

KNDy=kisspeptin/neurokinin B/dynorphin.

Watch the mechanism of action of VEOZAH at VEOZAHhcp.com/MOAvideo

### **INDICATIONS AND USAGE**

VEOZAH™ (fezolinetant) is a neurokinin 3 (NK3) receptor antagonist indicated for the treatment of moderate to severe vasomotor symptoms due to menopause.

# IMPORTANT SAFETY INFORMATION

### **CONTRAINDICATIONS**

VEOZAH is contraindicated in women with any of the following:

- Known cirrhosis Severe renal impairment or end-stage renal disease
- Concomitant use with CYP1A2 inhibitors

Please see additional Important Safety Information on next page.

Please click here for full Prescribing Information for VEOZAH™ (fezolinetant).



A NONHORMONAL OPTION FOR PATIENTS WITH MODERATE
TO SEVERE VASOMOTOR SYMPTOMS (VMS) DUE TO MENOPAUSE<sup>1.5</sup>

# REDEFINE how YOU TARGET VMS

**VEOZAH directly targets** a source of VMS — kisspeptin/neurokinin B/dynorphin (KNDy) neurons in the hypothalamus. Give your patients another way to treat the heat day and night.<sup>1</sup>



Explore the mechanism of action of VEOZAH at VEOZAHhcp.com/MOAvideo

### **IMPORTANT SAFETY INFORMATION (cont'd)**

## **WARNINGS AND PRECAUTIONS**

**Hepatic Transaminase Elevation** 

Elevations in serum transaminase [alanine aminotransferase (ALT) and/or aspartate aminotransferase (AST)] levels > 3x the upper limit of normal (ULN) occurred in 2.3% of women receiving VEOZAH and 0.9% of women receiving placebo in three clinical trials. No serum elevations in total bilirubin (> 2x ULN) occurred. Women with ALT or AST elevations were generally asymptomatic. Transaminase levels returned to pretreatment levels (or close to these) without sequelae with dose continuation, and upon dose interruption, or discontinuation. Women with cirrhosis were not studied.

Perform baseline bloodwork to evaluate for hepatic function and injury prior to VEOZAH initiation. Do not start VEOZAH if concentration of ALT or AST is ≥ 2x ULN or if the total bilirubin is elevated (e.g., ≥ 2x ULN) for the evaluating laboratory. If baseline hepatic transaminase evaluation is < 2x ULN and the total bilirubin is normal, VEOZAH can be started. Perform follow-up evaluations of hepatic transaminase concentration at 3 months, 6 months, and 9 months after initiation of therapy and when symptoms (such as nausea, vomiting, or yellowing of the skin or eyes) suggest liver injury.

#### **ADVERSE REACTIONS**

The most common adverse reactions with VEOZAH ≥ 2% and > placebo (VEOZAH % vs. placebo %) are: abdominal pain (4.3% vs. 2.1%), diarrhea (3.9% vs. 2.6%), insomnia (3.9% vs. 1.8%), back pain (3.0% vs. 2.1%), hot flush (2.5% vs. 1.6%), and hepatic transaminase elevation (2.3% vs. 0.8%).

Please see additional Important Safety Information on previous page.

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REFERENCES: 1. VEOZAH [package insert]. Northbrook, IL: Astellas Pharma US, Inc. 2. Thurston RC. Vasomotor symptoms. In: Crandall CJ, Bachman GA, Faubion SS, et al., eds. Menopause Practice: A Clinician's Guide. 6th ed. Pepper Pike, OH: The North American Menopause Society, 2019:43-55. 3. Depypere H, Lademacher C, Siddiqui E, Fraser GL. Fezolinetant in the treatment of vasomotor symptoms associated with menopause. Expert Opin Investig Drugs 2021;30(7):681-94. 4. Jayasena CN, Comninos AN, Stefanopoulou E, et al. Neurokinin B administration induces hot flushes in women. Sci Rep (Epub) 02-16-2015. 5. Johnson KA, Martin N, Nappi RE, et al. Efficacy and safety of fezolinetant in moderate to severe vasomotor symptoms associated with menopause: a phase 3 RCT. J Clin Endocrinol Metab (Epub) 02-03-2023.



