Redefine how you control ADHD in adults with AZSTARYS®

The *FIRST* and *ONLY* d-MPH with novel SDX prodrug and IR activity[1,2]

Not actual patient.

NEWLY DIAGNOSED | Recently diagnosed with inattentive subtype ADHD

PATIENT WITH ADHD

Name: **Sarah** | Age: **42 years** | Sex: **Female**

Current treatment: **None**

FAMILY HISTORY

- 12-year-old son with ADHD taking an AMP ER stimulant for the past 4 years
- History of anxiety

ADULT PATIENT CHALLENGES

- Worries she may lose her job
- Lacks focus at work
- Frequently misses deadlines
- Forgets appointments
- Wants effective control while considering history of anxiety

Is starting with AZSTARYS appropriate?

AMP, amphetamine; d-MPH, dexmethylphenidate; ER, extended-release; IR, immediate-release; SDX, serdexmethylphenidate.

INDICATION

AZSTARYS is a central nervous system (CNS) stimulant indicated for the treatment of Attention Deficit Hyperactivity Disorder (ADHD) in patients 6 years and older.

IMPORTANT SAFETY INFORMATION

WARNING: ABUSE AND DEPENDENCE

- **CNS stimulants, including AZSTARYS, other methylphenidate-containing products, and amphetamines, have a high potential for abuse and dependence. Assess the risk of abuse prior to prescribing, and monitor for signs of abuse and dependence while on therapy**

Please see additional Important Safety Information throughout and click here for Full Prescribing Information, including Boxed WARNING.

azstarys® (II)

serdexmethylphenidate and dexmethylphenidate

26.1/5.2mg • 39.2/7.8mg • 52.3/10.4mg capsules

IMPORTANT SAFETY INFORMATION (continued)

Contraindications

- Known hypersensitivity to serdexmethylphenidate, methylphenidate, or other product components. Bronchospasm, rash, and pruritus have occurred with AZSTARYS. Hypersensitivity reactions such as angioedema and anaphylactic reactions have occurred with other methylphenidate products.
- Concomitant treatment with a monoamine oxidase inhibitor (MAOI) or use of an MAOI within the preceding 14 days, because of the risk of hypertensive crisis.

Warnings and Precautions

- Sudden death has been reported in association with CNS stimulant treatment at recommended doses in pediatric patients with structural cardiac abnormalities or other serious heart problems. In adults, sudden death, stroke, and myocardial infarction have been reported at recommended doses. Avoid use in patients with known structural cardiac abnormalities, cardiomyopathy, serious heart arrhythmias, coronary artery disease, or other serious heart problems.
- CNS stimulants cause an increase in blood pressure and heart rate. Monitor all patients for hypertension and tachycardia.
- *Exacerbation of Pre-existing Psychosis*: May exacerbate symptoms of behavior disturbance and thought disorder in patients with a pre-existing psychotic disorder. *Induction of a Manic Episode in Patients with Bipolar Disorder*: May induce a mixed/manic episode in patients with bipolar disorder. Prior to initiating treatment, screen for risk factors for developing a manic episode (e.g., comorbid or history of depressive symptoms, or a family history of suicide, bipolar disorder, or depression). *New Psychotic or Manic Symptoms*: At recommended doses, may cause psychotic or manic symptoms (e.g., hallucinations, delusional thinking, or mania) in patients without a history of psychotic illness or mania. Discontinue if symptoms occur.
- Cases of painful and prolonged penile erections and priapism have been reported with methylphenidate products. Immediate medical attention should be sought if signs or symptoms of prolonged penile erections or priapism are observed.
- CNS stimulants, including AZSTARYS, are associated with peripheral vasculopathy, including Raynaud's phenomenon. Signs and symptoms are usually intermittent and mild; very rare sequelae include digital ulceration and/or soft tissue breakdown. Carefully observe patients during treatment for digital changes. Further evaluation may be required, including referral.
- CNS stimulants have been associated with weight loss and slowing of growth rate in pediatric patients. Monitor height and weight at appropriate intervals in pediatric patients. Treatment may need to be interrupted in children not growing or gaining weight as expected.

IMPORTANT SAFETY INFORMATION (continued)

Adverse Reactions

- Based on accumulated data from other methylphenidate products, the most common (>5% and twice the rate of placebo) adverse reactions are appetite decreased, insomnia, nausea, vomiting, dyspepsia, abdominal pain, weight decreased, anxiety, dizziness, irritability, affect lability, tachycardia, and blood pressure increased.

Drug Interactions

- Adjust dosage of antihypertensive drug as needed. Monitor blood pressure.
- Avoid use of AZSTARYS on the day of surgery if halogenated anesthetics will be used.

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References: 1. AZSTARYS. Prescribing information. Corium, Inc; 2021. **2.** Mickle T, Guenther S, Chi G, inventors; KemPharm, Inc, assignee. Methylphenidate-prodrugs, processes of making and using the same. U.S. patent 10,584,113. March 10, 2020. **3.** Kollins SH, Braeckman R, Guenther S, et al. A randomized, controlled laboratory classroom study of serdexmethylphenidate and d-methylphenidate capsules in children with attention-deficit/hyperactivity disorder. *J Child Adolesc Psychopharmacol*. 2021;31(9):597-609. doi:10.1089/cap/2021.0077

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Consider AZSTARYS for adult patients with ADHD

The *FIRST* and *ONLY* d-MPH with novel SDX prodrug and IR activity[1,2]

Rapid onset for the early morning routine[1,3]

Sustained control of symptoms during and after work[1,3]

Smooth and gradual offset through the evening[1,3]

$0 for their first prescription for eligible patients[a]

Scan the QR code or visit AZSTARYS-pro.com to learn more and register for updates.

[a]Restrictions may apply. See Terms and Conditions at AZSTARYS.com.

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