

STARTING TREATMENT

In this Patient Information Brochure, you will learn:

- About the serious health concerns of toxoplasmosis
- The importance of working with your doctor during your toxoplasmosis treatment
- About getting started and the support available to you

Your doctor has prescribed DARAPRIM[®].

Read more about what you can expect during treatment.

Let's get started!

INDICATION

DARAPRIM is a prescription medication that contains pyrimethamine, indicated for the treatment of toxoplasmosis when used with a sulfonamide.

IMPORTANT SAFETY INFORMATION

Do not use DARAPRIM if you:

- are allergic to pyrimethamine or any component of DARAPRIM
- have megaloblastic anemia due to folate deficiency

See pages 3-4 for additional Important Safety Information



DARAPRIM —
WHAT YOU NEED TO KNOW

1 IMPORTANT SAFETY INFORMATION

DARAPRIM[®]
(pyrimethamine) 25mg tablets

INDICATIONS

DARAPRIM is a prescription medication that contains pyrimethamine for the treatment of toxoplasmosis when used with a sulfonamide (e.g., sulfadoxine).

IMPORTANT SAFETY INFORMATION

Do not use DARAPRIM if you:

- are allergic to pyrimethamine or any component of DARAPRIM, or
- have megaloblastic anemia due to folate deficiency

Taking DARAPRIM may result in allergic reactions that can be severe (such as Stevens-Johnson syndrome, toxic epidermal necrolysis, erythema multiforme, and anaphylaxis). Symptoms of an allergic reaction or the severe reactions may include: fever, body aches, facial or tongue swelling, skin pain, peeling of skin, blisters on your skin and mucous membranes, itching, rash, red itchy welts, wheezing, asthma symptoms, or dizziness or feeling faint. At the first appearance of a skin rash or any of the above symptoms, stop the medication and immediately seek medical attention. Other signs and symptoms of serious disorders may include sore throat, paleness, tongue changes, and purple skin color.

Make sure to tell your healthcare provider if you have any heart conditions, especially if you experience irregular heartbeat.

The most common side effects that may occur with DARAPRIM include allergic reactions (see above), blood disorders (including neutropenia or a low level of neutrophils, a white blood cell important to fight off infections), tongue changes, blood in the urine, heart rhythm disorders, anorexia, and vomiting.

Tell your healthcare provider if you have any side effects while taking DARAPRIM.

Notify your healthcare provider if you become pregnant or intend to become pregnant during therapy or if you are breast-feeding or intend to breast-feed an infant.

Tell your healthcare provider if you have problems with your kidney or liver, decreased intestinal absorption problems, alcoholism, or any other medical conditions.

Make sure you tell your healthcare provider about all of the prescription and non-prescription medications you take, including supplements, and especially sulfonamides or trimethoprim-sulfamethoxazole combination, proguanil (antimalarial medicine), zidovudine, or cytostatic agents (medicines that block cell division e.g., methotrexate, a medicine used for cancer or rheumatoid arthritis), phenytoin (a medicine to treat seizures), or lorazepam.

Be sure to take your medicine as instructed. Do not exceed the recommended dosage. You may take DARAPRIM with or without food. However, taking DARAPRIM with food may minimize associated anorexia and vomiting.

Keep out of the reach of infants and children:

Deaths in pediatric patients have been reported after accidental ingestion.

Note: The above information for patients being treated with DARAPRIM is intended to aid in the safe and effective use of this medication. It is not a disclosure of all possible adverse or intended effects. Please read the Full Prescribing Information and talk to your healthcare provider for more information concerning your treatment.

You are encouraged to report negative side effects of prescription drugs to the FDA. Visit www.fda.gov/medwatch or call 1-800-FDA-1088. To report SUSPECTED ADVERSE REACTIONS contact Vyera Pharmaceuticals, LLC at 1-877-258-2033.

Please See Full Prescribing Information

2 ABOUT TOXOPLASMOSIS

What is it and how is it contracted?

- A serious infection caused by a parasite found in cat stool, raw meats, unwashed vegetables, water, and soil.
- Most people who have the parasite will not get seriously ill. In patients who have weakened immune systems, the parasite can cause serious illness.
- The parasite most often affects the brain and eyes, but other organs such as the heart and the lungs can also be affected.
- Toxoplasmosis can make you very sick and may even cause death.

INDICATION

DARAPRIM is a prescription medication that contains pyrimethamine, indicated for the treatment of toxoplasmosis when used with a sulfonamide.

IMPORTANT SAFETY INFORMATION

Do not use DARAPRIM if you:

- are allergic to pyrimethamine or any component of DARAPRIM
- have megaloblastic anemia due to folate deficiency

See pages 3-4 for additional Important Safety Information



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WHAT YOU NEED TO KNOW:

Toxoplasmosis is a parasitic infection that can cause a **serious brain disease** called toxoplasmosis **encephalitis**.

3 STARTING TOXOPLASMOSIS TREATMENT

What is DARAPRIM (pyrimethamine) 25mg tablets?

DARAPRIM is a pill for the treatment of toxoplasmosis that is used in combination with a sulfonamide (antibiotic). DARAPRIM can cause a side effect (folate deficiency) so your doctor may prescribe another medication (folic acid) for this purpose.



Your doctor will prescribe the medication that is right for you. It is very important to follow your doctor's treatment plan.

IMPORTANT SAFETY INFORMATION

DARAPRIM is not for everyone. Do not take DARAPRIM if you are allergic to pyrimethamine or have anemia due to folate deficiency. At the first appearance of a skin rash you should stop use of DARAPRIM and seek medical attention immediately. Other symptoms that may be early indications of serious disorders include sore throat, paleness, and purple spots on skin or swollen tongue.

See pages 3-4 for additional Important Safety Information

How can I get DARAPRIM?

- ✓ Your doctor will send your prescription to DARAPRIM Direct's Specialty Pharmacy.
- ✓ Your dedicated Care Coordinator will call you to verify benefit information and to schedule your DARAPRIM delivery.
- ✓ DARAPRIM will be delivered to a convenient location for you.

DON'T FORGET TO:

- ✓ Provide a reliable phone number to reach you.
- ✓ Answer the phone when a Care Coordinator or Pharmacist calls.
- ✓ Be available at the appropriate location to sign for the delivery of your DARAPRIM medication.



Please make sure to answer the phone when DARAPRIM Direct's Specialty Pharmacy calls.

In most cases, the caller ID will say 'DPRM Direct'.

4 STAYING ON YOUR TREATMENT PLAN

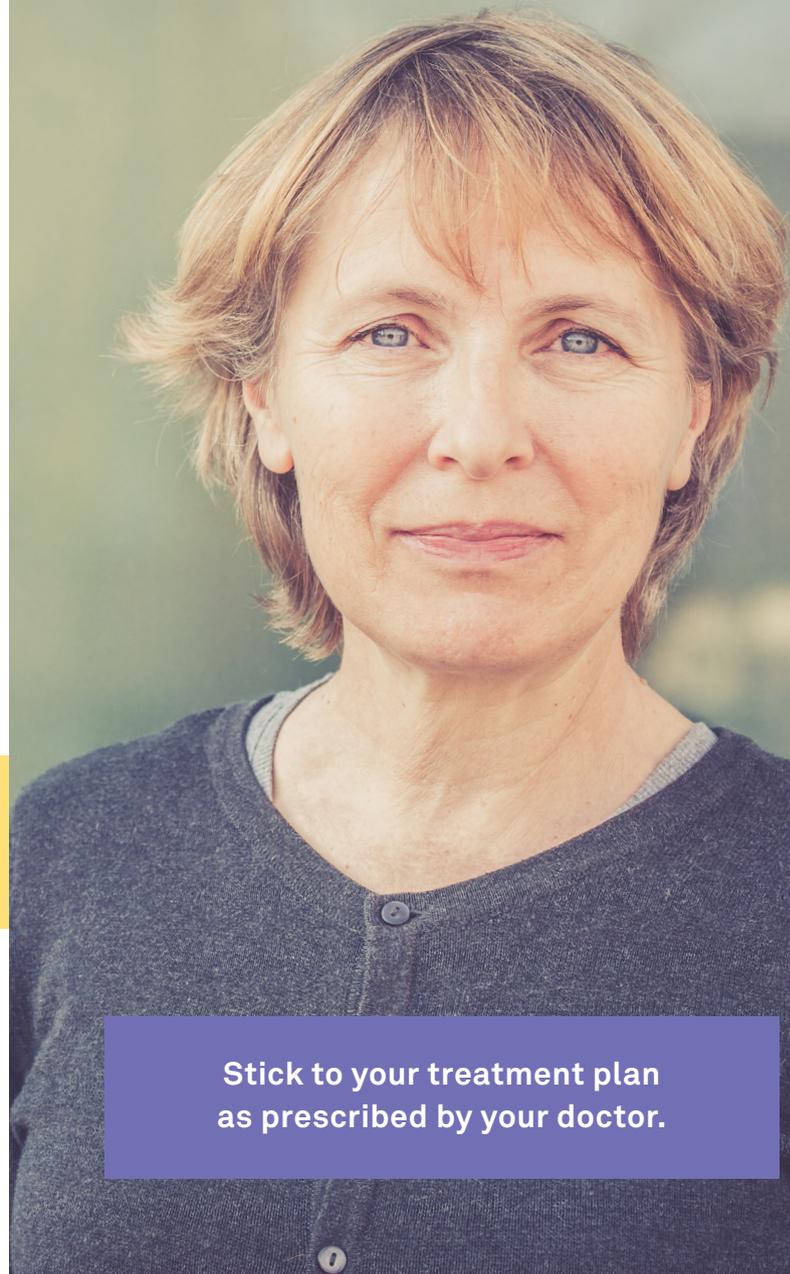
What happens if you don't take your medicine as prescribed?

It is important to make sure you take your medication as prescribed. If you do not take your medication as directed, your health may worsen.

Life gets busy and routines change, so let your doctor know if you're having trouble taking your medication regularly.

Here are a few tips that can help you stay on top of your treatment:

- **Let your medication become part of your daily routines** so you'll be less likely to forget it.
- **Set an alarm** on your phone, or put a sticky note on your door, to remind you to take your medication with you when you'll be away from home.
- **Answer calls from the Specialty Pharmacy** and respond to their refill reminders so you don't run out of pills.
- **Financial help may be available** so that cost does not prevent you from taking your medication.
- **Stay engaged.** If you're taking multiple medications, don't let it become overwhelming. Speak with your doctor about your concerns.



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Stick to your treatment plan as prescribed by your doctor.

5 ADDITIONAL TOXOPLASMOSIS INFORMATION

CDC

<http://www.cdc.gov/parasites/toxoplasmosis/>
[http://www.cdc.gov/parasites/toxoplasmosis/gen_info/
faqs.html](http://www.cdc.gov/parasites/toxoplasmosis/gen_info/faqs.html)
1-800-CDC-INFO (1-800-232-4636)
TTY: 1-888-232-6348

Mayo Clinic

[https://www.mayoclinic.org/diseases-conditions/
toxoplasmosis/symptoms-causes/syc-20356249](https://www.mayoclinic.org/diseases-conditions/toxoplasmosis/symptoms-causes/syc-20356249)

Medicine.net

<https://www.medicinenet.com/toxoplasmosis/article.htm>



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To learn more about DARAPRIM,
visit www.daraprimdirect.com

6 WHAT YOU NEED TO REMEMBER

You have received a DARAPRIM prescription. Your DARAPRIM Direct's Specialty Pharmacy will arrange delivery of your DARAPRIM medication and provide information on any financial assistance programs that may be available to you.

How do I get my medication?

Answer your phone when a Care Coordinator calls to tell you that your DARAPRIM medication is ready for delivery. **It is very important that you answer this call so that you can receive your DARAPRIM medication.**

A Care Coordinator will schedule delivery of your DARAPRIM medication at the most convenient location.

Make sure you are available to sign for the delivery of your DARAPRIM medication.

How do I take my medication?

- You will likely be prescribed more than one medication as part of your treatment.
- Always take all of the medication(s) as your doctor has directed.
- Finish your full course of therapy even if you are feeling better unless otherwise directed by a physician.
- If you are experiencing side effects, please contact your doctor.

How long do I have to take my medication?

Your doctor will determine how long you will need to take DARAPRIM. It is extremely important that you take your medication(s) exactly as your doctor tells you.

What are the 3 most important things I must remember to do to get my DARAPRIM medication?

- ✓ Provide a reliable phone number to reach you.
- ✓ Answer the phone when a Care Coordinator calls. **In most cases, the caller ID will say 'DPRM Direct'.**
- ✓ Be available at the appropriate location to sign for the delivery of your DARAPRIM medication.



Not an actual patient

YOUR GUIDE TO STAYING ON YOUR TREATMENT PLAN

Keep this Patient Information Brochure handy to learn:

- About the serious health concerns of toxoplasmosis
- The importance of working with your doctor during your toxoplasmosis treatment
- About getting started and the support available to you



Please make sure to answer the phone when DARAPRIM Direct's Specialty Pharmacy calls.

In most cases, the caller ID will say 'DPRM Direct'.



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DARAPRIM[®]
(pyrimethamine) 25mg tablets

VYERA
PHARMACEUTICALS

DARAPRIM® (pyrimethamine) 25 mg tablets
Rx Only

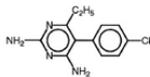
PRESCRIBING INFORMATION

DESCRIPTION

DARAPRIM (pyrimethamine) is an antiparasitic compound available in tablet form for oral administration. Each scored tablet contains 25 mg pyrimethamine and the inactive ingredients corn and potato starch, lactose, and magnesium stearate.

Pyrimethamine, known chemically as 5-(4-chlorophenyl)-6-ethyl-2, 4-pyrimidinediamine, has the following structural formula:

$C_{12}H_{13}ClN_4$
Mol. Wt. 248.71



CLINICAL PHARMACOLOGY

Pyrimethamine is well absorbed with peak levels occurring between 2 to 6 hours following administration. It is eliminated slowly and has a plasma half-life of approximately 96 hours. Pyrimethamine is 87% bound to human plasma proteins.

Microbiology: Pyrimethamine is a folic acid antagonist and the rationale for its therapeutic action is based on the differential requirement between host and parasite for nucleic acid precursors involved in growth. This activity is highly selective against *Toxoplasma gondii*.

The action of pyrimethamine against *Toxoplasma gondii* is greatly enhanced when used in conjunction with sulfonamides. This was demonstrated by Eyles and Coleman¹ in the treatment of experimental toxoplasmosis in the mouse. Jacobs et al² demonstrated that combination of the 2 drugs effectively prevented the development of severe uveitis in most rabbits following the inoculation of the anterior chamber of the eye with toxoplasma.

INDICATIONS AND USAGE

Treatment of Toxoplasmosis: DARAPRIM is indicated for the treatment of toxoplasmosis when used conjointly with a sulfonamide, since synergism exists with this combination.

CONTRAINDICATIONS

Use of DARAPRIM is contraindicated in patients with known hypersensitivity to pyrimethamine or to any component of the formulation. Use of the drug is also contraindicated in patients with documented megaloblastic

anemia due to folate deficiency.

WARNINGS

The dosage of pyrimethamine required for the treatment of toxoplasmosis has a narrow therapeutic window. If signs of folate deficiency develop (see ADVERSE REACTIONS), reduce the dosage or discontinue the drug according to the response of the patient. Folinic acid (leucovorin) should be administered in a dosage of 5 to 15 mg daily (orally, IV, or IM) until normal hematopoiesis is restored.

Data in 2 humans indicate that pyrimethamine may be carcinogenic; a 51-year-old female who developed chronic granulocytic leukemia after taking pyrimethamine for 2 years for toxoplasmosis³ and a 56-year-old patient who developed reticulum cell sarcoma after 14 months of pyrimethamine for toxoplasmosis.⁴

Pyrimethamine has been reported to produce a significant increase in the number of lung tumors in mice when given intraperitoneally at doses of 25 mg/kg.⁵

DARAPRIM should be kept out of the reach of infants and children as they are extremely susceptible to adverse effects from an overdose. Deaths in pediatric patients have been reported after accidental ingestion.

PRECAUTIONS

General: A small "starting" dose for toxoplasmosis is recommended in patients with convulsive disorders to avoid the potential nervous system toxicity of pyrimethamine. DARAPRIM should be used with caution in patients with impaired renal or hepatic function or in patients with possible folate deficiency, such as individuals with malabsorption syndrome, alcoholism, or pregnancy, and those receiving therapy, such as phenytoin, affecting folate levels (see Pregnancy subsection).

Information for Patients: Patients should be warned that at the first appearance of a skin rash they should stop use of DARAPRIM and seek medical attention immediately. Patients should also be warned that the appearance of sore throat, pallor, purpura, or glossitis may be early indications of serious disorders which require treatment with DARAPRIM to be stopped and medical treatment to be sought.

Women of childbearing potential who are taking DARAPRIM should be warned against becoming pregnant. Patients should be warned to keep DARAPRIM out of the reach of children. Patients should be advised not to exceed recommended doses. Patients should be warned that if anorexia and vomiting occur, they may be minimized by taking the drug with meals. Concurrent administration of folinic acid is strongly recommended

when used for the treatment of toxoplasmosis in all patients.

Laboratory Tests: In patients receiving high dosage, semiweekly blood counts, including platelet counts, should be performed.

Drug Interactions: Pyrimethamine may be used with sulfonamides, quinine and other antimalarials, and with other antibiotics. However, the concomitant use of other antifolate drugs or agents associated with myelosuppression including sulfonamides or trimethoprim-sulfamethoxazole combinations, proguanil, zidovudine, or cytostatic agents (e.g., methotrexate), while the patient is receiving pyrimethamine, may increase the risk of bone marrow suppression. If signs of folate deficiency develop, pyrimethamine should be discontinued. Folinic acid (leucovorin) should be administered until normal hematopoiesis is restored (see WARNINGS). Mild hepatotoxicity has been reported in some patients when lorazepam and pyrimethamine were administered concomitantly.

Carcinogenesis, Mutagenesis, Impairment of Fertility: See WARNINGS section for information on carcinogenesis.

Mutagenesis: Pyrimethamine has been shown to be nonmutagenic in the following *in vitro* assays: the Ames point mutation assay, the Rec assay, and the *E. coli* WP2 assay. It was positive in the L5178Y/TK +/- mouse lymphoma assay in the absence of exogenous metabolic activation.⁶ Human blood lymphocytes cultured *in vitro* had structural chromosome aberrations induced by pyrimethamine.

In vivo, chromosomes analyzed from the bone marrow of rats dosed with pyrimethamine showed an increased number of structural and numerical aberrations.

Pregnancy: Teratogenic Effects: Pregnancy Category C. Pyrimethamine has been shown to be teratogenic in rats when given in oral doses 2.5 times the human dose for treatment of toxoplasmosis. At these doses in rats, there was a significant increase in abnormalities such as cleft palate, brachygnathia, oligodactyly, and microphthalmia. Pyrimethamine has also been shown to produce terata such as meningocele in hamsters and cleft palate in miniature pigs when given in oral doses 5 times the human dose for the treatment of toxoplasmosis.

There are no adequate and well-controlled studies in pregnant women. DARAPRIM should be used during pregnancy only if the potential benefit justifies the potential risk to the fetus.

Concurrent administration of folinic acid is strongly recommended when used during pregnancy.

Nursing Mothers: Pyrimethamine is excreted in human milk. Because of the potential for serious adverse reactions in nursing infants from pyrimethamine and from concurrent use of a sulfonamide with DARAPRIM for treatment of some patients with toxoplasmosis, a decision should be made whether to discontinue nursing or to discontinue the drug, taking into account the importance of the drug to the mother (see WARNINGS and PRECAUTIONS: Pregnancy).

Pediatric Use: See DOSAGE AND ADMINISTRATION section.

Geriatric Use: Clinical studies of DARAPRIM did not include sufficient numbers of subjects aged 65 and over to determine whether they respond differently from younger subjects. Other reported clinical experience has not identified differences in responses between the elderly and younger patients. In general, dose selection for an elderly patient should be cautious, usually starting at the low end of the dosing range, reflecting the greater frequency of decreased hepatic, renal, or cardiac function, and of concomitant disease or other drug therapy.

ADVERSE REACTIONS

Hypersensitivity reactions, occasionally severe (such as Stevens-Johnson syndrome, toxic epidermal necrolysis, erythema multiforme, and anaphylaxis), and hyperphenylalaninemia, can occur particularly when pyrimethamine is administered concomitantly with a sulfonamide. Consult the complete prescribing information for the relevant sulfonamide for sulfonamide-associated adverse events. With doses of pyrimethamine used for the treatment of toxoplasmosis, anorexia and vomiting may occur. Vomiting may be minimized by giving the medication with meals; it usually disappears promptly upon reduction of dosage. Doses used in toxoplasmosis may produce megaloblastic anemia, leukopenia, thrombocytopenia, pancytopenia, neutropenia, atrophic glossitis, hematuria, and disorders of cardiac rhythm. Hematologic effects, however, may also occur at low doses in certain individuals (see PRECAUTIONS; General). Pulmonary eosinophilia has been reported rarely.

OVERDOSAGE

Following the ingestion of 300 mg or more of pyrimethamine, gastrointestinal and/or central nervous system signs may be present, including convulsions. The initial symptoms are usually gastrointestinal and may include abdominal pain, nausea, severe and repeated

vomiting, possibly including hematemesis. Central nervous system toxicity may be manifest by initial excitability, generalized and prolonged convulsions which may be followed by respiratory depression, circulatory collapse, and death within a few hours. Neurological symptoms appear rapidly (30 minutes to 2 hours after drug ingestion), suggesting that in gross overdosage pyrimethamine has a direct toxic effect on the central nervous system.

The fatal dose is variable, with the smallest reported fatal single dose being 375 mg. There are, however, reports of pediatric patients who have recovered after taking 375 to 625 mg.

There is no specific antidote to acute pyrimethamine poisoning. In the event of overdosage, symptomatic and supportive measures should be employed. Gastric lavage is recommended and is effective if carried out very soon after drug ingestion. Parenteral diazepam may be used to control convulsions. Folinic acid should be administered within 2 hours of drug ingestion to be most effective in counteracting the effects on the hematopoietic system (see WARNINGS). Due to the long half-life of pyrimethamine, daily monitoring of peripheral blood counts is recommended for up to several weeks after the overdose until normal hematologic values are restored.

DOSAGE AND ADMINISTRATION

For Treatment of Toxoplasmosis: The dosage of DARAPRIM for the treatment of toxoplasmosis must be carefully adjusted so as to provide maximum therapeutic effect and a minimum of side effects. At the dosage required, there is a marked variation in the tolerance to the drug. Young patients may tolerate higher doses than older individuals. Concurrent administration of folinic acid is strongly recommended in all patients.

The adult *starting* dose is 50 to 75 mg of the drug daily, together with 1 to 4 g daily of a sulfonamide of the sulfapyrimidine type, e.g. sulfadoxine. This dosage is ordinarily continued for 1 to 3 weeks, depending on the response of the patient and tolerance to therapy. The dosage may then be reduced to about one half that previously given for each drug and continued for an additional 4 to 5 weeks. The pediatric dosage of DARAPRIM is 1 mg/kg/day divided into 2 equal daily doses; after 2 to 4 days this dose may be reduced to one half and continued for approximately 1 month. The usual pediatric sulfonamide dosage is used in conjunction with DARAPRIM.

HOW SUPPLIED:

White, scored tablets containing 25 mg pyrimethamine, imprinted with "DARAPRIM" and "A3A" in bottles of 100 (NDC 69413-330-10) and bottles of 30 (NDC 69413-

330-30).

Store at 15° to 25°C (59° to 77°F) in a dry place and protect from light.

REFERENCES

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3. Jim RTS, Elizaga FV. Development of chronic granulocytic leukemia in a patient treated with pyrimethamine. *Hawaii Med J.* 1977;36:173-176.
4. Sadoff L. Antimalarial drugs and Burkitt's lymphoma. *Lancet.* 1973;2:1262-1263.
5. Bahna L. Pyrimethamine. *LARC Monogr Eval Carcinog Risk Chem.* 1977;13:233-242.
6. Clive D, Johnson KO, Spector JKS, et al. Validation and characterization of the L5178Y/TK +/- mouse lymphoma mutagen assay system. *Mut Res.* 1979;59:61-108.

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