

To: {{recipient name and email}}

1. Watch a compelling commercial about overt hepatic encephalopathy (OHE)
2. See one family's experience with overt hepatic encephalopathy (OHE)
3. Inside: A XIFAXAN® (rifaximin) commercial for patients at risk

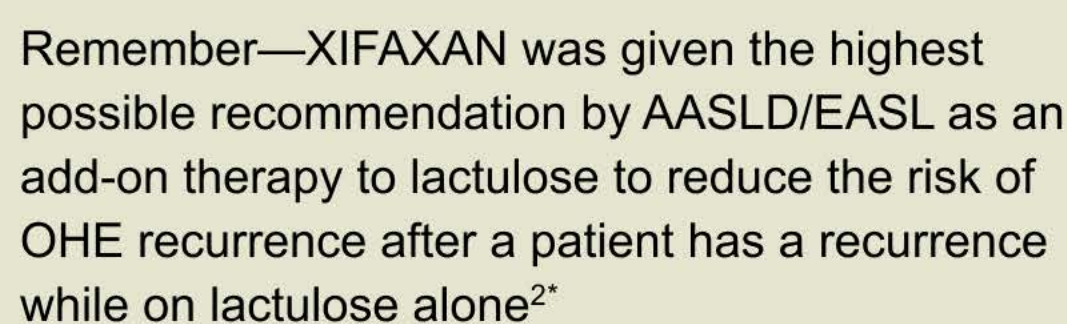
1. Your patients may have already seen it
2. If you haven't seen it yet, you may want to
3. Find out why this story reflects a changing perspective

<https://shared.salix.com/globalassets/pi/xifaxan550-pi.pdf>

Links to: <https://www.xifaxan.com/hcp/ohe/tvspot/>

- XIFAXAN is contraindicated in patients with a hypersensitivity to rifaximin, rifamycin antimicrobial agents, or any of the components in XIFAXAN. Hypersensitivity reactions have included exfoliative dermatitis, angioneurotic edema, and anaphylaxis.

Please see additional Important Safety Information below.



AASLD, American Association for the Study of Liver Diseases; EASL, European Association for the Study of the Liver.

^aPer the GRADE System for Evidence: Grade I=randomized, controlled trials; A=evidence is "high quality," and further research is very unlikely to change our confidence in the estimated effect; and 1=recommendation is "strong," with factors influencing strength of recommendation including the quality of evidence, presumed patient-important outcomes, and costs.²

- *Clostridium difficile*-associated diarrhea (CDAD) has been reported with use of nearly all antibacterial agents, including XIFAXAN, and may range in severity from mild diarrhea to fatal colitis. If CDAD is suspected or confirmed, ongoing antibiotic use not directed against *C. difficile* may need to be discontinued.
- There is an increased systemic exposure in patients with severe (Child-Pugh Class C) hepatic impairment. Caution should be exercised when administering XIFAXAN to these patients.
- Caution should be exercised when concomitant use of XIFAXAN and P-glycoprotein (P-gp) and/or OATPs inhibitors is needed. Concomitant administration of cyclosporine, an inhibitor of P-gp and OATPs, significantly increased the systemic exposure of rifaximin. In patients with hepatic impairment, a potential additive effect of reduced metabolism and concomitant P-gp inhibitors may further increase the systemic exposure to rifaximin.
- In clinical studies, the most common adverse reactions for XIFAXAN (alone or in combination with lactulose) were:
 - HE ($\geq 10\%$): Peripheral edema (17%), constipation (16%), nausea (15%), fatigue (14%), insomnia (14%), ascites (13%), dizziness (13%), urinary tract infection (12%), anemia (10%), and pruritus (10%)
- INR changes have been reported in patients receiving rifaximin and warfarin concomitantly. Monitor INR and prothrombin time. Dose adjustment of warfarin may be required.
- XIFAXAN may cause fetal harm. Advise pregnant women of the potential risk to a fetus.

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.

XIFAXAN® (rifaximin) 550 mg tablets are indicated for the reduction in risk of overt hepatic encephalopathy (HE) recurrence in adults.

Please click [here](#) for full Prescribing Information.

<https://www.xifaxan.com/hcp/ohe/tyspot/>

References: 1. XIFAXAN. Prescribing information. Salix Pharmaceuticals. 2. Vilstrup H, Amodio P, Bajaj J, et al. Hepatic encephalopathy in chronic liver disease: 2014 practice guideline by the American Association for the Study of Liver Diseases and the European Association for the Study of the Liver. *Hepatology*. 2014;60(2):715-735.doi:10.1002/hep.27210

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Please do not reply to this email. If you have questions related to our products, contact our Customer Care at: 800-321-4576.

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