Taking control can start here.

Your strength.
Our therapy.

Use
LUPRON DEPOT® (leuprolide acetate for depot suspension) 3.75 mg for 1-month and 11.25 mg for 3-month administration are used for the management of endometriosis, including pain relief and reduction of endometriotic lesions. LUPRON DEPOT with daily norethindrone acetate 5 mg is also indicated for initial management of endometriosis and for management of recurrence of symptoms. The recommended initial treatment is no more than 6 months. Repeat treatment for endometriosis should be limited to 6 months.

Safety Considerations
• You should not receive LUPRON DEPOT if you are or may become pregnant, are breast-feeding or have undiagnosed vaginal bleeding • Increased endometriosis symptoms (i.e. pelvic pain or pressure and/or pain during intercourse) may occur for 1 or 2 weeks after starting this drug • Development or worsening of depression has occurred • A condom, a diaphragm with contraceptive jelly, or a copper IUD is required to prevent pregnancy • Thinning of the bones, which may not be completely reversible, can occur during treatment with this drug • Reports of convulsions have occurred in patients taking leuprolide acetate • Norethindrone acetate used as add-back therapy with LUPRON DEPOT has additional serious risks and considerations • See the Important Safety Information section for add-back risks and considerations

Please see Use and Important Safety Information on back cover. Please see accompanying full Prescribing Information, or visit luprongyn.com/prescribing-information
Endometriosis is a common health problem in women. It occurs when endometrium—tissue that normally lines the uterus—grows outside the uterus. These abnormal growths are called lesions.²

Estrogen fuels the growth of lesions, which then bleed and break down, causing your painful symptoms.²

Pain is the most common symptom of endometriosis.²

You may be dealing with²,³:
- Pelvic and lower back pain—especially surrounding your periods
- Painful intercourse
- Painful periods
- Painful urination and/or bowel movements

Finding the cause of your pain can be frustrating.¹,⁴

There are many possible causes of pelvic pain, which can make diagnosing endometriosis difficult.³⁵ On top of that, your pain level won’t necessarily relate to the number or size of endometriosis lesions.⁶

You are not alone.

About 5 million women in the United States suffer with endometriosis.³
Our Therapy: LUPRON DEPOT + Add-Back*.
LUPRON DEPOT® turns off the fuel that feeds endometriosis.

LUPRON DEPOT therapy decreases estrogen.
By reducing the amount of estrogen in the body, LUPRON DEPOT turns off the fuel that feeds endometriosis to help relieve pain and shrink endometriosis lesions.7

In 2 clinical studies, LUPRON DEPOT helped relieve pain in women with endometriosis.8

Women Who Found Relief
Within 30 days of completing treatment with LUPRON DEPOT (6 months of therapy)

53% of 155 patients found relief from pelvic pain
56% of 129 patients found relief from pain during intercourse

Women Who Sustained Relief
12 months after completing treatment with LUPRON DEPOT (6 months of therapy)

53% of 30 patients found continued relief from pelvic pain
76% of 25 patients found continued relief from pain during intercourse

Safety Considerations
The most common side effects of LUPRON DEPOT include hot flashes, vaginal dryness, headaches, changes in mood, decreased interest in sex, depression, and/or the occurrence of forgetfulness.7

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Visit LupronGyn.com to learn more

What to expect during a full 6-month course of LUPRON DEPOT therapy7

Estrogen levels temporarily increase after treatment
Increased estrogen levels may temporarily worsen your symptoms

Estrogen levels decrease after 1 to 2 weeks, and you start to feel relief from endometriosis pain

1 2 3 4 5 6

Months of Treatment
For illustrative purposes only. Responses may vary by individual patients.

If your endometriosis symptoms recur after your initial course of therapy, your doctor can prescribe an additional 6 months of treatment, along with add-back* therapy. Your doctor should assess your bone density before retreatment. Retreatment should be limited to 6 months.7

Will I go into early menopause?
LUPRON DEPOT does not put you into menopause, although you may experience similar effects such as hot flashes and a break from your normal menstrual cycle. These effects are temporary and reversible after therapy is stopped. In a clinical study, 95% of women resumed a normal cycle within 3 months after the end of LUPRON DEPOT therapy.7

*Norethindrone acetate 5 mg.

Visit LupronGyn.com to learn more
Our Therapy: LUPRON DEPOT + Add-Back*.
Add-back* manages side effects without making your treatment less effective.

Add-back* helps reduce hot flashes.
In a clinical study, after 6 months of therapy, patients taking LUPRON DEPOT® + Add-back* reported

63%

fewer average number of days with hot flashes than women taking LUPRON DEPOT alone

67%

fewer average maximum number of hot flashes per day than women taking LUPRON DEPOT alone

Add-back* helps minimize loss of bone density.
Women taking LUPRON DEPOT + Add-back* therapy also experienced significantly less bone density loss than women taking LUPRON DEPOT alone.7

Safety Considerations
Thinning of bones may occur during therapy with LUPRON DEPOT alone, which may not be completely reversible in all women.7

*Norethindrone acetate 5 mg.

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Important Safety Information
Do not take LUPRON DEPOT if you are or may become pregnant, are breast-feeding, have undiagnosed vaginal bleeding, or if you have experienced any type of allergic reaction to LUPRON DEPOT or similar drugs.

You should not take norethindrone acetate with LUPRON DEPOT if you currently have or have previously had any clotting disorder, heart disease, stroke, impaired liver function or liver disease, or breast cancer.

Tell your health care provider before beginning treatment with norethindrone acetate if you currently have or have previously had high cholesterol, migraines, epilepsy, depression, or smoke.

During treatment with LUPRON DEPOT and norethindrone acetate, immediately tell your doctor if you have a sudden loss of vision, double vision, or if migraine headaches occur. You should notify your doctor if you experience fluid retention, seizure, asthma or worsening of asthmatic symptoms, heart or kidney problems.

Thinning of the bones may occur during therapy with LUPRON DEPOT alone, which may not be completely reversible in some patients. Since some conditions may increase the possibility of bone thinning, you should tell your doctor if you smoke, use alcohol in excess, have a family history of osteoporosis (thinning of the bones with fractures), or are taking other medications that can cause thinning of the bones. You should be aware that if you have these conditions, treatment with LUPRON DEPOT alone is not advisable and combination with norethindrone acetate should be considered. If a second course of treatment with LUPRON DEPOT is being considered, bone mineral testing is recommended and retreatment should include combination with norethindrone acetate.

After beginning LUPRON DEPOT, your estrogen levels will increase for 1 or 2 weeks. During this time, you may notice an increase in your current symptoms. You should notify your doctor if you develop any new or worsened symptoms after beginning LUPRON DEPOT treatment.

LUPRON DEPOT is not a method of birth control. Even though you may not have periods, unprotected intercourse could result in pregnancy. You should use non-hormonal birth control, such as condoms, a diaphragm with contraceptive jelly, or a copper IUD, to prevent pregnancy. If you think you have become pregnant while on LUPRON DEPOT, talk to your doctor immediately.

There is a possibility of the development or worsening of depression and/or the occurrence of forgetfulness. Patients who have a history of depression should be carefully observed during treatment.

Convulsions have been observed in patients taking leuprolide acetate. The most common side effects of LUPRON DEPOT include hot flashes, vaginal dryness, headaches, changes in mood, decreased interest in sex, depression, and/or the occurrence of forgetfulness.

LUPRON DEPOT must be administered in your doctor’s office.

For more information, talk with your health care provider.

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