

Help Your OAB Patients Fight the Urge

MYRBETRIQ® (mirabegron) is indicated for the treatment of overactive bladder (OAB) with symptoms of urgency, urgency incontinence and urinary frequency.¹

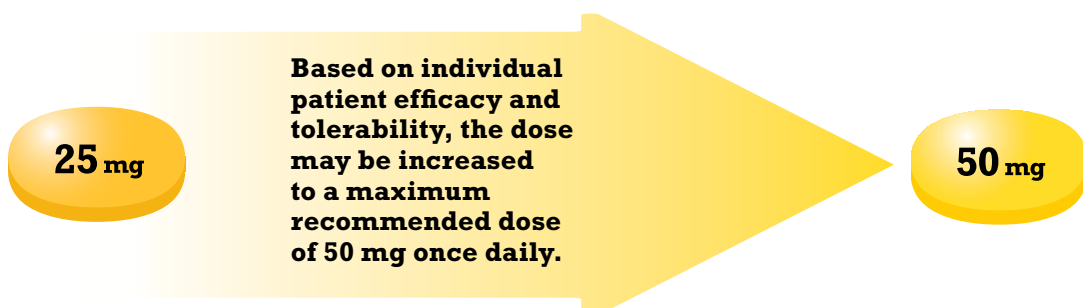
 **Myrbetriq**[®]
mirabegron

MYRBETRIQ® is the
#1 dispensed OAB
medication
across Canada^{2*}



Consider once-daily MYRBETRIQ® for your OAB patients

Starting dose: MYRBETRIQ® 25 mg OD



The dose of MYRBETRIQ® should not exceed 25 mg once daily in patients:

- With severe renal impairment (CL_{cr} 15 to 29 mL/min or eGFR 15 to 29 mL/min/1.73 m²)
- With moderate hepatic impairment (Child–Pugh Class B)
- Taking drugs metabolized by CYP2D6 with a narrow therapeutic index, such as flecainide and propafenone

No dose adjustment is necessary for the elderly

The pharmacokinetics of mirabegron are not significantly influenced by age. The C_{max} and AUC of mirabegron and its metabolites following multiple oral doses in elderly volunteers (≥ 65 years) were similar to those in younger volunteers (18 to 45 years).[†]

Choose MYRBETRIQ® for your OAB patients

* Comparative clinical significance unknown.
† Clinical significance unknown.

MYRBETRIQ®—the only selective $\beta 3$ adrenoceptor agonist indicated in OAB*

MYRBETRIQ® promoted:†



Relaxation of bladder smooth muscle in rat and human isolated tissue



Increased bladder capacity in animal model studies



Decreased voiding frequency in animal model studies

MYRBETRIQ® increased mean voided volume per micturition and decreased the frequency of non-voiding contractions, without affecting voiding pressure, or residual urine volume, in animal model studies.

Clinical use:

- Safety and efficacy in pediatric patients have not been established

Contraindications:

- Severe uncontrolled hypertension (SBP ≥ 180 mm Hg and/or DBP ≥ 110 mm Hg)
- Pregnancy

Relevant warnings and precautions:

- Serious adverse events of neoplasm (0.1%, reported in a study with MYRBETRIQ® 50 mg*)
- Serum ALT/AST increase (0.3%, reported in a study with MYRBETRIQ® 50 mg*) with/without bilirubin increase and Stevens–Johnson syndrome
- Dose-dependent QTc prolongation, elevated blood pressure, elevated heart rate
- Caution in patients with risk factors for torsade de pointes or patients taking medications known to prolong the QT interval
- Interaction with CYP2D6 substrates
- Caution in patients with clinically significant bladder outlet obstruction or taking antimuscarinics for OAB
- Caution in patients with moderate hepatic impairment; not recommended in severe hepatic impairment
- In patients with glaucoma, ophthalmological examinations should be performed regularly
- Angioedema of the face, lips, tongue and/or larynx has been reported. If involvement of tongue, hypopharynx or larynx occurs, discontinue MYRBETRIQ® and initiate appropriate therapy and/or measures
- Caution in patients with severe renal impairment; not recommended in end stage renal disease
- Should not be used during nursing

For more information:

Please consult the Product Monograph at https://www.astellas.com/ca/system/files/pdf/Myrbetriq_PM_EN.pdf for important information relating to adverse reactions, drug interactions, and dosing information which have not been discussed in this piece.

The Product Monograph is also available by calling us at 1-888-338-1824.

References:

1. MYRBETRIQ® Product Monograph. Astellas Pharma Canada, Inc. June 2, 2016.
2. IQVIA. Canadian CompuScript Data. July 2019.

* Comparative clinical significance unknown.

† Based on animal model studies. Clinical significance unknown.

A 1-year, randomized, fixed-dose, double-blind, active-controlled safety study in patients with OAB in which MYRBETRIQ® was evaluated for safety in 1,632 patients who received MYRBETRIQ® 50 mg OD (n=812 patients) or MYRBETRIQ® 100 mg (n=820 patients); the 100 mg strength is not available in Canada. Patients received MYRBETRIQ® continuously for at least 6 months (n=1,385), 9 months (n=1,311) or 1 year (n=564).

