

For adult patients with opioid-induced constipation¹



is an affordable treatment option for most patients²

For commercially insured patients using the copay or e-voucher programs

96% pay \$10 or LESS²

For Medicare Part D patients in 2025

- Out-of-pocket spend is \$0 after they reach the catastrophic coverage phase³

Eligible patients may be entitled to “Extra Help” through the Low-Income Subsidy (LIS) program^{3*}

- ~80% of Medicare Part D patients who pay for RELISTOR tablets qualify for LIS⁴
- LIS patients pay no more than \$12.15 per prescription for covered branded drugs³

*Program expanded by the Inflation Reduction Act under Medicare Part D to individuals with incomes up to 150% of the federal poverty level who meet certain criteria/resource requirements.⁵

INDICATIONS

- RELISTOR[®] (methylnaltrexone bromide) is an opioid antagonist. RELISTOR tablets and RELISTOR injection are indicated for the treatment of opioid-induced constipation (OIC) in adults with chronic non-cancer pain, including patients with chronic pain related to prior cancer or its treatment who do not require frequent (e.g., weekly) opioid dosage escalation.
- RELISTOR injection is also indicated for the treatment of OIC in adults with advanced illness or pain caused by active cancer who require opioid dosage escalation for palliative care.

IMPORTANT SAFETY INFORMATION

- RELISTOR tablets and injection are contraindicated in patients with known or suspected mechanical gastrointestinal obstruction and patients at increased risk of recurrent obstruction, due to the potential for gastrointestinal perforation.
- Cases of gastrointestinal perforation have been reported in adult patients with opioid-induced constipation and advanced illnesses. These cases may be associated with localized or diffuse reduction of structural integrity in the wall of the gastrointestinal tract (e.g., peptic ulcer disease, Ogilvie's syndrome, diverticular disease, infiltrative gastrointestinal tract malignancies or peritoneal metastases). Take into account the overall risk-benefit profile when using RELISTOR in patients with these conditions or other conditions which might result in impaired integrity of the gastrointestinal tract wall (e.g., Crohn's disease). Monitor for the development of severe, persistent, or worsening abdominal pain; discontinue RELISTOR in patients who develop this symptom.
- If severe or persistent diarrhea occurs during treatment, advise patients to discontinue therapy with RELISTOR and consult their healthcare provider.
- Symptoms consistent with opioid withdrawal, including hyperhidrosis, chills, diarrhea, abdominal pain, anxiety, and yawning have occurred in patients treated with RELISTOR. Patients having disruptions to the blood-brain barrier may be at increased risk for opioid withdrawal and/or reduced analgesia and should be monitored for adequacy of analgesia and symptoms of opioid withdrawal.
- Avoid concomitant use of RELISTOR with other opioid antagonists because of the potential for additive effects of opioid receptor antagonism and increased risk of opioid withdrawal.
- The use of RELISTOR during pregnancy may precipitate opioid withdrawal in a fetus due to the immature fetal blood-brain barrier and should be used during pregnancy only if the potential benefit justifies the potential risk to the fetus. Because of the potential for serious adverse reactions, including opioid withdrawal, in breastfed infants, advise women that breastfeeding is not recommended during treatment with RELISTOR. In nursing mothers, a decision should be made to discontinue nursing or discontinue the drug, taking into account the importance of the drug to the mother.

Please see additional Important Safety Information throughout and click [here](#) for full Prescribing Information.

Save on the PAMORA prescribed for over 15 years¹



The RELISTOR Patient Savings Program

- Many eligible commercially insured patients may **pay as little as \$0 for RELISTOR tablets and injection***

RELISTOR prescription considerations

When it is time to prescribe RELISTOR for your patients with OIC, the following *ICD-10-CM* code could be considered^{6†}

K59.03

Drug-induced constipation

[†] The ICD-10-CM code and all other patient access-related information are provided for informational purposes only. It is the treating physician's responsibility to determine the proper diagnosis, treatment, and applicable ICD-10-CM code. Salix Pharmaceuticals does not guarantee coverage or reimbursement for the product.

➤ For reimbursement and prior authorization support for RELISTOR, visit relistor.com, covermymeds.com or call 1-866-452-5017

IMPORTANT SAFETY INFORMATION (continued)

- A dosage reduction of RELISTOR tablets and RELISTOR injection is recommended in patients with moderate and severe renal impairment (creatinine clearance less than 60 mL/minute as estimated by Cockcroft-Gault). No dosage adjustment of RELISTOR tablets or RELISTOR injection is needed in patients with mild renal impairment.
- A dosage reduction of RELISTOR tablets is recommended in patients with moderate (Child-Pugh Class B) or severe (Child-Pugh Class C) hepatic impairment. No dosage adjustment of RELISTOR tablets is needed in patients with mild hepatic impairment (Child-Pugh Class A). No dosage adjustment of RELISTOR injection is needed for patients with mild or moderate hepatic impairment. In patients with severe hepatic impairment, monitor for methylnaltrexone-related adverse reactions and dose adjust per Prescribing Information as may be indicated.
- In the clinical studies, the most common adverse reactions were:

OIC in adult patients with chronic non-cancer pain

- RELISTOR tablets (≥ 2% of RELISTOR patients and at a greater incidence than placebo): abdominal pain (14%), diarrhea (5%), headache (4%), abdominal distention (4%), vomiting (3%), hyperhidrosis (3%), anxiety (2%), muscle spasms (2%), rhinorrhea (2%), and chills (2%).
- RELISTOR injection (≥ 1% of RELISTOR patients and at a greater incidence than placebo): abdominal pain (21%), nausea (9%), diarrhea (6%), hyperhidrosis (6%), hot flush (3%), tremor (1%), and chills (1%).

OIC in adult patients with advanced illness

- RELISTOR injection (≥ 5% of RELISTOR patients and at a greater incidence than placebo): abdominal pain (29%), flatulence (13%), nausea (12%), dizziness (7%), and diarrhea (6%).

To report SUSPECTED ADVERSE REACTIONS, contact Salix Pharmaceuticals at 1-800-321-4576 or FDA at 1-800-FDA-1088 or www.fda.gov/medwatch.

Please see additional Important Safety Information throughout and click [here](#) for full Prescribing Information.

ICD-10-CM, International Classification of Diseases, Tenth Revision, Clinical Modification; OIC, opioid-induced constipation; PAMORA, peripherally acting mu-opioid receptor antagonist.

*Eligibility Criteria, Terms, and Conditions: Patient is not eligible if he/she participates in or seeks reimbursement or submits a claim for reimbursement to any federal or state healthcare program with prescription drug coverage, or where prohibited by law. Patient must be enrolled in, and must seek reimbursement from or submit a claim for reimbursement to, a commercial insurance plan. Offer excludes full cash-paying patients. Maximum benefits and other restrictions apply. Visit relistorhcp.copaysavingsprogram.com for full eligibility criteria, terms, and conditions.

REFERENCES 1. RELISTOR. Prescribing Information. Salix Pharmaceuticals; 2024. 2. Copay Data on File. Salix Pharmaceuticals. 3. Help with drug costs. Medicare.gov: <https://www.medicare.gov/basics/costs/help/drug-costs>. Accessed February 11, 2025. 4. Data on File. LAAD 2024. Salix Pharmaceuticals. 5. Data on file. IRA Bill 2024. Salix Pharmaceuticals, Bridgewater, NJ. 6. ICD-10. Centers for Medicare & Medicaid Services. Updated October 1, 2024. Accessed February 11, 2025: <https://www.cms.gov/medicare-coverage-database/view/article.aspx?articleid=56632&ver=23&>.



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