Acute lymphoblastic leukemia.

Please refer to the enclosed package insert for full prescribing information.

Exactly what ALL patients need.

FLEXIBLE

ACCURATE

CONSISTENT

FDA APPROVED

*Acute lymphoblastic leukemia.
Please refer to the enclosed package insert for full prescribing information.
What is PURIXAN?

PURIXAN (mercaptopurine) oral suspension is indicated for the treatment of patients with acute lymphoblastic leukemia (ALL) as part of a combination regimen.†

PURIXAN is a liquid alternative to the mercaptopurine tablet.

Why PURIXAN?

Accurate Dosing within 2 mg
Flexible Dosing³
Single Daily Dose†
Consistent Absorption³
Predictable Performance³
Better Tasting Medicines Make Adherence Easier in Children¹,⁵,⁶
Only FDA-approved Mercaptopurine Oral Suspension
Easy to Order: 1-888-470-0904

†Please refer to the enclosed package insert for full prescribing information.
NONADHERENCE TO MERCAPTOPURINE RESULTS IN RELAPSE FOR CHILDREN\textsuperscript{9,10,11}

Until 2014, the only marketed formulation of mercaptopurine has been a 50 mg tablet\textsuperscript{3}

Fixed doses are impractical because the dose varies according to the size of the child.\textsuperscript{1}

Fewer than 10\% of children receive a 50 mg tablet (or a multiple of 50 mg) as a daily dose.\textsuperscript{2}

Children with mercaptopurine mean adherence rates <95\% are at a 2.7-fold increased risk of relapse compared to patients with mean adherence rates of 95\% or greater\textsuperscript{(P=.01).\textsuperscript{11}}

Mercaptopurine adherence and steady thiopurine exposure minimize relapse in children.\textsuperscript{11}

44\% of children with ALL\textsuperscript{*} are consuming <95\% of prescribed mercaptopurine and are consequently at risk of relapse.\textsuperscript{9}

Among adherers, high intra-individual variability in TGN\textsuperscript{**} levels contributed to a 4.4-fold increased relapse risk. \textsuperscript{(P=.02)\textsuperscript{11}}

Adherers with varying TGN levels were more likely to have varying mercaptopurine dose intensity and mercaptopurine drug interruptions.\textsuperscript{11}

\textsuperscript{*Acute lymphoblastic leukemia.  \textsuperscript{**Erythrocyte thioguanine nucleotide.}

Please refer to the enclosed package insert for full prescribing information.
PALATABILITY AND ACCEPTABILITY
Better tasting medicines make adherence easier in children\textsuperscript{1,5,6}.

PURIXAN has a pleasant raspberry flavor and is in a liquid form, which makes it much easier for most children to swallow than a tablet.\textsuperscript{1,5}

In a study assessing the palatability of PURIXAN in children with ALL\textsuperscript{5}:

- √ 82% report PURIXAN is \textbf{easy to take all the time}
- √ 77% of children rank PURIXAN’s \textbf{taste ok to good}
- √ 91% of children rank PURIXAN’s \textbf{smell ok to good}

Please refer to the enclosed package insert for full prescribing information.

EASY TO ORDER
To order, please call: 1-888-470-0904

Please refer to the enclosed package insert for full prescribing information.
**CONSISTENT ABSORPTION**

PURIXAN reduced the variability in the absorption of mercaptopurine, proving itself to be a dependable and reliable alternative to the tablet.³

**PREDICTABLE PERFORMANCE**

PURIXAN performs more consistently and predictably than the mercaptopurine tablet.³

In contrast, splitting a mercaptopurine tablet produces an inaccurate dose, further reducing consistency and predictability.³

PURIXAN had substantially lower between-subject variability in maximum plasma concentrations (46% vs 69% coefficient of variation).³

---

**FLEXIBLE & ACCURATE DOSING**

PURIXAN 20 mg/mL oral suspension can be accurately dosed down to 2 mg (0.1 mL) providing an opportunity to administer mercaptopurine in a way that may be more acceptable to children.¹,⁴,⁶

---

**Mercaptopurine Doses Individualized to Body Surface Area (BSA)**

<table>
<thead>
<tr>
<th>Age</th>
<th>BSA (m²)ᵃ</th>
<th>Dose (mg)</th>
<th>Volume (mL)</th>
</tr>
</thead>
<tbody>
<tr>
<td>3 months</td>
<td>0.27-0.33</td>
<td>20-25</td>
<td>1.0-1.3</td>
</tr>
<tr>
<td>1 year</td>
<td>0.47-0.53</td>
<td>35-40</td>
<td>1.8-2.0</td>
</tr>
<tr>
<td>3 years</td>
<td>0.61-0.67</td>
<td>46-50</td>
<td>2.3-2.5</td>
</tr>
<tr>
<td>5 years</td>
<td>0.74-0.79</td>
<td>56-59</td>
<td>2.8-3.0</td>
</tr>
<tr>
<td>10 years</td>
<td>1.07-1.13</td>
<td>80-85</td>
<td>4.0-4.3</td>
</tr>
<tr>
<td>12 years</td>
<td>1.27-1.83</td>
<td>95-100</td>
<td>4.8-5.0</td>
</tr>
<tr>
<td>18 years</td>
<td>1.77-1.83</td>
<td>133-137</td>
<td>6.7-6.9</td>
</tr>
</tbody>
</table>

ᵃBased on WHO growth charts for children (may not correspond to the BSA of individual patients). ¹,⁷ ᵇBased on a typical starting dose of 75 mg/m².⁷

Please refer to the enclosed package insert for full prescribing information.

---

**Copyright ©2012 American College of Pharmacology. Reprinted with permission from American College of Pharmacology.**
Warnings and Precautions†

**Myelosuppression**
The most consistent, dose-related toxicity of PURIXAN is bone marrow suppression.

**Hepatotoxicity**
Mercaptopurine is hepatotoxic. There are reports of deaths attributed to hepatic necrosis associated with the administration of mercaptopurine. Hepatic injury can occur with any dosage, but seems to occur with greater frequency when the recommended dosage is exceeded.

**Immunosuppression**
Mercaptopurine is immunosuppressive and may impair the immune response to infectious agents or vaccines.

**Embryo-Fetal Toxicity**
PURIXAN can cause fetal harm when administered to a pregnant woman. If this drug is used during pregnancy or if the patient becomes pregnant while taking the drug, the patient should be apprised of the potential hazard to a fetus.

**Treatment-Related Malignancies**
Cases of hepatosplenic T-cell lymphoma have been reported in patients treated with mercaptopurine for inflammatory bowel disease (IBD), an unapproved use.

A treatment regimen containing multiple immunosuppressants (including thiopurines) should be used with caution as this could lead to lymphoproliferative disorders, some with reported fatalities. A combination of multiple immunosuppressants, given concomitantly increases the risk of Epstein-Barr virus (EBV)-associated lymphoproliferative disorders.

**Macrophage Activation Syndrome**
Macrophage activation syndrome (MAS) (hemophagocytic lymphohistiocytosis) is a known, life-threatening disorder that may develop in patients with autoimmune conditions, in particular with inflammatory bowel disease (IBD), and there could potentially be an increased susceptibility for developing the condition with the use of mercaptopurine (an unapproved use).

**Laboratory Tests**
Monitor the following laboratory tests in patients receiving PURIXAN: Complete blood counts (CBCs), transaminases, and bilirubin. Evaluate the bone marrow in patients with prolonged or repeated marrow suppression to assess leukemia status and marrow cellularity.

Adverse Reactions†

<table>
<thead>
<tr>
<th>Adverse Reaction</th>
<th>Occurrence in ALL Trials (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Myelosuppression: Including anemia, neutropenia, lymphopenia, and thrombocytopenia</td>
<td>&gt;20</td>
</tr>
<tr>
<td>Anorexia, nausea, vomiting, diarrhea, malaise, and rash</td>
<td>5 to 20</td>
</tr>
<tr>
<td>Urticaria, hyperuricemia, oral lesions *, elevated transaminases, hyperbilirubinemia, hyperpigmentation, and pancreatitis</td>
<td>&lt;5</td>
</tr>
<tr>
<td>Delayed or Late Toxicities: Including hepatic fibrosis, hyperbilirubinemia, alopecia, pulmonary fibrosis, oligospermia, and secondary malignancies</td>
<td></td>
</tr>
</tbody>
</table>

*aOral lesions resemble thrush rather than antifolic ulcerations

References

†Please refer to the enclosed package insert for full prescribing information.