

An easy ADHD treatment choice.' Read on for more important resources.



INDICATION

Qelbree is indicated for the treatment of Attention-Deficit/ Hyperactivity Disorder (ADHD) in pediatric patients ages 6 to 17.

IMPORTANT SAFETY INFORMATION

WARNING: SUICIDAL THOUGHTS AND BEHAVIORS

In clinical studies, higher rates of suicidal thoughts and behaviors were reported in pediatric patients with ADHD treated with Qelbree than in patients treated with placebo. Closely monitor all Qelbree-treated patients for clinical worsening and for emergence of suicidal thoughts and behaviors.

Please see full <u>Prescribing Information</u>, including Boxed Warning and Important Safety Information, on page 3.





Have questions? We're here to help.

1-866-398-0833

Open Monday to Friday 8:30 am to 6:30 pm ET.



covermymeds®

Qelbree is available or listed on

covermymeds.com





Card not working? Call

1-855-725-7736



Qelbree HCP.com

Order samples online, and ship directly to patients.



IMPORTANT SAFETY INFORMATION (CONT'D)

CONTRAINDICATIONS

- Concomitant administration of a monoamine oxidase inhibitor (MAOI), or dosing within 14 days after discontinuing an MAOI, because of an increased risk of hypertensive crisis
- Concomitant administration of sensitive CYP1A2 substrates or CYP1A2 substrates with a narrow therapeutic range

WARNINGS & PRECAUTIONS

- Heart rate, blood pressure increases: Qelbree can cause an increase in diastolic blood pressure and heart rate. Assess these measures prior to starting therapy, following increases in dosage, and periodically during therapy
- Activation of mania or hypomania: Noradrenergic drugs may induce a manic or mixed episode in patients with bipolar disorder. Prior to initiating treatment with Qelbree, screen patients to determine if they are at risk for bipolar disorder. Screening should include a detailed psychiatric history, including a personal or family history of suicide, bipolar disorder, and depression
- Somnolence and fatigue: Patients should not perform activities requiring mental alertness, such as operating a motor vehicle or hazardous machinery, due to potential somnolence (including sedation or lethargy) and fatigue, until they know how they will be affected by Qelbree

ADVERSE REACTIONS

The most common adverse reactions (≥5% and at least twice the rate of placebo for any dose) were somnolence, decreased appetite, fatigue, nausea, vomiting, insomnia, and irritability.

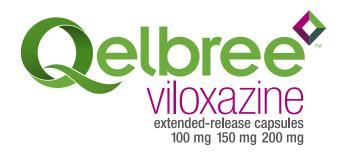
DOSING SAFETY INFORMATION

- Swallow Qelbree capsules whole or sprinkle entire contents on a teaspoonful of applesauce and consume all within 2 hours, without regard to meals. Do not cut, crush, or chew the capsules
- Severe renal impairment: Initiate Qelbree at 100 mg once daily and increase by 50 mg to 100 mg at weekly intervals to a maximum recommended dosage of 200 mg once daily
- Prior to initiating treatment, following increases in dosage, and periodically during therapy, measure heart rate and blood pressure
- Qelbree is a strong CYP1A2 inhibitor. Coadministration with moderately sensitive CYP1A2 substrates (eg, clozapine and pirfenidone) is not recommended. If coadministered, dose reduction may be warranted
- Qelbree is a weak inhibitor of CYP2D6 and CYP3A4, which
 increases exposure of those substrates (eg, dextromethorphan
 and alfentanil) when coadministered with Qelbree. Monitor
 patients for adverse reactions and adjust dosages of
 substrates as clinically indicated
 - -For a more complete list of drug-to-drug interactions, including clinical effects and examples, please see table 2 in section 7 of the full Prescribing Information

PREGNANCY & LACTATION

 Qelbree may cause maternal harm. It is not known if Qelbree passes into breastmilk or if Qelbree has an effect on the breastfed infant. Discontinue Qelbree if the risks of therapy during pregnancy outweigh the benefits

REFERENCE: 1. Qelbree [package insert]. Rockville, MD: Supernus Pharmaceuticals, Inc.



Please see full <u>Prescribing Information</u>, including Boxed Warning and Important Safety Information, on page 3.



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