

<b>Patient Information</b>	n						
Please Check One:	Prospective Pat	i <b>ent</b> (patient does <u>no</u>	<u>t</u> have a prescripti	on)	Current Patient (pa	tient has a pr	escription)
Patient Name:						Gender:	🛛 Female
Date of Birth:			Patient Addr	ess:			
Patient Email:	□ Home		City/State/Zi	p:	□ Home		
Primary Phone #:			Alternate Pho	one #:	□ Cell		
Insurance Informat	ion						
□ Uninsured	□ Insured (Fax a copy	y of front & back of ins	urance card OR co	mplete tal	ble below)		
	Primary Pharmacy Benefit			Secondary Pharmacy Benefit			
Plan/PBM Name:							
Plan Phone #:							
Policy Holder Name:							
Policy Holder DOB:							
Policy #:							
Group #: BIN #:							
PCN #:							
	tion			I			
Prescriber Informa			0.00 N				
Prescriber Name: NPI #:							
Prescriber Specialty:				•			
Office Contact:							
Office Contact			City/Stat	te/Zip:			
Phone #:			Office Fa	nx #:			
Office Contact E-Mail:							
Clinical Information	n						
Date of Diagnosis:		Diagnosis:			ICD-10 Co	de:	
Current/Prior Thera	pies:						
🗆 ORILISSA (elagoli	x) tablets, 150mg	Quantity:	AI	lergies:			
🗆 ORILISSA (elagoli	x) tablets, 200mg	Quantity:					
Preferred Pharmacy Name:					Pharmacy Phone #:		
Pharmacy Address:							

**IMPORTANT INFORMATION:** By submitting this form, you are referring the above patient to AbbVie's patient support program to determine eligibility and receive support related to an AbbVie product. AbbVie, its affiliates, collaborators and agents will use this information to provide the patient support and perform research and analytics, on a de-identified basis, for management of the program. For more information, visit www.abbvie.com/privacy.html. Please share this information with your patient.

See Indication and Important Safety Information on page 2. Please click here for Full Prescribing Information and Medication Guide.



Ori for Me

# **IMPORTANT SAFETY INFORMATION**

## **INDICATION**

ORILISSA™ (elagolix) is indicated for the management of moderate to severe pain associated with endometriosis.

## **IMPORTANT SAFETY INFORMATION**

#### CONTRAINDICATIONS

• ORILISSA is contraindicated in women who are pregnant (exposure to ORILISSA early in pregnancy may increase the risk of early pregnancy loss), in women with known osteoporosis or severe hepatic impairment (due to risk of bone loss), or with concomitant use of strong organic anion transporting polypeptide (OATP) 1B1 inhibitors (e.g., cyclosporine and gemfibrozil).

#### WARNINGS AND PRECAUTIONS

#### **Bone Loss**

- ORILISSA causes a dose-dependent decrease in bone mineral density (BMD), which is greater with increasing duration of use and may not be completely reversible after stopping treatment.
- The impact of ORILISSA-associated decreases in BMD on long-term bone health and future fracture risk is unknown. Consider assessment of BMD in patients with a history of low-trauma fracture or other risk factors for osteoporosis or bone loss, and do not use in women with known osteoporosis.
- Limit the duration of use to reduce the extent of bone loss.

#### Change in Menstrual Bleeding Pattern and Reduced Ability to Recognize Pregnancy

• Women who take ORILISSA may experience a reduction in the amount, intensity, or duration of menstrual bleeding, which may reduce the ability to recognize the occurrence of pregnancy in a timely manner. Perform pregnancy testing if pregnancy is suspected, and discontinue ORILISSA if pregnancy is confirmed.

#### Suicidal Ideation, Suicidal Behavior, and Exacerbation of Mood Disorders

- Suicidal ideation and behavior, including one completed suicide, occurred in subjects treated with ORILISSA in the endometriosis clinical trials.
- ORILISSA users had a higher incidence of depression and mood changes compared to placebo and ORILISSA users with a history of suicidality or depression had an increased incidence of depression. Promptly evaluate patients with depressive symptoms to determine whether the risks of continued therapy outweigh the benefits. Patients with new or worsening depression, anxiety, or other mood changes should be referred to a mental health professional, as appropriate.
- Advise patients to seek immediate medical attention for suicidal ideation and behavior. Reevaluate the benefits and risks of continuing ORILISSA if such events occur.

#### **Hepatic Transaminase Elevations**

- In clinical trials, dose-dependent elevations of serum alanine aminotransferase (ALT) at least 3 times the upper limit of the reference range occurred with ORILISSA.
- Use the lowest effective dose and instruct patients to promptly seek medical attention in case of symptoms or signs that may reflect liver injury, such as jaundice.
- Promptly evaluate patients with elevations in liver tests to determine whether the benefits of continued therapy outweigh the risks.

#### **Reduced Efficacy with Estrogen-Containing Contraceptives**

- Based on the mechanism of action of ORILISSA, estrogen-containing contraceptives are expected to reduce the efficacy of ORILISSA. The effect of progestin-only contraceptives on the efficacy of ORILISSA is unknown.
- Advise women to use non-hormonal contraceptives during treatment and for one week after discontinuing ORILISSA.

#### **ADVERSE REACTIONS**

• The most common adverse reactions (>5%) in clinical trials included hot flushes and night sweats, headache, nausea, insomnia, amenorrhea, anxiety, arthralgia, depression-related adverse reactions, and mood changes.

These are not all the possible side effects of ORILISSA.

Safety and effectiveness of ORILISSA in patients less than 18 years of age have not been established.

### Please see Full Prescribing Information.



