

**THE ONLY AVAILABLE FDA-APPROVED PRESCRIPTION
TREATMENT INDICATED FOR PINWORM**



Emverm[®]
(mebendazole)
chewable tablet, USP
100 mg

**PROVIDES A
95% CURE RATE
AGAINST PINWORM¹**

**PRESCRIBE EMVERM
WITH CONFIDENCE**

MEBENDAZOLE—prescribed by
physicians for more than **40 YEARS²**

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 throughout the piece and accompanying Full Prescribing Information.

PINWORM IS APPROXIMATELY

3X MORE COMMON THAN HEAD LICE^{3,4}

- Pinworm (*Enterobius vermicularis*) is the most common helminthic parasitic infection in the United States³
- Pinworm may infect up to **40 million people** in the United States, while head lice infects up to 12 million people^{3,4}
- Most pinworm infections occur in preschool- and school-age children (3-14 years)³

PINWORM IS HIGHLY CONTAGIOUS^{3,5}

According to the Centers for Disease Control and Prevention (CDC) and the American Academy of Pediatrics (AAP) *Red Book*^{3,5}

- Pinworm infections are common among caregivers of infected children and other members of the household
- Prevalence may reach **up to 50%** in families with an infected child

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 (continued)

Warnings and Precautions:

- Risk of convulsions: Convulsions in infants below the age of 1 year have been reported

Please see additional Important Safety Information throughout the piece and accompanying Full Prescribing Information.

MOST COMMON SYMPTOMS[†]

- **Perianal and perineal itching** are the most common symptoms of pinworm infection⁶
 - The itching is often worse at night when female pinworms are migrating out of the anus to lay eggs
 - Sleep disturbance, restlessness, and irritability are other symptoms attributed to pinworm
- Pinworm should be suspected in young children with perianal pruritus and restless sleep⁷

OTHER SYMPTOMS MAY INCLUDE^{5,6}:

Abdominal pain	Dysuria	Teeth grinding
Anorexia	Enuresis	Weight loss

PINWORM INFECTION, IF LEFT UNTREATED, CAN LEAD TO COMPLICATIONS⁵

- The irritation, intense scratching, and excoriation of the anal area can lead to a **bacterial superinfection**⁵
- Bacteria carried by pinworms from the rectum to the urinary tract may result in recurrent UTIs⁸

[†]List does not include all potential symptoms.

IMPORTANT SAFETY INFORMATION (continued)

Warnings and Precautions:

- 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

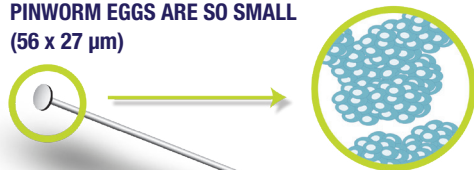
 **Emverm**[®]
(mebendazole)
chewable tablet, USP
100 mg

PINWORM INFECTION CAN BE CHALLENGING TO FULLY ERADICATE

- Pinworm eggs can survive **up to 3 weeks** on fomites in indoor environments, making it easy to infect other household members⁵
- Transmission to the **entire household** can occur by ingesting pinworm eggs found on bedding, clothing, toys, carpets, toilet seats, cell phones, remote controls, etc⁵

APPROXIMATELY
1000 INFECTIVE EGGS
CAN FIT ON THE HEAD OF A PIN⁹

PINWORM EGGS ARE SO SMALL
(56 x 27 μm)



Enterobius vermicularis eggs are infective, sticky, and microscopic⁹

IMPORTANT SAFETY INFORMATION (continued)

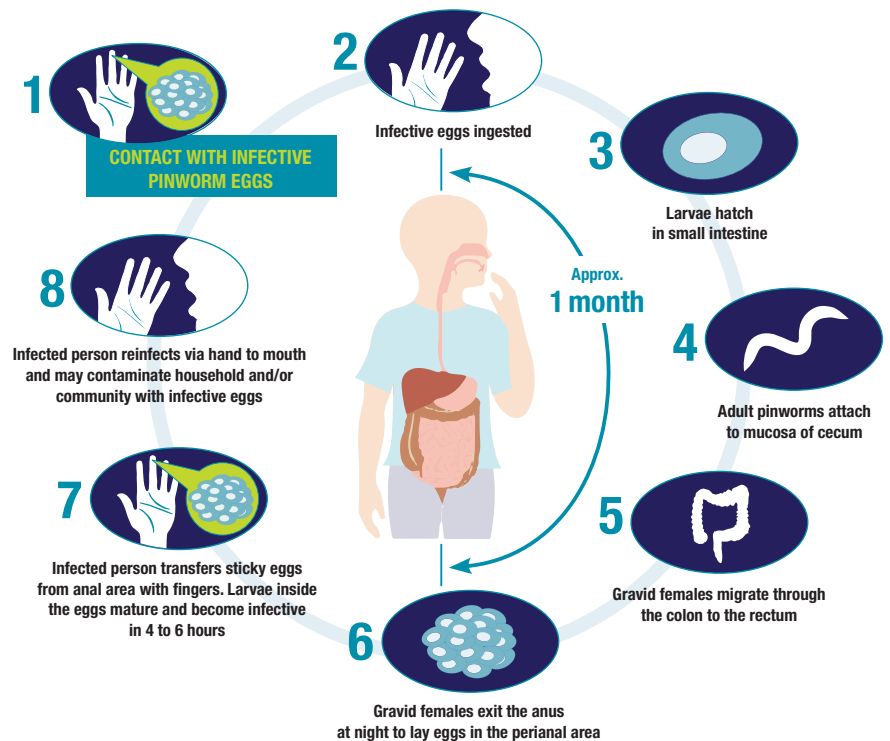
Adverse Reactions from Clinical Trials*: Anorexia, abdominal pain, diarrhea, flatulence, nausea, vomiting, rash.

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.

Please see additional Important Safety Information throughout the piece and accompanying Full Prescribing Information.

PINWORM LIFE CYCLE AND ROUTE OF INFECTION AND REINFECTION³



- One female pinworm can lay **up to 10,000 infective eggs** on the perianal folds of the infected person⁵
- Eggs can become **airborne and inhaled or deposited onto food and swallowed** by other household members³
 - Parents and caregivers should be cautioned not to shake out bed linens, blankets, and towels during an outbreak⁵
 - While important, personal hygiene and housecleaning alone are unlikely to stop an outbreak⁹

IMPORTANT SAFETY INFORMATION (continued)

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

 **Emverm**[®]
(mebendazole)
chewable tablet, USP
100 mg



THE AAP RED BOOK RECOMMENDS MEBENDAZOLE AS ONE OF THE DRUGS OF CHOICE FOR TREATING PINWORM⁵

- **EMVERM** contains **mebendazole**, the active ingredient that has been prescribed by physicians for more than **40 years²**

CURE RATES OF EMVERM (MEBENDAZOLE) BY HELMINTH STRAIN¹

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

IMPORTANT SAFETY INFORMATION (continued)

Use in Specific Populations:

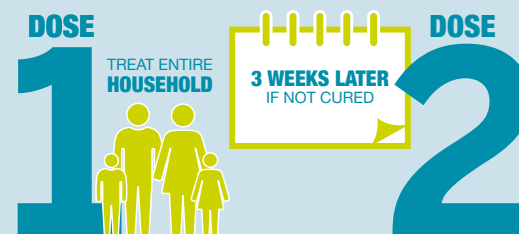
- **Pregnancy:** Mebendazole use in pregnant women has not reported a clear association between mebendazole and a potential risk of major birth defects or miscarriages. However, there are risks to the mother and fetus associated with untreated helminthic infection during pregnancy.

Please see additional Important Safety Information throughout the piece and accompanying Full Prescribing Information.

TREATING THE HOUSEHOLD

- The CDC recommends treating the **entire household** where more than one member is infected or where repeated, symptomatic infections occur¹⁰

TREAT PINWORM INFECTION WITH EMVERM



- Patients should be **prescribed 2 tablets**. EMVERM can often cure pinworm infection with a **single tablet**. However, a *second* tablet may be necessary after 3 weeks to prevent reinfection and to kill any worms that hatched after the first treatment^{1,10}
 - One 100 mg tablet is the **same dose for adults and children** ages 2 and older¹
 - Chewable, kid-friendly tablet can also be swallowed whole or crushed and mixed with food¹

Dosing information for other helminth infections can be found in the accompanying Full Prescribing Information.

IMPORTANT SAFETY INFORMATION (continued)

Use in Specific Populations:

- **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.

 **Emverm[®]**
(mebendazole)
chewable tablet, USP
100 mg



ADVERSE REACTIONS^{1,*}:

REPORTED IN MEBENDAZOLE-TREATED SUBJECTS FROM 39 CLINICAL TRIALS

Gastrointestinal Disorders	Anorexia, abdominal pain, diarrhea, flatulence, nausea, vomiting
Skin and Subcutaneous Tissue Disorders	Rash
FROM POSTMARKETING EXPERIENCE	
Blood and Lymphatic System Disorders	Agranulocytosis, neutropenia
Immune System Disorders	Hypersensitivity including anaphylactic reactions
Nervous System Disorders	Convulsions, dizziness
Hepatobiliary Disorders	Hepatitis, abnormal liver tests
Renal and Urinary Disorders	Glomerulonephritis
Skin and Subcutaneous Tissue Disorders	Toxic epidermal necrolysis, Stevens-Johnson syndrome, exanthema, angioedema, urticaria, alopecia

*Includes mebendazole formulations, dosages, and treatment duration other than EMVERM 100 mg chewable tablet.

ELIGIBLE PATIENTS MAY PAY AS LITTLE AS \$5 WITH THE EMVERM SAVINGS CARD[‡]

2 WAYS FOR PATIENTS TO SAVE!

OPTION 1

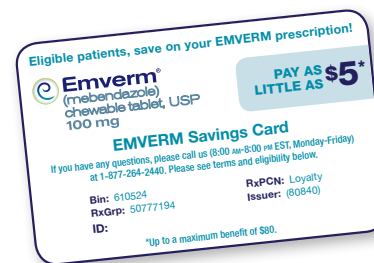
eVoucherRx™ Program

- No cards or coupons needed for most patients with commercial insurance at participating pharmacies
 - List of participating pharmacies available at evoucherrx.relayhealth.com/storelookup

OPTION 2

Download a Savings Card Today

- Eligible patients can download the EMVERM Savings Card at EmvermSupport.com
 - Patients should show their savings card to the pharmacist when they pick up their prescription



LEARN MORE AT EmvermSupport.com

[‡]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 EmvermSupport.com.

IMPORTANT SAFETY INFORMATION (continued)

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

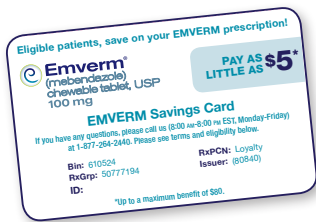
 **Emverm**[®]
(mebendazole)
chewable tablet, USP
100 mg

Please see additional Important Safety Information throughout the piece and accompanying Full Prescribing Information.

EMVERM PROVIDES A 95% CURE RATE AGAINST PINWORM¹

THE ONLY AVAILABLE FDA-APPROVED PRESCRIPTION TREATMENT INDICATED FOR PINWORM

- **EMVERM contains mebendazole**, the active ingredient that has been prescribed by physicians for more than **40 years²**
- Patients should be **prescribed 2 tablets**. EMVERM can often cure pinworm infection with a **single tablet**. However, a *second* tablet may be necessary after 3 weeks to prevent reinfection and to kill any worms that hatched after the first treatment^{1,10}
 - One 100 mg tablet is the **same dose for adults and children** ages 2 and older¹
 - Chewable, kid-friendly tablet can also be swallowed whole or crushed and mixed with food¹



**ELIGIBLE PATIENTS
MAY PAY AS LITTLE AS \$5
FOR THEIR PRESCRIPTION*:**

LEARN MORE AT EmvermSupport.com

*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 EmvermSupport.com.

IMPORTANT SAFETY INFORMATION (continued)

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 accompanying Full Prescribing Information.

References: 1. EMVERM [prescribing information]. 2. Friedman AJ, Ali SM, Albonico M. [published online December 24, 2012.] *J Trop Med*. 2012;2012:590463. 3. Enterobiasis. Centers for Disease Control and Prevention website. <https://www.cdc.gov/dpdx/enterobiasis/index.html>. Updated December 8, 2017. Accessed June 10, 2019. 4. Epidemiology & risk factors. Centers for Disease Control and Prevention website. <https://www.cdc.gov/parasites/lice/head/epi.html>. Updated September 24, 2013. Accessed June 10, 2019. 5. American Academy of Pediatrics. *Red Book: 2018-2021 Report of the Committee on Infectious Diseases*. 31st ed. Itasca, IL: American Academy of Pediatrics; 2018:634-635, 994. 6. Meinking TL, Burkhardt CN, Burkhardt CG. *Clin Dermatol*. 2003;21(5):407-416. 7. Kucic CJ, Martin GL, Sortor BV. *Am Fam Physician*. 2004;69(5):1161-1168. 8. Choudhury S, Kumar B, Pal DK. *Trop Parasitol*. 2017;7(2):119-121. 9. Maguire JH. Intestinal nematodes (roundworms). In: Bennett JE, Dolin R, Blaser MJ, eds. *Mandell, Douglas, and Bennett's Principles and Practice of Infectious Diseases*. 8th ed. Philadelphia, PA: Elsevier Saunders; 2015:3199-3207.e2. 10. Treatment. Centers for Disease Control and Prevention website. <https://www.cdc.gov/parasites/pinworm/treatment.html>. Updated August 30, 2016. Accessed June 10, 2019.



© 2019 Amneal Pharmaceuticals LLC
All rights reserved. Printed in USA
PP-HCP-MEB-US-0066 07/2019

 **Emverm**[®]
(mebendazole)
chewable tablet, USP
100 mg