A NON-ORAL TREATMENT for migraine with or without aura in adults

NOW AVAILABLE

Provide your patients with a different route to migraine relief.

IT'S IN THE DELIVERY

Some patients may be looking for an oral-treatment option.

ZEQUITY

The first and only oral transdermal delivery system for the migraine treatment.

Specialize in more communications about ZEQUITY for your patients.

Indications and Usage

ZEQUITY is indicated for the acute treatment of migraine with or without aura in adults.

Limitations of Use:

Use only if you diagnose migraine has been established. If a patient has no response to the first migraine attack treated with ZEQUITY, reconsider the diagnosis of migraine and ZEQUITY should not be prescribed for any subsequent attacks.

Important Safety Information

ZEQUITY is contraindicated in patients with:

- Severe connective tissue disease, including rheumatoid arthritis, systemic lupus erythematosus, or other connective tissue disease, or history of connective tissue disease
- Hypersensitivity to any of the components of ZEQUITY
- Pregnancy

- Breastfeeding

- Children (i.e., under 14 years of age)

- Individuals with known or suspected history of personal or family history of angioedema

- History of drug-induced lupus erythematosus

Risk of Injury During Magnetic Resonance Imaging (MRI) Procedure:

ZEQUITY contains metal parts and must not be removed before an MRI procedure.

Let Us Know

Which of the following do your patients experience during a migraine?

- a) nausea
- b) sensitivity to sound
- c) sensitivity to light
- d) vomiting

Submit
Migraine: Not just another headache.¹

Approximately 36 million Americans suffer from migraine.²

Migraine characteristics may affect patients³

<table>
<thead>
<tr>
<th>Migraine</th>
<th>PULSATILE PAIN</th>
<th>PHOTOPHOBIA</th>
<th>PHONOPHOBIA</th>
<th>NAUSEA</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>65%</td>
<td>80%</td>
<td>76%</td>
<td>73%</td>
</tr>
</tbody>
</table>

Patients may be looking for a non-oral treatment for their migraine⁴

Migraines with nausea may impair oral intake⁵

In a national survey, American Migraine Study (n=308) found that 3 out of 4 patients who had suffered a migraine in the past 12 months had experienced nausea with a migraine. Patients were more likely to experience nausea with a migraine than with other headache disorders. This suggests that nausea may play a significant role in the management of patients with migraine.

The US Headache Consortium Treatment Guidelines recommend that patients with migraine should be offered an anti-migraine medication. This may include triptans, ergot alkaloids, or a combination of both. The guidelines also recommend that patients with severe or frequent migraine headaches should be referred to a headache specialist for further evaluation.

Indications and Usage

ZOLQUIA is indicated for the acute treatment of migraine with or without aura in adults.

Important Safety Information

ZOLQUIA is contraindicated in patients with:

- Hypersensitivity to zolmitriptan,
- Cardiovascular disease (or a family history of cardiovascular disease),
- Severe head injury, and
- History of cerebrovascular disease.

ZOLQUIA is not recommended for patients with a history of stroke or TIA.

ZOLQUIA is generally safe and well-tolerated, but there have been reports of serious adverse reactions, including vasculitis, and in very rare cases, angioedema. Patients with a history of these conditions should be monitored closely.

Risk of Injury During Magnetic Resonance Imaging (MRI) Procedure: ZOLQUIA contains metal parts and must be removed before an MRI procedure.

Allergic Contact Dermatitis: Use of ZOLQUIA may lead to allergic contact dermatitis. Avoid contact with metal objects, as this may increase the risk of contact dermatitis.

Migraines may be associated with other health conditions, such as sleep disorders, and it is important to address these conditions as well.

Common Adverse Reactions: The most common adverse reactions (³5%) in a controlled single-dose study were application site pain, pruritus, burning, warmth, and discomfort. These adverse reactions are typically mild to moderate in severity and generally resolve within 24 hours.

Electrolyte abnormalities and/or Bony-walled Meningeal Cysts: ZOLQUIA should not be used in areas near or over electrified tissues or bony-walled cysts.

References:

Update your ZOLQUIA Prescribing Information for ZOLQUIA.

Please read the Full Prescribing Information for ZOLQUIA.

References:

Update your ZOLQUIA Prescribing Information for ZOLQUIA.

Please read the Full Prescribing Information for ZOLQUIA.
Skin is the way in
ZECUITY: The first and only Transdermal System for the treatment of migraine

Designed for sumatriptan administration
- 6.5 mg of sumatriptan over 4 hours
- Two interchangeable application sites
- ZECUITY can be applied to the upper arm or thigh
- ZECUITY should not be applied to other areas of the body
- The application sites are considered interchangeable as the patch site of sumatriptan following application of the ZECUITY TDS to these 2 sites was comparable
- ZECUITY should be applied to dry, intact, non-irritated skin on the upper arm or thigh on a day that is relatively free and dry and is without scars, tattoos, abrasions, or other skin conditions
- ZECUITY should not be applied to a previous application site until the site remains erythema free for at least 3 days

Indications and Usage
ZECUITY is indicated for the acute treatment of migraine with or without aura in adults.

Limitations of Use:
- Use only if a clear diagnosis of migraine has been established. If a patient has no response to the first migraine attack treated with ZECUITY, reconsider the diagnosis of migraine before ZECUITY is administered to treat any subsequent attacks. ZECUITY is not indicated for the prevention of migraine attacks.

Important Safety Information
ZECUITY is contraindicated in patients with:
- Ischemic coronary artery disease (CAD) or coronary artery vasospasm, including Prinzmetal's angina, or Wolf-Parkinson-White syndrome or any condition associated with other cardiac accessory conduction pathway disorders
- History of stroke, transient ischemic attack (TIA), or history of hemiplegic or basilar migraine; peripheral vascular disease; ischemic bowel disease; or uncontrolled hypertension
- Recent (<48 hours) use of ergotamine-containing or ergot-type medication, or another 5-HT1 agonist, antagonist, or concurrent or recent (within 2 weeks) use of a MAO-A inhibitor
- Known hypersensitivity to sumatriptan or components of ZECUITY; severe hepatic impairment or allergic contact dermatitis to ZECUITY

Risk of Injury During Magnetic Resonance Imaging (MRI): PROCEDURE: ZECUITY contains metal parts and must be removed before an MRI procedure.

Allergic Contact Dermatitis: Use of ZECUITY may lead to allergic contact dermatitis (ACD). ZECUITY should be discontinued if ACD is suspected. It is possible that some patients who developed ACD with sumatriptan by exposure to ZECUITY, and who have developed systemic rash or urticaria with exposure to ZECUITY, may also develop systemic reactions or urticaria with re-exposure to sumatriptan.

Myocardial Ischemia, Myocardial Infarction, and Prinzmetal's Angina: The use of ZECUITY is contraindicated in patients with ischemic heart disease (CAD) with current or recent (within 10 days) symptoms of myocardial infarction, or occurring within a few hours following administration of sumatriptan. Perform a cardiovascular evaluation in patients with history of previous CAD or unstable angina prior to using ZECUITY. Do not use ZECUITY in patients with a history of CAD or previous history of coronary artery vasospasm.

Syncope: There have been rare reports of syncopal episodes with ZECUITY use. It is not known whether the use of ZECUITY is a factor in the occurrence of syncopal episodes.

Cerebrovascular Events: Cerebral hemorrhage, subarachnoid hemorrhage, and dracéma have occurred in patients treated with sumatriptan and ZECUITY. Cerebrovascular events are generally not associated with other prodrugs of sumatriptan or other prodrugs of sumatriptan-related drugs.

Other Vasospasm Reactions: 5-HT1 agonists, including ZECUITY, may cause non-cardiac vasospastic reactions, such as peripheral vasoconstriction, vasospasm-related ischemia and infarction, tachycardia, and Raynaud's syndrome. In patients who experience symptoms or signs suggestive of a vasoconstrictive reaction following the use of any 5-HT1 agonist, discontinue ZECUITY if those symptoms occur.

Chest, Throat, Neck, and Jaw Pain/Tightness/Pressure: Sensations of tightness, pain, pressure, and heaviness in the chest, throat, neck, and jaw commonly occur after treatment with sumatriptan and are usually non-cardiac in origin. However, perform a cardiac evaluation in patients at high cardiac risk.

Medication Overuse Headache: Overuse of acute migraine drugs may lead to medication overuse headache (MDOH). Overuse headache may precede an migraine-like headache, and in migraine sufferers with frequent headaches, which may result in migraine attacks. Discontinuation of patients, including withdrawal of the overused drugs, and treatments of withdrawal symptoms may be necessary.

Serotonin Syndrome: Serotonin syndrome may occur with ZECUITY, particularly during coadministration with SSRIs, SNRIs, TCAs, and MAO inhibitors. Discontinue ZECUITY if serotonin syndrome is suspected.

Increase in Blood Pressure: Significant elevation in blood pressure, including hypertensive crisis with acute improvement of organ systems, has been reported on rare occasions in patients treated with ZECUITY. Avoid use of ZECUITY in patients with uncontrolled hypertension.

Anaphylaxis/Anaphylactoid Reactions: Anaphylaxis/anaphylactoid reactions have occurred in patients receiving sumatriptan. Such reactions have occurred with the use of all sumatriptan products in conjunction with patients with prior serious anaphylactoid reactions.

Seizures: Seizures have been reported following administration of sumatriptan, with or without precipitating factors. ZECUITY should be used with caution in patients with a history of epilepsy or patients associated with a known seizure threshold.

Electrically-Active Implantable or Body-Worn Medical Devices: ZECUITY should not be applied in areas near or over electrically-active implanted or body-worn medical devices.

Common Adverse Reactions: The most common adverse reactions (≥5%) in a controlled single dose study were application site pain, pruritus, warmth, and discomfort.

Please read the Full Prescribing Information for ZECUITY.

Reference: 1. ZECUITY (sumatriptan transdermal system) 6.5 mg / 4 hours

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Mechanism of Delivery

How Does ZECUITY Deliver Sumatriptan?

- ZECUITY is a single-use, disposable autoinjector device that delivers sumatriptan, the most widely prescribed migraine medication, through the skin.
- In clinical trials, 30 seconds was the average time required to deliver a drug through the skin using a low electrical current.
- The ZECUITY electronics, powered by two coin cell lithium batteries, control the amount of current applied and the rate and amount of sumatriptan delivered.

ZECUITY contains metal parts and must be removed before an MRI procedure.

Indications and Usage

ZECUITY is contraindicated in patients with:
- Ischemic coronary artery disease (CAD) or coronary artery vasospasm, including Prinzmetal’s angina; or Wolff-Parkinson-White syndrome or arrhythmias associated with other cardiac accessory conduction pathway disorders.
- History of stroke, transient ischemic attack (TIA), or history of hemiplegic or basilar migraine; periphereal vascular disease; ischemic bowel disease; or uncontrolled hypertension.
- Recent (i.e., within 24 hours) use of ergotamine-containing or ergot-type medication, or another 5-HT1 agonist or concurrent or recent (within 3 weeks) use of a MAO-A inhibitor.

ZECUITY should be discontinued if ACD is limited to one extremity, as it is possible that some patients who developed ACD with sumatriptan by exposure to ACD.

Use ZECUITY as needed to treat acute migraine episodes in adults.

Important Safety Information

ZECUITY is contraindicated in patients with:
- Ischemic coronary artery disease (CAD) or coronary artery vasospasm, including Prinzmetal’s angina; or Wolff-Parkinson-White syndrome or arrhythmias associated with other cardiac accessory conduction pathway disorders.
- History of stroke, transient ischemic attack (TIA), or history of hemiplegic or basilar migraine; periphereal vascular disease; ischemic bowel disease; or uncontrolled hypertension.
- Recent (i.e., within 24 hours) use of ergotamine-containing or ergot-type medication, or another 5-HT1 agonist or concurrent or recent (within 3 weeks) use of a MAO-A inhibitor.

ZECUITY should be discontinued if ACD is limited to one extremity, as it is possible that some patients who developed ACD with sumatriptan by exposure to ACD.

Use ZECUITY as needed to treat acute migraine episodes in adults.

Allergic Contact Dermatitis: Use of ZECUITY may lead to allergic contact dermatitis (ACD). ZECUITY should be discontinued if ACD is suspected. It is possible that some patients who developed ACD with sumatriptan by exposure to ZECUITY, and who have developed systemic sensitization, may not be able to take sumatriptan in any form. Patients who develop ACD with ZECUITY and require treatment should be advised to consult their physician about receiving their next subsequent dose under close medical supervision.

Myocardial Ischemia, Myocardial Infarction, and Prinzmetal’s Angina: The use of ZECUITY is contraindicated in patients with ischemic or vasospastic CAD. There have been rare reports of serious cardiac adverse reactions, including acute myocardial infarction, occurring within a few hours following administration of sumatriptan. Perform a cardiovascular evaluation in patients with multiple cardiovascular risk factors prior to using ZECUITY. Do not use ZECUITY if there is evidence of CAD or coronary artery vasospasm.

Arythmias: Life-threatening disturbances of cardiac rhythm, including ventricular tachycardia and ventricular fibrillation leading to death, have been reported within a few hours following the administration of 5-HT1 agonists. Discontinue ZECUITY if these disturbances occur.

Chest, Throat, Neck and/or Jaw Pain/Tightness/Pressure: Sensations of tightness, pain, pressure, and heaviness in the chest, throat, neck, and jaw commonly occur after treatment with sumatriptan and are usually non-cardiac in origin. However, perform a cardiac evaluation in patients at high cardiac risk.

Cerebrovascular Events: Cerebral hemorrhage, subarachnoid hemorrhage, and stroke have occurred in patients treated with 5-HT1 agonists, and some have resulted in fatalities. As with other acute migraine therapies, before treating headaches in patients not previously diagnosed as migraineurs, and in migraineurs who present with atypical symptoms, exclude other potentially serious neurological conditions.

Other Vasospasm: 5-HT1 agonists, including ZECUITY, may cause non-coronary vasospastic reactions, such as peripheral vascular ischemia, gastrointestinal vascular ischemia and infarction, spinal ischemic, and Raynaud’s syndrome. In patients who experience symptoms suggestive of a vasospastic reaction following the use of any 5-HT1 agonist, rule out a vasospastic reaction before using ZECUITY.

Medication Overuse Headache: Overuse of acute migraine drugs may lead to exacerbation of headaches (medication overuse headache) and, in severe cases, may result in migraine-like daily headache or as a marked increase in frequency of migraine attacks. Decelerating patients, including withdrawal of the overdosed drugs, and treatment of withdrawal symptoms may be necessary.

Serotonin Syndrome: Serotonin syndrome may occur with trigemins, including ZECUITY, particularly during concomitant medication with SSRIs, SNRIs, TCAs, and MAO inhibitors. Discontinue ZECUITY if serotonin syndrome is suspected.

Increase in Blood Pressure: Significant elevation in blood pressure, including hypertensive crises with acute impairment of organ systems, has been reported rarely in patients treated with 5-HT1 agonists, including patients without a history of hypertension. Monitor blood pressure in patients treated with ZECUITY.

Anaphylactic/Anaphylactoid Reactions: Anaphylactic/anaphylactoid reactions have occurred in patients receiving sumatriptan. Such reactions should be be treated with ZECUITY. ZECUITY should be used with caution in patients with a history of epilepsy or conditions associated with a lowered seizure threshold.

Electrically-Accord Medical Devices: ZECUITY should not be applied in areas near or over electrically-active implantable or body-worn medical devices.

Common Adverse Reactions: The most common adverse reactions (≥5%) in a controlled single dose study were application site pain, paraesthesia, paresthesia, warmth, and discomfort.

Advise patients to carefully read the Patient Information and Instructions for Use prior to using ZECUITY. Only patients who are able to understand and follow the instructions should use ZECUITY.

Please read the [Full Prescribing Information for ZECUITY](#).
Migraine Support Solutions℠

A comprehensive suite of services to support you and your patients who are prescribed ZECUTY®

Migraine Support Solutions℠ provides you, your patients, and your office staff with:

- Insurance benefit verification during the approval process
- Helping patients find financial support for ZECUTY® (ZECUTY Co-pay Program®)
- Specialty pharmacy coordination (specialty pharmacy will schedule and manage delivery)
- Training for patients taking ZECUTY®
- Ongoing 24/7 support hotline
- Patient education and training resources
- Access to a network of free services

* Limitations apply. Patients eligible to Medicare, Medicaid, or any other government healthcare program are not eligible for this offer.

How to get your patients started

- Select “Shared Solutions Pharmacy” in your e-prescribing drop-down to email prescriptions to Migraine Support Solutions℠. Be sure to include your patient’s phone number in the e-script system before sending the prescription or
- Fax the Prescription and Reimbursement Form for ZECUTY® to Migraine Support Solutions℠ at 1-866-375-2229 and they will take care of the rest

ZECUTY® is distributed via specialty pharmacy, which allows for delivery directly to the patient.

If you have any questions or are looking for more information regarding Migraine Support Solutions℠, please call 1-855-ZECUTY®

Indications and Usage

ZECUTY® is indicated for the acute treatment of migraine with or without aura in adults.

Limitations of Use:

Use only if a clear diagnosis of migraine has been established. If a patient has no response to the first migraine attack treated with ZECUTY®, ZECUTY should not be used for subsequent attacks.

Important Safety Information

- Ischemic corona artery disease (CAD) or coronary artery vasospasm, including Prinzmetal’s angina; or Wallenstein-White syndrome
- History of stroke, transient ischemic attack (TIA), or history of hemispheric or basilar migraine, peripheral vascular disease, ischemic bowel syndrome, or cholesterol embolization syndrome
- Recent (i.e., within 24 hours) use of ergotamine-containing or ergot-type medication, or another 5-HT₁ agonist, agonist or concurrent or recent (within 2 weeks) use of a MAO inhibitor
- History of hypersensitivity to sumatriptan or components of ZECUTY®, severe hepatic impairment, or allergic contact dermatitis to ZECUTY®

Risk of Injury During Magnetic Resonance Imaging (MRI) Procedure: ZECUTY contains metal parts and must be removed before an MRI procedure.

Allergic Contact Dermatitis: Use of ZECUTY may lead to a local contact dermatitis (ACD). ZECUTY should be discontinued if ACD is documented. If ACD occurs, there may be some benefit in performing a patch test using ZECUTY, and if the test is negative, the diagnosis may be revised. In patients who develop ACD with ZECUTY, the drug is usually well tolerated, and no fatalities or deaths have been reported.

Myogenic ischemia, Myocardial Infarction, and Prinzmetal’s Angina: The use of ZECUTY is contraindicated in patients with ischemic or vasoospastic CAD. There have been reports of serious cardiac adverse reactions, including acute myocardial infarction, and death occurring hours after administration of ZECUTY. Patients with hemodynamic instability in whom the hemodynamics have stabilized and who have recovered from the acute episode of myocardial ischemia or infarction should be re-evaluated and the benefits and risks of ZECUTY therapy should be reassessed. If a patient develops a new or worsening angina after treatment with ZECUTY, the drug should be immediately discontinued. In patients with no recent history of myocardial infarction or ischemia but with atypical angina, the benefits and risks of ZECUTY therapy should be reassessed.

Atrial fibrillation: Life-threatening disturbances of cardiac rhythm, including ventricular tachycardia and ventricular fibrillation leading to death, have been reported within a few hours following the administration of 5-HT₁ agonists. Discontinue ZECUTY if these disturbances occur.

Chest, Throat, Neck and/or Jaw Pain/Pressure/Pressure: Seizures of lightness, pain, pressure, and heaviness in the chest, throat, neck, and/or jaw pain/pressure/pressure, after treatment with sumatriptan and are usually not in sync in origin. However, perform a cardiac evaluation if these patients are at high cardiac risk.

Concurrent treatment with beta-blockers, nonselective beta-blockers, or beta-blockers, or dronedarone, or amiodarone, and patients have headaches or chest pain in patients treated with 5-HT₁ agonists, and some have resulted in fatalities. As with other acute migraine therapies, before treatment has begun in patients with known migraine and may possibly be reversed by blocking 5-HT₁ receptors with ZECUTY. In patients who experience symptoms or signs suggestive of a vasospastic reaction following the use of any 5-HT₁, agonist, rule out a vasospastic reaction before using ZECUTY.

Medication Overuse Headache: Overuse of acute migraine drugs may lead to exacerbation of headache (medication overuse headache). ZECUTY is contraindicated in patients with medication overuse headache.

Anaphylaxis/Anaphylactic Reactions: Anaphylaxis/anaphylactic reactions have been reported in patients receiving sumatriptan. Such reactions can be life-threatening or fatal. ZECUTY is contraindicated in patients with prior serious anaphylactic reaction.

ZECUTY should be used with caution in patients with a history of epilepsy or conditions associated with a lowered seizure threshold.

Electrically-Active Implants or Body-worn Medical Devices: ZECUTY should not be applied in areas near or over electrically-active implants or body-worn medical devices.

Common Adverse Reactions: The most common adverse reactions (≥ 5%) in a controlled single-blind placebo-controlled study were application site pain, pruritus, rash, pruritus, and discomfort. These reactions usually resolve within 24 hours of application.