

AVAILABLE NOW:

VENLAFAXINE EXTENDED RELEASE TABLETS
OFFER A NEW ALTERNATIVE FOR TREATING
MAJOR DEPRESSIVE DISORDER (MDD)

The only venlafaxine HCl extended-release formulation in a single 225-mg strength¹

- Equal doses of venlafaxine HCl extended-release tablets are bioequivalent to Effexor XR® (venlafaxine HCl) extended-release capsules when administered under fed conditions^{1*}
- Venlafaxine Extended Release Tablets are not AB rated to Effexor XR

Options for patients with MDD receiving 225 mg of extended-release venlafaxine HCI 3 capsules 2 capsules Venlafaxine Extended Release Tablet OR Must be taken with food; capsules may be opened and sprinkled. Must be taken with food and swallowed whole.

 MDD patients should start treatment on 75 mg/day (in some patients, 37.5 mg/day for 4 to 7 days, then increased to 75 mg/day); daily dose can be increased by 75 mg/day at intervals of ≥4 days (maximum 225 mg/day)¹

Venlafaxine Extended Release Tablets are indicated for the treatment of Major Depressive Disorder (MDD) and Social Anxiety Disorder (SAD), also known as Social Phobia, as defined in DSM-IV. Efficacy of venlafaxine HCl was shown in both short-term trials and a longer-term trial in MDD, and in short-term SAD trials.

*Venlafaxine Extended Release Tablets are not indicated for the treatment of generalized anxiety disorder or panic disorder.

Please see Important Safety Information on reverse side. Please see accompanying full Prescribing Information, including complete boxed warning.

Venlafaxine Extended Release Tablets (VENLAFAXINE Tablets HYDROCHLORIDE)

37.5 mg 75 mg 150 mg 225 mg

WARNING: Suicidality and Antidepressants

See full Prescribing Information for complete boxed warning.

Increased risk of suicidal thinking and behavior has been reported in children, adolescents and young adults taking antidepressants for major depressive disorder and other psychiatric disorders. Venlafaxine Extended Release Tablets are not approved for use in pediatric patients.

Venlafaxine Extended Release Tablets: a new alternative treatment for patients with Major Depressive Disorder and Social Anxiety Disorder

- Copay assistance program for some patients
- Potentially lower cost than Effexor XR® (venlafaxine HCl) extended-release capsules for pharmacies
- Venlafaxine Extended Release Tablets are not AB rated to Effexor XR
- Extensive promotional support, including Upstate Pharma sales representatives, advertising, and direct marketing

NDC and WAC† for Venlafaxine Extended Release Tablets

| Quantity | mg | NDC | WAC | |
|----------|------|--------------|----------|--|
| 30 | 37.5 | 65580-301-03 | \$77.70 | |
| 30 | 75 | 65580-302-03 | \$87.00 | |
| 30 | 150 | 65580-303-03 | \$94.80 | |
| 30 | 225 | 65580-304-03 | \$181.80 | |
| 90 | 37.5 | 65580-301-09 | \$233.10 | |
| 90 | 75 | 65580-302-09 | \$261.00 | |
| 90 | 150 | 65580-303-09 | \$284.40 | |
| 90 | 225 | 65580-304-09 | \$545.40 | |



[†]Represents the Wholesale Acquisition Cost (WAC), as that term is defined by federal law [42 U.S.C. 1395w-3a(c)(6)(B)] and understood in the industry, as reported by UCB to drug pricing publications. WAC does not include the value of any chargebacks, discounts, rebates, or other reductions in price that may ultimately be provided to any customer.

IMPORTANT SAFETY INFORMATION

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Increased risk of suicidal thinking and behavior has been reported in children, adolescents and young adults taking antidepressants for major depressive disorder (MDD) and other psychiatric disorders. Venlafaxine Extended Release Tablets are not approved for use in pediatric patients.

Venlafaxine Extended Release Tablets (venlafaxine hydrochloride) are indicated for the treatment of Major Depressive Disorder (MDD) and Social Anxiety Disorder (SAD). Efficacy of venlafaxine HCl was shown in both short-term trials and a longer-term trial in MDD, and in short-term SAD trials. Venlafaxine Extended Release Tablets are contraindicated in patients taking monoamine oxidase inhibitors (MAOIs).

All patients should be monitored appropriately and observed closely for clinical worsening and suicidality, especially at the beginning of drug therapy, or at the time of increases or decreases in dose. Such monitoring should include daily observation by families and caregivers for emergence of agitation, irritability, unusual changes in behavior, or emergence of suicidality.

Venlafaxine Extended Release Tablets should not be used in combination with an MAOI, or within at least 14 days of discontinuing treatment with an MAOI. At least 7 days should be allowed after stopping Venlafaxine Extended Release Tablets before starting an MAOI. The development of a potentially life-threatening serotonin syndrome may occur with Venlafaxine Extended Release Tablets, particularly if used concomitantly with serotonergic drugs (including SSRIs, SNRIs, and triptans) or with MAO inhibitors.

Treatment with venlafaxine hydrochloride is associated with sustained hypertension in some patients. Regular blood pressure monitoring is recommended. Mydriasis has been reported in association with venlafaxine; therefore, patients with raised intraocular pressure or those at risk of acute narrow-angle glaucoma should be monitored.

Dosing must be individualized according to the patient's hepatic and renal function status. Abrupt discontinuation or dose reduction has been associated with discontinuation symptoms (generally self-limiting; serious symptoms possible). A gradual reduction in the dose rather than abrupt cessation is recommended.

After treatment with venlafaxine hydrochloride, insomnia and nervousness, activation of mania/hypomania, symptomatic hyponatremia, seizures, abnormal bleeding (most commonly ecchymosis), clinically relevant increases in serum cholesterol, interstitial lung disease and eosinophilic pneumonia have been reported. Venlafaxine Extended Release Tablets should be used

cautiously in patients with a history of seizures. Measurement of serum cholesterol should be considered during long-term treatment. Patients should be cautioned about the risk of bleeding associated with concomitant use of Venlafaxine Extended Release Tablets and NSAIDs, aspirin, or other drugs that affect coagulation.

Venlafaxine Extended Release Tablets should be used during pregnancy and nursing only if clearly needed due to the potential for serious adverse reactions.

Adverse reactions occurring in short-term studies of major depressive disorder* were abnormal ejaculation, gastrointestinal complaints (nausea, dry mouth, anorexia), CNS complaints (dizziness, somnolence, abnormal dreams) and sweating. Adverse reactions occurring in short-term studies of social anxiety disorder* were asthenia, gastrointestinal complaints (anorexia, dry mouth, nausea), CNS complaints (anxiety, insomnia, libido decreased, nervousness, somnolence, dizziness), abnormalities of sexual function (abnormal ejaculation, orgasmic dysfunction, impotence), yawn, sweating, and abnormal vision.

*Occurring in at least 5% of patients receiving venlafaxine extended release capsules and at a rate at least twice that of placebo.

Please see accompanying full Prescribing Information, including complete boxed warning.

Reference: 1. Venlafaxine Extended Release Tablets [package insert]. Wilmington, NC: Osmotica Pharmaceutical Corp.: 2008.

Effexor XR is a registered trademark of Wyeth.

For more information, call 1.888.299.1053 or visit www.VERTablets.com

For:

Marketed by:





Venlafaxine
Extended Release
Tablets (VENLAFAXINE Tablets HYDROCHLORIDE)

37.5 mg 75 mg 150 mg