INTRODUCING

CREXONT®

(carbidopa and levodopa)

EXTENDED-RELEASE CAPSULES

35mg/140mg · 52.5mg/210mg

70mg/280mg · 87.5mg/350mg

David,
a real person with
Parkinson's disease

For adults with Parkinson's disease (PD)

*FROM **LUNCH** TO **LEASH** TO **LAKE***

Stay in step with your day with CREXONT: More "Good On" time* with less frequent dosing compared with immediate-release carbidopa/levodopa (IR CD/LD)†

*"Good On" time is defined as "On" time without troublesome dyskinesia.
†As seen in a clinical study.

INDICATION

CREXONT® (carbidopa and levodopa) extended-release capsules is a prescription medication for the treatment of Parkinson's disease, Parkinson's disease caused by infection or inflammation of the brain, or Parkinson's disease-like symptoms that may result from carbon monoxide or manganese poisoning in adults.

IMPORTANT SAFETY INFORMATION

Do not take CREXONT with antidepressant medications known as nonselective monoamine oxidase (MAO) inhibitors.

Please see additional Important Safety Information on other pages and accompanying full Prescribing Information.

Are you optimizing your “Good On” time* with your current PD treatment?

IR CD/LD has been the standard of care for many years. It is designed to work quickly but may wear off quickly too

As Parkinson’s progresses, you might notice that your IR CD/LD doesn’t last as long, leading to ups and downs

**“Good On” time is defined as “On” time without troublesome dyskinesia.

IMPORTANT SAFETY INFORMATION (cont’d)

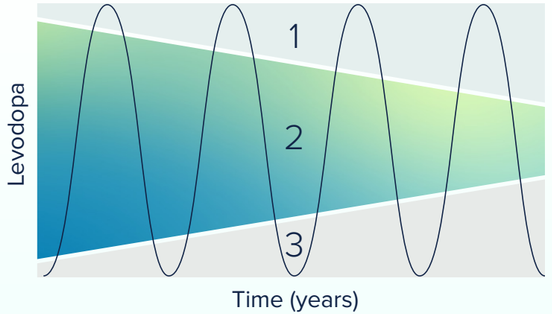
Do not take CREXONT with other carbidopa-levodopa preparations without consulting your healthcare provider.

CREXONT may cause falling asleep during activities of daily living, somnolence, or dizziness. Avoid activities that require alertness such as driving and operating machinery until you know how CREXONT affects you.

The most common side effects that may occur with CREXONT are nausea and anxiety.

It is important to avoid sudden discontinuation or rapid dose reduction of CREXONT. If you are discontinuing CREXONT, work with your healthcare provider to taper the dose over time to reduce the risk of fever or confusion.

Ups and downs with immediate-release CD/LD treatments are common



1. **Dyskinesia** happens when your medicine is working, but the level of levodopa is too high and you may experience movements you can’t control
2. **“Good On” time** is when your medicine is working, and you are not experiencing dyskinesia or it is not troubling you.
   “On” time is when your medicine is working and your symptoms are well-controlled, but you may be experiencing troublesome dyskinesia
3. **“Off” time** is when your medicine is not working and symptoms return

Over time with IR CD/LD, the duration of your symptom control may become more unpredictable, and you may experience more “Off” time. In fact, about half of patients taking a PD medication may experience “Off” episodes within 2 to 3 years of being on treatment

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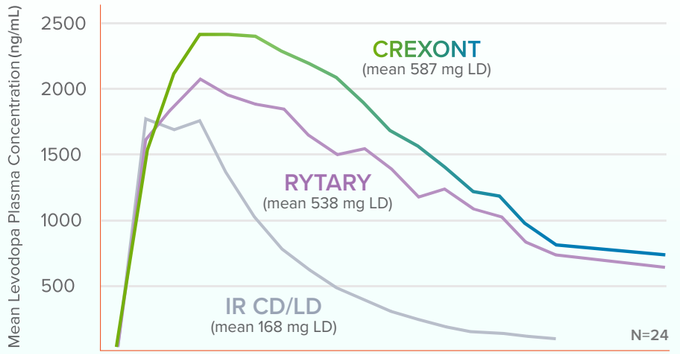
IN A CLINICAL PHARMACOLOGY STUDY,

CREXONT levodopa levels were compared with other forms of oral CD/LD

Main measurement: Levodopa levels of CREXONT compared with RYTARY® and IR CD/LD



Levodopa levels*

CREXONT	RYTARY	IR CD/LD
sustained for **4.8 hours**	sustained for 3.9 hours	sustained for 1.9 hours

In a different analysis of the same study, CREXONT levodopa levels outlasted RYTARY and IR CD/LD*†

*In a clinical pharmacology study, the duration of levodopa levels was defined by how long the levels of CREXONT, RYTARY, and IR CD/LD were maintained in the blood above half the maximum concentration.

†This was a post hoc analysis of a secondary measure in the clinical pharmacology study; CREXONT vs RYTARY P=0.010; CREXONT vs IR CD/LD P<0.0001.

Please see additional Important Safety Information on other pages and accompanying full Prescribing Information.

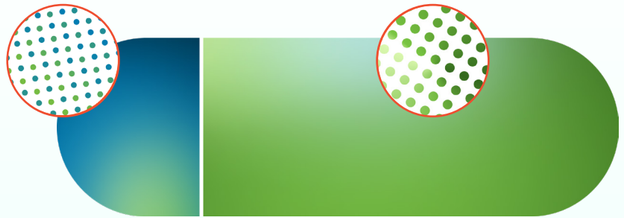
IN A CLINICAL PHARMACOLOGY STUDY, CREXONT PROVIDED

The longest-lasting oral levodopa levels*†

Discover the dual components inside CREXONT:

Immediate-release granules
Dissolve quickly, allowing them to work within 1 hour

Extended-release pellets
Release levodopa slowly so levels last longer*



Capsule and contents shown for illustrative purposes only.

Immediate-release CD/LD granules

Extended-release LD pellets

CREXONT is designed to gradually release levodopa in the part of the gut where it is best absorbed‡

*In a clinical pharmacology study, longest lasting was defined as how long the concentration of CREXONT, RYTARY, and IR CD/LD stayed in the blood above half the maximum concentration.

†This was a post hoc analysis of a secondary measure in the clinical pharmacology study; CREXONT vs RYTARY P=0.010; CREXONT vs IR CD/LD P<0.0001.

‡The exact site and duration of absorption is unknown.

IMPORTANT SAFETY INFORMATION (cont'd)

You may take CREXONT with or without food, but taking it with food may decrease or delay its effect. Consider taking the first dose of the day about 1 to 2 hours before eating.

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Explore the benefits of CREXONT

Main measurement

30 mins more “Good On” time per day with less frequent dosing*†

In a clinical study, people who took CREXONT an average of 3 times a day achieved 30 minutes more “Good On” time per day than those taking IR CD/LD an average of 5 times a day

Secondary measurement

30 mins less “Off” time per day‡§

People who took CREXONT had 30 minutes less “Off” time per day compared with those who took IR CD/LD

*“Good On” time is defined as “On” time without troublesome dyskinesia. Change in “Good On” time was measured by comparing values at the end of study to baseline; *P*=0.019 vs IR CD/LD.
†This was the average dose frequency during the double-blind maintenance period.

‡This was a secondary endpoint of the study.
§Study end=Week 20 or early termination; *P*=0.025 vs IR CD/LD.

The most common side effects (incidence ≥3% and greater than IR CD/LD) were nausea and anxiety.

Please see additional Important Safety Information on other pages and accompanying full Prescribing Information.

IN A DIFFERENT ANALYSIS OF THE SAME STUDY,

CREXONT provided more “Good On” time‖ per dose

A different analysis of the same study

>1 hr 30 mins more “Good On” time‖ per dose¶

In a clinical study of a dose-to-dose comparison, people took CREXONT fewer times per day and experienced over an hour and a half more “Good On” time per dose than people taking IR CD/LD

‖“Good On” time is defined as “On” time without troublesome dyskinesia.
¶This was a post hoc analysis of the study; *P*<0.0001 vs IR CD/LD.

IMPORTANT SAFETY INFORMATION (cont’d)

Swallow CREXONT whole. Do not chew, divide, or crush the capsules.
Do not take CREXONT with alcohol.

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Your dose of CREXONT will be personalized

3 times per day for most patients

CREXONT dosing may start at 2 to 3 times per day

1-2 capsules per dose

A typical dose of CREXONT is 1 or 2 capsules

After 1 to 3 days on treatment, your doctor may adjust the frequency and dosage of your medicine. Your frequency may go up to 4 times per day

Do not take CREXONT with antidepressant medications known as nonselective monoamine oxidase (MAO) inhibitors.

IMPORTANT SAFETY INFORMATION (cont'd)

Tell your healthcare provider if you:

- Have any heart conditions, especially if you have had a heart attack or irregular heartbeats
- Experience hallucinations or abnormal thoughts and behaviors
- Have an inability to control urges to gamble, have increased sexual urges, or experience other intense urges
- Have thoughts of suicide or have attempted suicide
- Have abnormal involuntary movements that appear or get worse during treatment
- Have ever had a peptic ulcer or glaucoma
- Become or intend to become pregnant. Based on animal data, CREXONT may cause fetal harm
- Are breastfeeding during therapy

Multiple dose strengths for dosing flexibility

CREXONT comes in 4 dose strengths

Capsules shown are not actual size.

35 mg carbidopa
140 mg levodopa

52.5 mg carbidopa
210 mg levodopa

70 mg carbidopa
280 mg levodopa

87.5 mg carbidopa
350 mg levodopa

You can work with your doctor to find which dose will help you achieve the "Good On" time* you need

*"Good On" time is defined as "On" time without troublesome dyskinesia.

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CREXONT was generally well-tolerated

Side effects that occurred in ≥2% of participants while switching from IR CD/LD to CREXONT and also occurred at a higher rate than IR CD/LD in the double-blind part of the study

	Switching from IR CD/LD to CREXONT	Double-blind phase	
	CREXONT (n= 589)	CREXONT (n=256)	IR CD/LD (n=250)
Nausea	**5%**	4%	1%
Anxiety	2%	**3%**	0%
Dizziness	**3%**	2%	1%
Dyskinesia	**7%**	2%	0.4%
Constipation	**2%**	**2%**	0.4%
Headache	**2%**	1%	0%
Vomiting	**2%**	1%	0%
Insomnia	**2%**	1%	0.4%

Established safety profile of CREXONT

>1 YEAR

CREXONT was studied for over a year in adults with Parkinson's disease, which established its well-understood safety profile

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

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Could CREXONT be right for you?

- More “Good On” time per day with less frequent dosing compared with IR CD/LD*
- >1 hr 30 mins more “Good On” time† per dose‡
- CREXONT was generally well-tolerated
- Your healthcare provider will personalize your CREXONT dosing

David,
a real person with
Parkinson’s disease

*“Good On” time is defined as “On” time without troublesome dyskinesia. Change in “Good On” time was measured by comparing values at the end of study to baseline; P=0.019 vs IR CD/LD. People who took CREXONT an average of 3 times per day saw significant improvements in “Good On” time vs people who took IR CD/LD an average of 5 times per day. This was the average dose frequency during the double-blind maintenance period.
†“Good On” time is defined as “On” time without troublesome dyskinesia.
‡This was a post hoc analysis of the study; P<0.0001 vs IR CD/LD.

Your “On” time matters
Talk with your doctor today about getting more “Good On” time† with CREXONT

To access support and resources, scan this QR code

amneal

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