

Lupron Depot[®]

(leuprolide acetate for depot suspension)

3.75 mg/ -3 Month 11.25 mg

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 prescription medications used for the management of endometriosis, including pain relief and reduction of endometriotic lesions. LUPRON DEPOT 3.75 mg for 1-month and 11.25 mg for 3-month administration may be used with daily norethindrone acetate 5 mg as add-back therapy for initial management of the painful symptoms of endometriosis and for management of recurrence of symptoms. Add-back therapy is intended to reduce the thinning of bone and reduce hot flashes associated with LUPRON DEPOT. For safe and effective use of norethindrone acetate and LUPRON DEPOT 11.25 mg, refer to the norethindrone prescribing information.

Initial treatment course of LUPRON DEPOT (whether used alone or with add-back therapy) is limited to 6 months. A single retreatment course of not more than 6 months of LUPRON DEPOT plus add-back therapy may be used if symptoms recur. LUPRON DEPOT should not be used alone for retreatment. The total duration of therapy with LUPRON DEPOT plus add-back therapy should not exceed 12 months due to concerns about adverse impact on bone thinning.

Safety Considerations

- You should not receive LUPRON DEPOT if you are pregnant, think you may be pregnant, or are planning to become pregnant during treatment with LUPRON DEPOT; are breast-feeding; have undiagnosed uterine bleeding; or have experienced any type of allergic reaction to LUPRON DEPOT or similar drugs
- Thinning of your bones can occur and may not be completely reversible after stopping treatment; do not exceed the prescribed duration of treatment
- LUPRON DEPOT may cause harm to your unborn child
- A condom, a diaphragm with contraceptive jelly, or a copper IUD is required to prevent pregnancy
- Serious allergic reactions can occur
- Endometriosis symptoms such as pelvic pain or pressure or pain during intercourse may increase during the first days of therapy
- Convulsions have occurred in patients taking LUPRON DEPOT
- Development or worsening of depression has occurred in patients taking norethindrone acetate
- If your doctor prescribes norethindrone acetate as add-back therapy in combination with LUPRON DEPOT 11.25 mg, please refer to the norethindrone acetate prescribing information for more information about its safe and effective use
- Norethindrone acetate used as add-back therapy with LUPRON DEPOT 3.75 mg 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 in back.

Please see accompanying full Prescribing Information, or visit luprongyn.com/prescribing-information

Your Strength.

You've probably been dealing with endometriosis symptoms for years.



On average,
it takes more than
9 years
for women with
endometriosis to find
the right diagnosis.¹

Pain is the most common symptom of endometriosis.²

You may be dealing with^{2,3}:

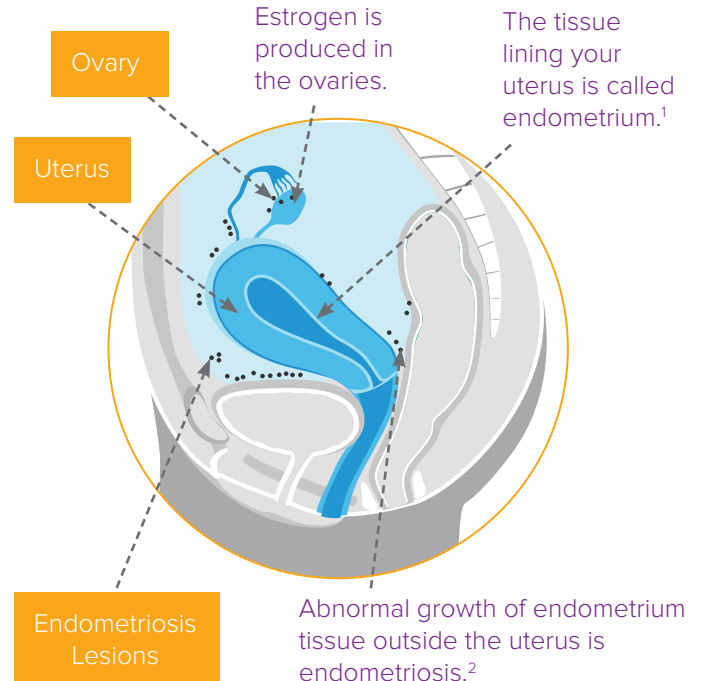
- Pelvic and lower back pain—especially surrounding your periods
- Painful intercourse
- Painful periods
- Painful urination and/or bowel movements

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.³⁻⁵ On top of that, your pain level won't necessarily relate to the number or size of endometriosis lesions.⁶

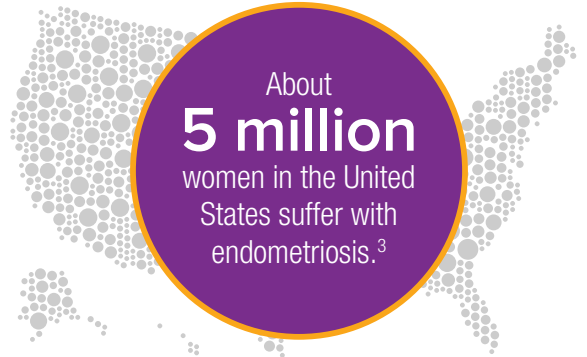
Endometriosis is a common health problem in women. It occurs when endometrium—tissue that normally lines the uterus—grows outside the uterus. These abnormal growths are called lesions.²

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



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

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%

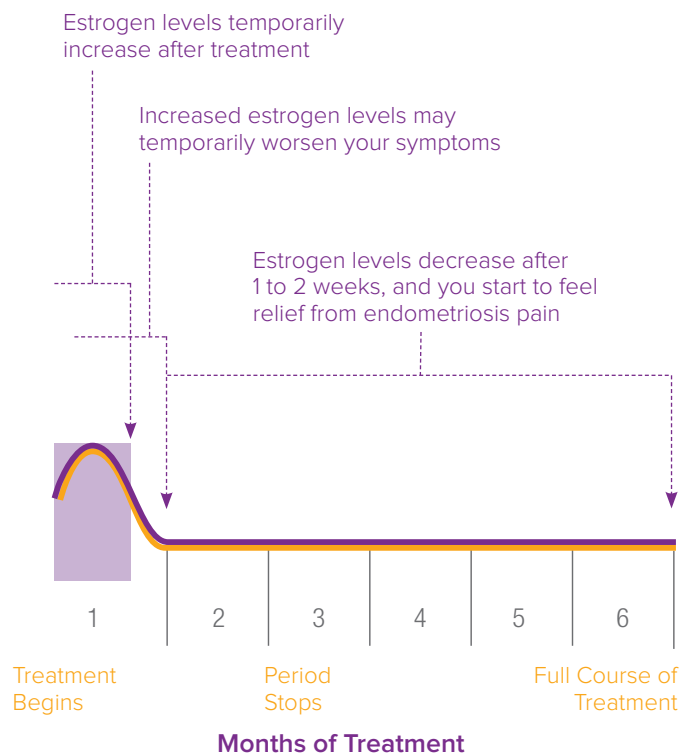
of 25 patients found continued relief from pain during intercourse

Safety Considerations

In clinical trials, the most common side effects of LUPRON DEPOT, occurring in >10% of patients, include hot flashes/sweats, headache/migraine, decreased libido, depression/emotional lability, dizziness, nausea/vomiting, pain, vaginitis, and weight gain/loss.⁷

Please see Use and Important Safety Information in back. Please see accompanying full Prescribing Information, or visit luprongyn.com/prescribing-information

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



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.

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Our Therapy: LUPRON DEPOT + Add-Back*. Add-back* manages side effects without making your treatment less effective.

Taking Control Can Start Here.

Add-back* helps reduce hot flashes.

In a clinical study, after 6 months of therapy, patients taking LUPRON DEPOT® + add-back* reported⁷

63%

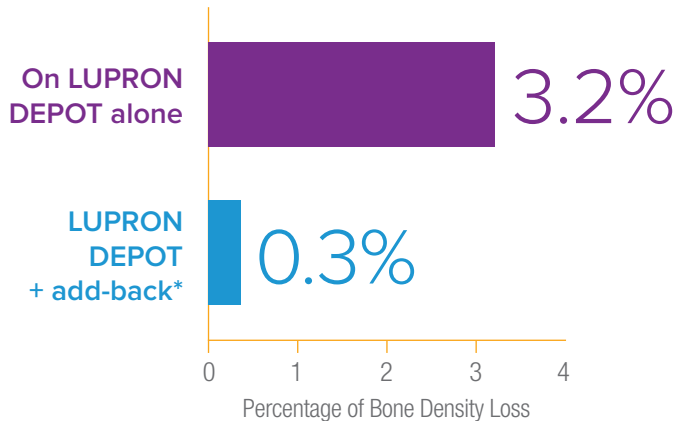
fewer average
number of days with
hot flashes
than women taking
LUPRON DEPOT alone

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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To download your LUPRON DEPOT Savings Card* now, visit: LupronGyn.com

If you have additional questions regarding savings and support, call: 1-855-587-7663

***Eligibility:** Available to patients with commercial prescription insurance coverage for LUPRON DEPOT® (leuprolide acetate for depot suspension) and generic norethindrone acetate who meet eligibility criteria. Co-pay assistance program is not available to patients receiving prescription reimbursement under any federal, state, or government-funded insurance programs (for example, Medicare (including Part D), Medicare Advantage, Medicaid, TRICARE®, Department of Defense, or Veteran's Affairs programs) or where prohibited by law or by the patient's health insurance provider. If at any time a patient begins receiving prescription drug coverage under any such federal, state, or government-funded healthcare program, patient will no longer be able to use the LUPRON DEPOT® card and patient must call 1-855-587-7663 to stop participation. Patients residing in or receiving treatment in certain states may not be eligible. Patients may not seek reimbursement for value received from the LUPRON DEPOT® card from any third-party payers. Offer subject to change or discontinuance without notice. Restrictions, including monthly maximums, may apply. **This is not health insurance.**

Good for out-of-pocket expenses up to \$125 on your 3.75 mg LUPRON DEPOT prescription after the initial \$10 co-pay or up to \$250 on your - 3 Month 11.25 mg LUPRON DEPOT prescription after the initial \$10 co-pay and up to \$25 for generic norethindrone acetate after the initial \$5 co-pay on six occasions when accompanied with a prescription for LUPRON DEPOT. AbbVie reserves the right to rescind, revoke, or amend this offer without notice. LUPRON DEPOT is a registered trademark of AbbVie Inc. You may not combine this offer with any other rebate, coupon, free trial, or similar offer.

Learn more about treating endometriosis with LUPRON DEPOT [here](#).

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References:

1. Greene R, Stratton P, Cleary SD, Ballweg ML, Sinaii N. Diagnostic experience among 4,334 women reporting surgically diagnosed endometriosis. *Fertil Steril*. 2009;91(1):32-39. 2. The American College of Obstetricians and Gynecologists (ACOG). FAQ Endometriosis. ACOG website. <http://www.acog.org/Patients/FAQs/Endometriosis>. Published October 2012. Accessed April 30, 2015. 3. Office on Women's Health. Endometriosis. Womenshealth.gov website. <https://www.womenshealth.gov/a-z-topics/endometriosis>. Updated December 20, 2017. Accessed January 10, 2018. 4. Mao AJ, Anastasi JK. Diagnosis and management of endometriosis: the role of the advanced practice nurse in primary care. *J Am Acad Nurse Pract*. 2010;22(2):109-116. 5. Armstrong C. ACOG updates guideline on diagnosis and treatment of endometriosis. *Am Fam Physician*. 2011;83(1):84-85. 6. ACOG. *Obstet Gynecol*. 2010;116:223-236. Management of endometriosis. Practice Bulletin No. 114. 7. LUPRON DEPOT 3.75 mg and -3 Month 11.25 mg [package insert]. 8. Data on file, AbbVie Inc. ABBVRR162821.

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Important Safety Information

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

If your doctor prescribes you norethindrone acetate in combination with LUPRON DEPOT 11.25 mg, please refer to the norethindrone acetate prescribing information for more information about its safe and effective use.

You should not take norethindrone acetate and LUPRON DEPOT 3.75 mg 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 healthcare provider before beginning treatment with norethindrone acetate and LUPRON DEPOT 3.75 mg if you currently have or have previously had high cholesterol, migraines, epilepsy, or depression, or if you smoke.

During treatment with norethindrone acetate and LUPRON DEPOT 3.75 mg, 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, or 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. Add-back therapy can help reduce the bone loss that occurs with the use of LUPRON DEPOT alone. 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.

Important Safety Information (Contd.)

LUPRON DEPOT may cause harm to your unborn child. 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.

Asthma was reported in women with a history of asthma, sinusitis, and environmental or drug allergies. Serious allergic reactions have also occurred.

After beginning LUPRON DEPOT, your estrogen levels will increase during the first days of therapy. 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.

Seizures have been observed in patients taking LUPRON DEPOT, including patients who have a history of seizures or conditions related to seizures or in patients who are taking medications that are connected to seizures. Seizures have also been reported in patients without any of these conditions.

Depression may worsen while taking norethindrone acetate. Patients who have a history of depression should be carefully observed during treatment. Talk to your doctor if you are experiencing any new or worsening signs of depression.

The most common side effects of LUPRON DEPOT included hot flashes/sweats, headache/migraine, decreased libido (interest in sex), depression/emotional lability (changes in mood), dizziness, nausea/vomiting, pain, vaginitis, and weight gain. These are not all of the possible side effects of LUPRON DEPOT. Talk to your doctor for medical advice about side effects.

LUPRON DEPOT for treatment of endometriosis has been limited to women 18 years of age and older. LUPRON DEPOT is not indicated in postmenopausal women.

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

You are encouraged to report negative side effects of prescription drugs to the FDA. Visit www.fda.gov/medwatch or call 1-800-FDA-1088.

If you cannot afford your medication, contact www.pparx.org for assistance.

For more information, talk with your healthcare provider.

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