

Exciting Development in the Treatment of Hepatorenal Syndrome

A Non-Accredited Product Theater at Digestive Disease Week® 2023

Join your colleagues as we discuss:

- The pathophysiology of hepatorenal syndrome (HRS) and associated burden of disease
- Recent clinical data for a treatment option for HRS and implications for clinical practice and patient care

FEATURING:

Gautham Reddy, MD

Associate Professor of Medicine

Director, Transplant Hepatology Fellowship Program

University of Chicago, Chicago, Illinois

DATE: Monday, May 8, 2023 LOCATION: DDW Theater 2

TIME: 2:05 PM - 2:50 PM McCormick Place Convention Center

Chicago, IL

Snacks will be provided.

The Product Theater content and views expressed therein are those of the sponsor and not of Digestive Disease Week®

INDICATION AND LIMITATION OF USE

TERLIVAZ (terlipressin) is indicated to improve kidney function in adults with hepatorenal syndrome with rapid reduction in kidney function.

• Patients with a serum creatinine >5 mg/dL are unlikely to experience benefit.

IMPORTANT SAFETY INFORMATION

WARNING: SERIOUS OR FATAL RESPIRATORY FAILURE

- TERLIVAZ may cause serious or fatal respiratory failure. Patients with volume overload or with acute-on-chronic liver failure (ACLF) Grade 3 are at increased risk. Assess oxygenation saturation (e.g., SpO₂) before initiating TERLIVAZ.
- Do not initiate TERLIVAZ in patients experiencing hypoxia (e.g., SpO₂ <90%) until oxygenation levels improve. Monitor patients for hypoxia using continuous pulse oximetry during treatment and discontinue TERLIVAZ if SpO₂ decreases below 90%.

Contraindications

TERLIVAZ is contraindicated:

- In patients experiencing hypoxia or worsening respiratory symptoms.
- In patients with ongoing coronary, peripheral, or mesenteric ischemia.

Warnings and Precautions

- Serious or Fatal Respiratory Failure: Obtain baseline oxygen saturation and do not initiate TERLIVAZ in hypoxic patients. Monitor patients for changes in respiratory status using continuous pulse oximetry and regular clinical assessments. Discontinue TERLIVAZ in patients experiencing hypoxia or increased respiratory symptoms.

 Manage intravascular volume overload by reducing or discontinuing the administration of albumin and/or other fluids and through judicious use of diuretics.

 Temporarily interrupt, reduce, or discontinue TERLIVAZ treatment until patient volume status improves. Avoid use in patients with ACLF Grade 3 because they are at significant risk for respiratory failure.
- Ineligibility for Liver Transplant: TERLIVAZ-related adverse reactions (respiratory failure, ischemia) may make a patient ineligible for liver transplantation, if listed. For patients with high prioritization for liver transplantation (e.g., MELD ≥35), the benefits of TERLIVAZ may not outweigh its risks.
- **Ischemic Events:** TERLIVAZ may cause cardiac, cerebrovascular, peripheral, or mesenteric ischemia. Avoid use of TERLIVAZ in patients with a history of severe cardiovascular conditions or cerebrovascular or ischemic disease. Discontinue TERLIVAZ in patients who experience signs or symptoms suggestive of ischemic adverse reactions.
- Embryo-Fetal Toxicity: TERLIVAZ may cause fetal harm when administered to a pregnant woman. If TERLIVAZ is used during pregnancy, the patient should be informed of the potential risk to the fetus.

Adverse Reactions

• The most common adverse reactions (≥10%) include abdominal pain, nausea, respiratory failure, diarrhea, and dyspnea.

Please <u>click here</u> for full Prescribing Information, including Boxed Warning.

This event is only intended for appropriate US healthcare professionals (HCPs). No guests or relatives of HCPs are permitted unless they are also an appropriate HCP attendee. HCPs in any of the following categories are prohibited from participating in a meal and must select "Meal Opt Out" on the Sign-in Sheet: Federal employees, Minnesota prescribers, and Vermont-licensed HCPs. Mallinckrodt Pharmaceuticals is required to report all payments or exchanges of value (eg, meals) in compliance with the Sunshine Act and state laws.

