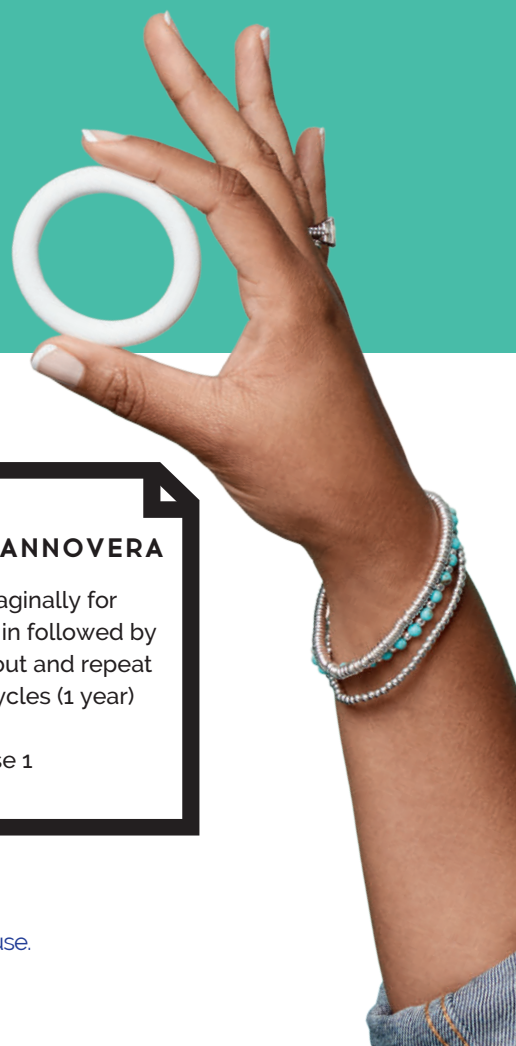
WOMEN WHO WANT LONG-LASTING BIRTH CONTROL BUT DON'T WANT A PROCEDURE? NOW THERE'S ANNOVERA

THE ONLY LONG-LASTING, REVERSIBLE CONTRACEPTION THAT IS PATIENT-CONTROLLED AND PROCEDURE-FREE



HOW TO PRESCRIBE ANNOVERA

Rx ANNOVERA

Insert vaginally for 21 days in followed by 7 days out and repeat for 13 cycles (1 year)

Dispense 1

HOW TO START ANNOVERA

Women who have not used a hormonal contraceptive in the preceding cycle or after copper IUD removal

- Insert ANNOVERA between days 2 and 5 of their regular menstrual bleeding; no back-up contraception is needed.
- If menstrual cycles are irregular or if the start is more than 5 days from the last menstrual bleeding, women should use an additional barrier method for the first 7 days of ANNOVERA use.

Women using a combination hormonal contraceptive (CHC)

- Women who are not pregnant and are consistently and correctly using a CHC can successfully switch to ANNOVERA on any day of the CHC cycle (Day 1-28) without back-up contraception as long as no more than 7 hormone-free days occur before starting ANNOVERA.

Women using a progestin-only contraceptive

- Women who remain on schedule with their current birth control and have no contraindication to ethinyl estradiol can successfully switch to ANNOVERA from:

PILLS	INJECTION	IMPLANT OR IUD
at the time of their next pill	at the time of their next scheduled injection	at the time of their implant or IUD removal

- After switching from a progestin-only method, an additional barrier method should be used for initial 7 days of ANNOVERA use.

IMPORTANT SAFETY INFORMATION

WARNING: CIGARETTE SMOKING AND SERIOUS CARDIOVASCULAR EVENTS

See full prescribing information for complete boxed warning.

- **Females over 35 years old who smoke should not use ANNOVERA.**
- **Cigarette smoking increases the risk of serious cardiovascular events from combination hormonal contraceptive use.**

Please see Indication and additional Important Safety Information on next page and Full Prescribing Information, including BOXED WARNING, at ANNOVERA.com/pi.pdf

ANNUAL.* COMFORTABLE. CONTROLLABLE.

Insert for 21 days in followed by 7 days out and repeat for 13 cycles (1 year)

Annovera® (segesterone acetate and ethinyl estradiol vaginal system)

Delivers 0.15 mg/0.013 mg per day

IMPORTANT SAFETY INFORMATION (CONT'D)

CONTRAINDICATIONS

ANNOVERA (segesterone acetate and ethinyl estradiol vaginal system) is contraindicated and should not be used in women with a high risk of arterial or venous thrombotic diseases; current or history of breast cancer or other estrogen or progestin-sensitive cancer; liver tumors, acute hepatitis, or severe (decompensated) cirrhosis; undiagnosed abnormal uterine bleeding; hypersensitivity to any of the components of ANNOVERA; and use of Hepatitis C drug combinations containing ombitasvir/paritaprevir/ritonavir, with or without dasabuvir.

WARNINGS AND PRECAUTIONS

- Stop ANNOVERA if a thrombotic or thromboembolic event occurs, and at least 4 weeks before and through 2 weeks after major surgery. Start ANNOVERA no earlier than 4 weeks after delivery, in females who are not breastfeeding. Consider cardiovascular risk factors before initiating in all females, particularly those over 35 years.
- Discontinue if jaundice occurs.
- Stop ANNOVERA prior to starting therapy with the combination drug regimen ombitasvir/paritaprevir/ritonavir. ANNOVERA can be restarted 2 weeks following completion of this regimen.
- Do not prescribe ANNOVERA for females with uncontrolled hypertension or hypertension with vascular disease. Monitor blood pressure and stop use if blood pressure rises significantly in females with well-controlled hypertension.
- Monitor glucose in pre-diabetic or diabetic females taking ANNOVERA. Consider an alternate contraceptive method for females with uncontrolled dyslipidemias.
- Patients using ANNOVERA who have a significant change in headaches or irregular bleeding or amenorrhea should be evaluated. ANNOVERA should be discontinued if indicated.
- Other warnings include: gallbladder disease; depression; cervical cancer; increased serum concentrations of binding globulins; hereditary angioedema; chloasma (females who tend to develop chloasma should avoid exposure to the sun or UV radiation while using ANNOVERA); toxic shock syndrome (TSS) (if a patient exhibits symptoms of TSS, remove ANNOVERA, and initiate appropriate medical treatment); vaginal use (ANNOVERA may not be suitable for females with conditions that make the vagina more susceptible to vaginal irritation or ulceration).

ADVERSE REACTIONS

The most common adverse reactions reported in at least 5% of women who received ANNOVERA were: headache/migraine, nausea/vomiting, vulvovaginal mycotic infection/candidiasis, lower/upper abdominal pain, dysmenorrhea, vaginal discharge, urinary tract infection, breast pain/tenderness/discomfort, bleeding irregularities including metrorrhagia, diarrhea, and genital pruritus.

DRUG INTERACTIONS

Drugs or herbal products that induce certain enzymes, including CYP3A4, may decrease the effectiveness of ANNOVERA or increase breakthrough bleeding. Counsel patients to use a back-up or alternative method of contraception when enzyme inducers are used with ANNOVERA.

INDICATION

ANNOVERA is a progestin/estrogen combination hormonal contraceptive indicated for use by females of reproductive potential to prevent pregnancy.

Limitations of Use: ANNOVERA has not been adequately studied in females with a body mass index >29 kg/m^2.

Please note this information is not comprehensive. Please see Full Prescribing Information, including BOXED WARNING, at ANNOVERA.com/pi.pdf

References: 1. Annovera® [Full Prescribing Information]. Raleigh, NC: Mayne Pharma; 2023.

mayne pharma

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