

Unique clinical content and resources for Nurse Practitioners and Physician Assistants who manage adult patients living with IBS-D and OHE

SEE WHAT'S NEW ON GASTROHUB FOR IBS-D

See your peers present the following IBS-D patient case studies, and consider if they relate to your patients



Kimberly Kearns, MS, APRN, ANP-BC, presents the case study of Greg, a 29-year-old male who was referred to a gastroenterology specialist for frequent diarrhea accompanied by abdominal pain

Amy L. Stewart, CRNP, presents the case study of Maria, a 38-year-old female who presented to her PCP with frequent abdominal pain associated with diarrhea during the past 4 months

WATCH NOW

To learn more about XIFAXAN for IBS-D

Hypothetical patients. IBS-D, irritable bowel syndrome with diarrhea; OHE, overt hepatic encephalopathy; PCP, primary care provider.

INDICATIONS

XIFAXAN® (rifaximin) 550 mg tablets are indicated for the reduction in risk of overt hepatic encephalopathy (HE) recurrence in adults and for the treatment of irritable bowel syndrome with diarrhea (IBS-D) in adults.

IMPORTANT SAFETY INFORMATION

- 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.
- 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.

Please see additional Important Safety Information throughout and click here for full Prescribing Information.



Unique clinical content and resources for Nurse Practitioners and Physician Assistants who manage adult patients living with IBS-D and OHE

SEE WHAT'S NEW ON GASTROHUB FOR OHE

See your peers present the following OHE patient case studies, and consider if they relate to your patients



Rebecca McCollaum, NP, presents the case study of Susan, who has cirrhosis secondary to ALD and subsequently experienced an OHE episode 3 months ago



To learn more about reducing the risk of OHE recurrence with XIFAXAN



Samantha Ramirez, NP-C, presents the case study of Carlos, who was recently hospitalized for an OHE episode and followed up with his PCP due to his ongoing symptoms

Hypothetical patients.

ALD, alcohol-related liver disease; IBS-D, irritable bowel syndrome with diarrhea; OHE, overt hepatic encephalopathy; PCP, primary care provider.

INDICATIONS

XIFAXAN® (rifaximin) 550 mg tablets are indicated for the reduction in risk of overt hepatic encephalopathy (HE) recurrence in adults and for the treatment of irritable bowel syndrome with diarrhea (IBS-D) in adults.

IMPORTANT SAFETY INFORMATION (continued)

- In clinical studies, the most common adverse reactions for XIFAXAN (alone or in combination with lactulose) were:
 - HE (≥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%)
 - IBS-D (≥2%): Nausea (3%), ALT increased (2%)
- 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.

Please see additional Important Safety Information throughout and click <u>here</u> for full Prescribing Information.



