## When **10 micrograms** of estrogen is still **too much**...



Estrogen-free Slynd<sup>®</sup> has very low cardiovascular risk and offers a predictable bleeding profile with a flexible 24-hour missed pill window.

**Indications and usage:** Slynd<sup>®</sup> is a progestin indicated for use by females of reproductive potential to prevent pregnancy.

Please see full Prescribing Information and Slynd<sup>®</sup> product package insert located in pocket.

Slynd<sup>®</sup> (drospirenone) tablets, 4 mg

#### ZERO IN ON EFFICACY<sup>1</sup>

#### Estrogen-free Slynd<sup>®</sup> suppresses ovulation and has a 1.8% pregnancy rate<sup>\*1,2,a</sup>

#### This is comparable to other oral contraceptives<sup>3</sup>

- **98.2%** effective at preventing pregnancy<sup>1,2</sup>
  - **4.0 Pearl Index** (95% CI: 2.3, 6.4) out of 5547 evaluable cycles<sup>1</sup>

#### And, unlike most oral contraceptives, Slynd<sup>®</sup> has:

#### No listed upper BMI Limit<sup>a</sup>

Efficacy and safety were assessed in an openlabel, prospective, multicenter, non-controlled trial of 1552 enrolled female subjects, aged 15 and above.

Subjects received a 24-day regimen of drospirenone tablets, 4mg swallowed for up to 13 28-day cycles, providing a total of 5,547 evaluable cycles.

A total of 352 women completed 13 cycles of treatment.

\*17 out of 953 evaluated females.

° No upper BMI limit listed in Package Insert

# it<sup>a</sup>

#### IMPORTANT SAFETY INFORMATION INDICATIONS AND USAGE

Slynd (drospirenone) tablets are a progestin, indicated for females of reproductive potential to prevent pregnancy.

#### IMPORTANT SAFETY INFORMATION

#### Contraindications

Slynd is contraindicated in females with renal impairment, adrenal insufficiency, a presence or history of cervical cancer or progestin sensitive cancers, liver tumors (benign or malignant) or hepatic impairment, and undiagnosed abnormal uterine bleeding.

#### ZERO IN ON PREDICTABILITY

Slynd<sup>®</sup> has a predictable bleeding profile with a familiar 24+4 dosing regimen that is similar to COCs<sup>1,2</sup>

## This offers a scheduled, anticipated withdrawal bleed or missed periods altogether<sup>1</sup>

In clinical studies, over 12 cycles:

- 54.8% reduction in scheduled bleeding<sup>2</sup>
- **21.1%** reduction in unscheduled bleeding<sup>2</sup>
- Less breakthrough bleeding which improved over time<sup>1,2</sup>

24 active hormone pills + 4 inactive placebo pills **0.4**<sup>%</sup> discontinuation rate due to bleeding irregularities<sup>1,c</sup>



° Only 91 of 2593 subjects (0.4% of exposure cycles) discontinued due to bleeding irregularities.<sup>1</sup>

#### Warnings and Precautions

**Hyperkalemia:** Slynd has anti-mineralocorticoid activity, including the potential for hyperkalemia in high-risk females. Check serum potassium levels prior to starting treatment and during the first treatment cycle in females receiving daily, long-term treatment for chronic conditions or diseases with medications that may increase serum potassium concentration. Consider monitoring serum potassium concentration in females at increased risk for hyperkalemia i.e., those females who take a strong CYP3A4 inhibitor long-term and concomitantly with Slynd. Monitor females taking Slynd who later develop conditions and/or begin medication that put them at an increased risk for hyperkalemia.

Please see additional Important Safety Information throughout and full Prescribing Information in pocket.

#### ZERO IN ON FLEXIBILITY<sup>1,2</sup>

## Slynd<sup>®</sup> has a flexible 24-hour missed pill window to accomodate her hectic life<sup>1</sup>

## This provides the forgiveness she needs to be successful on Slynd<sup>®</sup>

Norethindrone<sup>b</sup> POPs<sup>4</sup>



**Slynd**<sup>®</sup>



**30-hour elimination half-life** helps maintain therapeutic plasma levels to sustain a 24-hour missed pill window<sup>1</sup>

#### **Similar dosing window** to combined oral contraceptives (COCs) and more convenient than progestin-only pills (POPs)<sup>1,2</sup>

<sup>b</sup> Brand Name Micronor

#### **IMPORTANT SAFETY INFORMATION (continued)**

**Thromboembolic Disorders:** Discontinue Slynd if a thromboembolic event occurs and consider discontinuing Slynd in case of prolonged immobilization due to surgery or illness. When prescribing Slynd, consider the increased risk of thromboembolism inherent in the postpartum period and in females with a history of thromboembolism.

**Bone Loss**: Treatment with Slynd leads to decreased estradiol serum levels. It is unknown if this may cause a clinically relevant loss of bone mineral density.

**Liver Disease:** Discontinue Slynd if jaundice or acute or chronic disturbances of liver function develop. Do not resume use until markers of liver function return to normal and Slynd causation has been excluded.

#### ZERO IN ON DROSPIRENONE

#### Drospirenone may reduce fluid retention and androgenic-related skin disorders<sup>5,6</sup>

- Drospirenone counteracts estrogen-induced stimulation of the renin-angiotensin aldosterone system which may result in reduced fluid retention.<sup>7</sup>
- Drospirenone has no androgenic activity, and is reported to improve androgenic-related skin disorders<sup>6</sup>

	Anti-Androgenic Activity	Anti-Mineralocorticoid Activity
Levonorgestrel	-	_
Norgestimate	_	_
Norethindrone	_	_
Drospirenone	+	+

**Ectopic Pregnancy:** Be alert to the possibility of ectopic pregnancy in females who become pregnant or complain of lower abdominal pain while on Slynd.

**Risk of Hyperglycemia in Patients with Diabetes:** Females with diabetes may be at greater risk of hyperglycemia and may require additional medication adjustments or monitoring. Progestins, including Slynd, may decrease insulin sensitivity.

**Bleeding Irregularities and Amenorrhea:** Females may experience irregular bleeding or amenorrhea, especially during the first three months of use. If bleeding persists, occurs after previously regular cycles, or if scheduled bleeding does not occur, evaluate for possible causes such as pregnancy or malignancy.

Please see additional Important Safety Information throughout and full Prescribing Information in pocket.

#### ZERO IN ON SAFETY

Slynd<sup>®</sup> has proven in clinical studies with over 20,000 cycles that it is a safe oral contraceptive.<sup>2</sup>

Since Slynd<sup>®</sup> has no additional unnecessary hormones, it more safely addresses the needs of women than COCs<sup>1</sup>



• No reported thromboembolic or CV events in clinical studies, which distinguishes drospirenone used alone versus in combination with estrogen. <sup>1,d</sup>



• **No** Boxed Warning pertaining to female smokers 35 years and older



• **No** blood pressure check required prior to initiation, making it a simpler choice for telemedicine

<sup>d</sup> In 2011, the FDA issued label changes to the COC that contained ethinyl estradiol with drospirenone due to reported CV events.

#### **IMPORTANT SAFETY INFORMATION (continued)**

#### **Adverse Reactions**

Most common adverse reactions (>1%) are: acne, metrorrhagia, headache, breast pain, weight increased, dysmenorrhea, nausea, vaginal hemorrhage, libid'o decreased, breast tenderness, menstruation irregular.

#### **Drug Interactions**

Drugs or herbal products that induce certain enzymes (for example, CYP3A4) may decrease the effectiveness of Slynd or increase breakthrough bleeding. Counsel patients to use a back-up or alternative non-hormonal method of contraception when enzyme inducers are used with Slynd and to continue back-up non-hormonal contraception for 28 days after discontinuing the enzyme inducer. Drugs or products that inhibit CYP3A4 may increase Slynd systemic exposure.

#### ZERO IN ON MORE PATIENTS

## Count on estrogen-free Slynd<sup>®</sup> for more of your patients<sup>2</sup>

#### Slynd<sup>®</sup> is a dependable option that is proven safe and effective in females of reproductive age<sup>1</sup>

- More convenient for women who want to avoid unnecessary hormones<sup>1</sup>
- Safe to use in breastfeeding mothers<sup>1</sup>
- No upper BMI limit listed in the Package Insert<sup>1</sup>
- Safe to use in patients with CV risk potential, such as smokers<sup>1</sup>

	Women who prefer to avoid unnecessary hormones	Breastfeeding (FDA approved)	High BMI (>30)*	Smokers + CV Risk (No boxed warning)	12-18 years old (FDA approved)
Slynd <sup>.</sup>	~	$\checkmark$	~	~	<b>~</b>
COMBINED OC	×	×	×	×	×

\* Slynd® may be used in many patient types. It is at the provider's discretion to determine appropriateness for individual patients.

‡ Insufficient data available

Discontinue Slynd if pregnancy occurs.

Counsel patients that Slynd does not protect against HIV-infection (AIDS) and other sexually transmitted infections.

Please see additional Important Safety Information throughout and full Prescribing Information in pocket.

# ZERO IN ON SIGNO

#### LOW ESTROGEN HAS EVOLVED TO NO ESTROGEN!



Estrogen-free Slynd<sup>®</sup> has very low cardiovascular risk and offers a predictable bleeding profile with a flexible 24-hour missed pill window.<sup>1</sup>

- Like COCs, Slynd<sup>®</sup> is effective with a **familiar dosing** regimen<sup>1</sup>
- Unlike COCs, estrogen-free Slynd<sup>®</sup> is safe for women who cannot or do not want to take any unnecessary hormones<sup>1</sup>

#### ELIGIBLE PATIENTS MAY PAY AS LITTLE AS PAY AS LITTLE AS PER 1-MONTH OR 3-MONTH PRESCRIPTION FILL MONTH FILL MAY COST PATIENT \*8.33 PER MONTH

References: 1. Slynd. Package Insert. Exeltis USA, Inc; 2019. 2. Data on file. Exeltis USA, Inc.; Florham Park, NJ; 2019. 3. Batur P, Bowersox N, McNamara M. Contraception: efficacy, risks, continuation rates, and use in high-risk women. *Womens Health*. 2016;25(8):853-856. 4. Micronor. Package Insert. Ortho-McNeil; 2017. 5. Fuhrmann U, Krattenmacher R, Slater ED, et al. The novel progestin drospirenone and its natural counterpart progesterone: biochemical profile and antiandrogenic potential. *Contraception*. 1996;54(4):243-251. 6. Slopien R, Milewska E, Rynio P, et al. Use of oral contraceptives for management of acne vulfaris and hirsutism in women of reproductive and late reproductive age. *Menopause Review*. 2018;17(1):1-4. doi:10.5114/pm.2018.74895. 7. Vroonen L, Cavalier E, Vranken L, et al. Influence of drospirenone on renin-angiotensin-aldosterone system evaluation. *Endocrine Abstracts*. 2011;26:12.



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