the treatment of osteoporosis, giant cell tumour of bone and for bone metastasis due to breast cancer or castration-resistant prostate cancer.

More information about this medicine is available by entering 'denosumab' at the [NPS MedicineWise Medicine Finder](#).

Can PBS brands of denosumab be substituted?

The Pharmaceutical Benefits Advisory Committee (PBAC), an independent, expert advisory body to the Australian Government, recommended that Jubbonti® and CORORA® be listed on the PBS as substitutable brands of the reference biologic Prolia® and marked in the Schedule of Pharmaceutical Benefits (Schedule) with an 'a'-flag. The PBAC also recommended that Wyost® and GANVADO® be PBS-listed as substitutable brands of their reference biologic Xgeva® and 'a'-flagged in the Schedule.

When PBS brands are listed as substitutable with each other, the pharmacist may dispense any brand in consultation with the patient and provided the prescriber has not indicated 'brand substitution not permitted' on the prescription.

Authority requirements for denosumab

Denosumab is currently listed on the PBS as [Authority Required \(STREAMLINED\)](#). Prescribers should refer to the Schedule of Pharmaceutical Benefits for details of the PBS restrictions for denosumab and to obtain the relevant Authority Required (STREAMLINED) code. The Schedule is also available via the [PBS publications page](#). The prescribing software also contains further details. Over time PBS listing details may change – please consult the Schedule for current information.

Do biosimilar uptake drivers apply to denosumab?

The Government has implemented policies to encourage greater use of biosimilar brands. Further information about the biosimilar uptake drivers is available on the [PBS website](#).

In line with the Government's commitment to the uptake of biosimilars, prescribers are encouraged to prescribe a biosimilar brand for treatment-naïve patients where appropriate. The following administrative note is included in the Schedule for the PBS-listing of denosumab.

Biosimilar prescribing policy

Prescribing of a biosimilar brand where available is encouraged for treatment naïve patients. Encouraging biosimilar prescribing for treatment naïve patients is Government policy. A viable biosimilar market is expected to result in reduced costs for biological medicines, allowing the Government to reinvest in new treatments.

Why are biosimilar medicines important?

The PBS subsidises a range of biological medicines to treat cancers, immunological and degenerative disorders, which significantly affect the quality of life for affected individuals. These are generally innovative treatments and their increasing cost and utilisation across a range of disease indications continue to put pressure on the PBS. In 2024-25, biological medicines represented seven of the ten top PBS medicines which attracted the most Government subsidy, with a combined cost of over \$3.18 billion. The introduction of biosimilars on the PBS can help relieve this pressure.

In addition, availability of biosimilar medicines ensures that there are more brand options for prescribers and patients, reducing the risk of medicines shortages.

How can greater use of biosimilars benefit the PBS?

The introduction of brand competition into the market leads to lower PBS prices, due to Price Disclosure and other statutory price reductions to PBS medicines. Under Price Disclosure arrangements the PBS subsidy is adjusted twice a year to reflect average market prices. As these become lower through competition, the prices of medicines that have at least one other brand on the PBS can be reduced. A price reduction only occurs if the weighted average discounting across all brands of a drug is greater than set percentages.

Savings from statutory price reductions to PBS medicines are being re-invested in the PBS, ensuring all Australians continue to have the earliest possible access to new medicines. All Australian patients benefit from rapid, equitable and sustainable access to the most effective medicines through the PBS.

Detailed information about PBS pricing, including Price Disclosure, is available on the [PBS website](#).

More Information

For more information, read:

- Department of Health and Aged Care website [About medicines](#) page.
- Therapeutic Goods Administration website [biosimilars medicines regulation](#).
- PBS website – PBAC Public summary document for Jubbonti and Wyost
- The [Biosimilar Education Hub](#) (Generic and Biosimilar Medicines Association Education website, originally funded by the Australian Government).

Further information for healthcare professionals regarding the use of [PBS Authorities](#) and [claiming of PBS benefits](#) is available at the [Services Australia](#) website.