

## PATIENT CASE

This article is sponsored by Supernus Pharmaceuticals

## INDICATION

Qelbree is indicated for the treatment of ADHD in adults and pediatric patients 6 years and older.

## IMPORTANT SAFETY INFORMATION

## WARNING: SUICIDAL THOUGHTS AND BEHAVIORS

**In clinical studies, higher rates of suicidal thoughts and behaviors were reported in patients with ADHD treated with Qelbree than in patients treated with placebo. Closely monitor all Qelbree-treated patients for clinical worsening and for emergence of suicidal thoughts and behaviors.**

Please see full Important Safety Information on page 2.

## MIKE, 37 YEARS OLD



Patient portrayals.

- **Current ADHD treatment:** extended-release stimulant; booster IR dose as needed
- **Overwhelmed, distracted, and disorganized at work and home:** talked to his doctor about an adjustment to his ADHD treatment plan

Based on a real patient story. Patient name and images have been changed. Individual results may vary.

## MIKE'S THERAPEUTIC HISTORY:

- Initially diagnosed with ADHD at 8 years old
- Treatment history: short-acting stimulant, extended-release stimulants
  - Switched between extended-release medications to balance need for coverage and tolerability over the years
- Current treatment: extended-release stimulant; booster IR dose as needed

## RESULTS WITH QELBREE:

- Qelbree 400 mg/day maintained with additional improvement noted by patient
- Patient reported that treatment with Qelbree has helped with ADHD symptom control at both work and home throughout the day and into the evening
- In Mike's words, "I am more consistently on task at work and at home, so I am less edgy and restless"



## CHALLENGES AND NEED FOR SYMPTOM IMPROVEMENT:

- Overwhelmed at work and at home:
  - Distracted/unfocused during meetings
  - Disorganized office space; often misplaces documents
  - Distracted and restless at home, causing frustration with family
  - Difficulty managing multiple medications; often forgets booster dose

## TREATMENT WITH QELBREE

- Patient was started on Qelbree 200 mg/day
- Patient checked in via phone with doctor at 2 weeks to discuss treatment progress
- Patient reported symptom and coverage improvement and seemed to be tolerating treatment
- Agreed to titrate to Qelbree 400 mg/day to see if further improvement could be achieved; at next visit, patient may discuss titrating to Qelbree 600 mg/day if needed



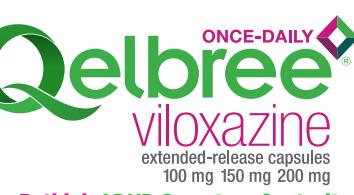
Learn more about Qelbree at [QelbreeHCP.com](http://QelbreeHCP.com).

Abbreviations: ADHD, attention-deficit/hyperactivity disorder; IR, immediate release.

## CONTRAINDICATIONS

- Concomitant administration of a monoamine oxidase inhibitor (MAOI), or dosing within 14 days after discontinuing an MAOI, because of an increased risk of hypertensive crisis
- Concomitant administration of sensitive CYP1A2 substrates or CYP1A2 substrates with a narrow therapeutic range

Please see full Important Safety Information on page 2.



Rethink ADHD Symptom Control<sup>®</sup>

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Qelbree® (viloxazine extended-release capsules) is indicated for the treatment of ADHD in adults and pediatric patients 6 years and older.

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## WARNINGS & PRECAUTIONS

- Suicidal thoughts and behaviors:* Closely monitor all Qelbree-treated patients for clinical worsening and emergence of suicidal thoughts and behaviors, especially during the initial few months of drug therapy, and at times of dosage changes
- Heart rate, blood pressure increases:* Qelbree can cause an increase in diastolic blood pressure and heart rate. Assess these measures prior to starting therapy, following increases in dosage, and periodically during therapy
- Activation of mania or hypomania:* Noradrenergic drugs may induce a manic or mixed episode in patients with bipolar disorder. Prior to initiating treatment with Qelbree, screen patients to determine if they are at risk for bipolar disorder. Screening should include a detailed psychiatric history, including a personal or family history of suicide, bipolar disorder, and depression
- Somnolence and fatigue:* Patients should not perform activities requiring mental alertness, such as operating a motor vehicle or hazardous machinery, due to potential somnolence (including sedation or lethargy) and fatigue, until they know how they will be affected by Qelbree

## ADVERSE REACTIONS

The most common adverse reactions ( $\geq 5\%$  and at least twice the rate of placebo for any dose) in patients 6 to 17 years were somnolence, decreased appetite, fatigue, nausea, vomiting, insomnia, and irritability, and in adults, insomnia, headache, somnolence, fatigue, nausea, decreased appetite, dry mouth, and constipation.

## PREGNANCY

There is a pregnancy exposure registry that monitors pregnancy outcomes in women exposed to Qelbree during pregnancy. Healthcare providers are encouraged to register patients by calling the National Pregnancy Registry for Psychiatric Medications at 1-866-961-2388 or by visiting [www.womensmentalhealth.org/preg](http://www.womensmentalhealth.org/preg).

Please see full [Prescribing Information, including Boxed Warning](#).



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