DOES YOUR ANTIPARASITIC TREATMENT STACK UP?

	EMVERM (mebendazole)[1]	Albenza® (albendazole)[2]	Stromectol® (ivermectin)[3,4]	Biltricide® (praziquantel)[5,6]
Enterobius vermicularis **(pinworm)**	✓			
Ascaris lumbricoides **(roundworm)**	✓			
Necator americanus **(hookworm)**	✓			
Trichuris trichiura **(whipworm)**	✓			
Taenia solium **(tapeworm)**		✓		
Strongyloides stercoralis **(threadworm)**			✓	
Schistosoma **(flatworm)**				✓

- EMVERM contains **mebendazole,** the same active ingredient that has been trusted by physicians for more than **40 years**[7]

CURE RATES OF EMVERM (MEBENDAZOLE) BY HELMINTH STRAIN[1]

	Pinworm	Roundworm	Hookworm	Whipworm
Cure rates (mean)	95%	98%	96%	68%

EMVERM DOSING[1]:

- **Pinworm:** 1 tablet once
- **Whipworm, roundworm, and hookworm:** 1 tablet morning and evening for 3 consecutive days

If a patient is not cured 3 weeks after treatment, a *second* course of treatment is advised.

INDICATION

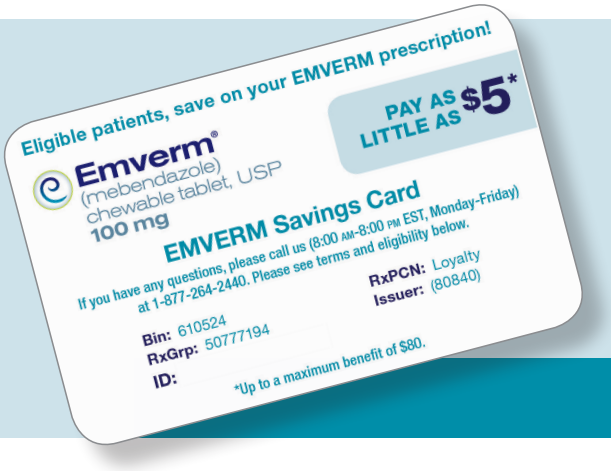
EMVERM is indicated for the treatment of patients two years of age and older with gastrointestinal infections caused by *Ancylostoma duodenale* (hookworm), *Ascaris lumbricoides* (roundworm), *Enterobius vermicularis* (pinworm), *Necator americanus* (hookworm), and *Trichuris trichiura* (whipworm).

IMPORTANT SAFETY INFORMATION

Contraindication: EMVERM is contraindicated in persons with a known hypersensitivity to the drug or its excipients (mebendazole, microcrystalline cellulose, corn starch, anhydrous lactose, sodium starch glycolate, magnesium stearate, stearic acid, sodium lauryl sulfate, sodium saccharin, and FD&C Yellow #6).

Please see additional Important Safety Information on reverse side and accompanying Full Prescribing Information.

Emverm®
(mebendazole)
chewable tablet, USP
100 mg



HELP ELIGIBLE PATIENTS PAY AS LITTLE AS $5 FOR THEIR EMVERM PRESCRIPTIONS

- Offer good for 12 uses per patient
- Subject to eligibility. Individual out-of-pocket costs may vary. Not valid for patients covered under Medicare, Medicaid, or other federal or state programs. Please see full terms, conditions, and eligibility criteria at EmvermRx.com

VISIT EmvermRx.com TO LEARN MORE

IMPORTANT SAFETY INFORMATION (continued)

Warnings and Precautions:

- Risk of convulsions: Convulsions in infants below the age of 1 year have been reported.
- Hematologic effects: Neutropenia and agranulocytosis have been reported in patients receiving mebendazole at higher doses and for prolonged duration. Monitor blood counts in these patients.
- Metronidazole and serious skin reactions: Stevens-Johnson syndrome/toxic epidermal necrolysis (SJS/TEN) have been reported with the concomitant use of mebendazole and metronidazole.

Adverse Reactions from Clinical Trials*: Anorexia, abdominal pain, diarrhea, flatulence, nausea, vomiting, rash.
Adverse Reactions from Postmarketing Experience with Mebendazole*: Agranulocytosis, neutropenia, hypersensitivity including anaphylactic reactions, convulsions, dizziness, hepatitis, abnormal liver tests, glomerulonephritis, Stevens-Johnson syndrome/toxic epidermal necrolysis, exanthema, angioedema, urticaria, alopecia.
*Includes mebendazole formulations, dosages and treatment duration other than EMVERM 100 mg chewable tablet.

Drug Interactions: Concomitant use of EMVERM and metronidazole should be avoided.

Use in Specific Populations:

- Pregnancy: Mebendazole use in pregnant women has not reported a clear association between mebendazole and a potential risk of major birth defects or miscarriages. However, there are risks to the mother and fetus associated with untreated helminthic infection during pregnancy.
- Lactation: Limited data from case reports demonstrate that a small amount of mebendazole is present in human milk following oral administration. There are no reports of effects on the breastfed infant.
- Pediatric Use: The safety and effectiveness of EMVERM 100 mg chewable tablet has not been established in pediatric patients less than two years of age.
- Geriatric Use: Clinical studies of mebendazole did not include sufficient numbers of subjects aged 65 and older to determine whether they respond differently from younger subjects.

Overdosage: In patients treated at dosages substantially higher than recommended or for prolonged periods of time, the following adverse reactions have been reported: alopecia, reversible transaminase elevations, hepatitis, agranulocytosis, neutropenia, and glomerulonephritis.

- Symptoms and signs of overdose: In the event of accidental overdose, gastrointestinal signs/symptoms may occur.
- Treatment of overdose: There is no specific antidote.

Patient Counseling: Healthcare professionals should advise the patient to read the FDA-approved patient labeling (Patient Information). Advise patients that:

- Taking EMVERM and metronidazole together may cause serious skin reactions and should be avoided.
- EMVERM can be taken with or without food.

To report SUSPECTED ADVERSE REACTIONS contact Amneal Specialty, a division of Amneal Pharmaceuticals LLC at 1-877-835-5472 or FDA at 1-800-FDA-1088 or www.fda.gov/medwatch.

Please see additional Important Safety Information on reverse side and accompanying Full Prescribing Information.

References: 1. EMVERM [prescribing information]. **2.** ALBENZA [prescribing information]. **3.** STROMECTOL [prescribing information]. Whitehouse Station, NJ: Merck & Co., Inc; 2018. **4.** Parasites—strongyloides. Centers for Disease Control and Prevention website. https://www.cdc.gov/parasites/strongyloides/biology.html. Updated July 30, 2019. Accessed August 22, 2019. **5.** BILTRICIDE [prescribing information]. Wayne, NJ: Bayer HealthCare Pharmaceuticals Inc; 2014. **6.** Wendt GR, Collins JN, Pei J, et al. Flatworm-specific transcriptional regulators promote the specification of tegumental progenitors in *Schistosoma mansoni*. *eLife*. 2018;7:e33221. **7.** Friedman AJ, Ali SM, Albonico M. [published online December 24, 2012.] *J Trop Med*. 2012;2012:590463.

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