



Dear Healthcare Professional:

Wouldn't it be nice if there were a patient support program designed to supplement the expert advice you give your patients with type 2 diabetes? Well, look no further than *BYETTA By Your Side*SM.

BYETTA By Your Side is a free support program that provides information and motivation that helps patients start therapy, stay on therapy, and manage their type 2 diabetes. To provide you with a fresh look at some of the benefits of BYETTA[®] and the *BYETTA By Your Side* support program, we've created this e-mail for your review.

BYETTA is indicated as an adjunct to diet and exercise to improve glycemic control in adults with type 2 diabetes mellitus.

BYETTA select safety information

- Based on postmarketing data, BYETTA has been associated with acute pancreatitis, including fatal and non-fatal hemorrhagic or necrotizing pancreatitis. If pancreatitis is suspected, BYETTA should be discontinued promptly. BYETTA should not be restarted if pancreatitis is confirmed.
- The risk of hypoglycemia is increased when BYETTA is used in combination with a sulfonylurea. Clinicians may consider reducing the sulfonylurea dose.
- BYETTA should not be used in patients with severe renal impairment or end-stage renal disease and should be used with caution in patients with renal transplantation.

For additional Important Safety Information and Important Limitations of Use, please see below and by clicking the links to the [Prescribing Information](#) and [Medication Guide](#).

It is our goal to provide you with timely and relevant information. We hope you find this e-mail of use when considering treatment options for your patients with type 2 diabetes. If you have any questions about BYETTA, please contact your sales representative, www.ByettaHCP.com, or call the Amylin/Lilly Customer Support Center at 1-800-868-1190.

Prescribing Information

Medication Guide

Important Safety Information

Simply put, Sylvia wanted a type 2 diabetes therapy that could help her meet her treatment goals.

BYETTA worked for her.



It's time more patients with type 2 diabetes like Sylvia benefited from what BYETTA offers:

- The BYETTA By Your SideSM patient support program may help lead to success.
- BYETTA delivers significant reductions in postprandial glucose, which can result in improved A1C control.¹
- BYETTA has a proven history—5 years on the market, over 1 million patients,* and 7.5 years of clinical experience.

Powerful A1C control with potential weight loss.

- BYETTA is not indicated for the management of obesity, and weight change was a secondary endpoint in clinical trials.



To learn more about BYETTA By Your Side, ask your BYETTA sales representative for a copy of the BYETTA By Your Side program guide.



*SDI Data, March 2009.

BYETTA By Your Side is a free support program that provides information and motivation that helps patients start therapy, stay on therapy, and manage their type 2 diabetes.

Through a variety of resources, BYETTA By Your Side helps create a positive experience for patients throughout their therapy.

- Provides patients with support, as well as tips and advice from a team of diabetes experts.
- Offers tools that may enhance patient-physician discussions.
- Contacts are timed so that patients receive them at important points in their treatment.

90% of BYETTA By Your Side members were taking BYETTA as prescribed by their doctors.²



Indication

BYETTA is indicated as an adjunct to diet and exercise to improve glycemic control in adults with type 2 diabetes mellitus.

Important limitations of use

- BYETTA is not a substitute for insulin. BYETTA should not be used in patients with type 1 diabetes or for the treatment of diabetic ketoacidosis.
- The concurrent use of BYETTA with insulin has not been studied and cannot be recommended.
- BYETTA has not been studied in patients with a history of pancreatitis. Consider other antidiabetic therapies in patients with a history of pancreatitis.

Important Safety Information

Contraindications

- BYETTA is contraindicated in patients with prior severe hypersensitivity reactions to exenatide or to any of the product components.

Warnings and precautions

- Based on postmarketing data BYETTA has been associated with acute pancreatitis, including fatal and non-fatal hemorrhagic or necrotizing pancreatitis. If pancreatitis is suspected, BYETTA should be discontinued promptly. BYETTA should not be restarted if pancreatitis is confirmed.
- The risk of hypoglycemia is increased when BYETTA is used in combination with a sulfonylurea. Clinicians may consider reducing the sulfonylurea dose.
- There have been postmarketing reports of renal impairment sometimes requiring hemodialysis and kidney transplantation. BYETTA should not be used in patients with severe renal impairment or end-stage renal disease and should be used with caution in patients with renal transplantation. Caution should be applied when initiating BYETTA or escalating the dose of BYETTA in patients with moderate renal failure.
- Use of BYETTA is not recommended in patients with severe gastrointestinal disease (e.g., gastroparesis).
- There have been postmarketing reports of hypersensitivity reactions (e.g., anaphylaxis and angioedema). If hypersensitivity reaction occurs, the patient should discontinue BYETTA and other suspect medications and promptly seek medical advice.

Adverse reactions

- The most common ($\geq 5\%$) adverse reactions occurring more frequently than placebo in clinical trials were nausea, hypoglycemia, vomiting, diarrhea, feeling jittery, dizziness, headache, and dyspepsia. Nausea usually decreases over time.

Drug interactions

- There have been postmarketing reports of increased international normalized ratio (INR) sometimes associated with bleeding with concomitant use of warfarin and BYETTA. Monitor INR frequently until stable upon initiation or alteration of BYETTA therapy.

Use in specific populations

- Based on animal data, BYETTA may cause fetal harm. BYETTA should be used during pregnancy only if the potential benefit justifies the potential risk to the fetus.
- Caution should be exercised when BYETTA is administered to a nursing woman.

For complete safety profile and other important prescribing considerations, see the [Prescribing Information](#) and [Medication Guide](#).

References: 1. Monnier L, Lapinski H, Colette C. Contributions of fasting and postprandial plasma glucose increments to the overall diurnal hyperglycemia of type 2 diabetic patients: variations with increasing levels of HbA1c. *Diabetes Care*. 2003;26(3):881-885. 2. Data on file, Amylin Pharmaceuticals, Inc. and Lilly USA, LLC.

Click here to learn more about BYETTA
visit www.ByettaHCP.com



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Byetta[®]
exenatide injection