



THERE'S NO OTHER PPI LIKE ZEGERID

ZEGERID is unique


- Not therapeutically equivalent to Prilosec®, Prilosec OTC®, or generic omeprazole¹
- No AB-rated generic equivalent according to the FDA Orange Book¹
- Both capsule and powder for oral suspension are immediate-release formulations with no enteric coating²
 - Both facilitate immediate release of omeprazole for rapid absorption in approximately 30 minutes^{2,3}
- Built-in buffer protects omeprazole from acid degradation by raising intragastric pH⁴

All other oral PPIs, including omeprazole, are delayed release³⁻⁹

- Delayed-release PPIs — including oral suspensions, disintegrating tablets, and capsules
 - require enteric coatings to protect against acid degradation
- Enteric coatings delay absorption and initial acid suppression

Order ZEGERID: Contact your wholesaler to order 40 mg capsules or powder for oral suspension

| NDC | Unit Size |
|--------------|--|
| 68012-104-30 | 40 mg capsules in a 30-count bottle |
| 68012-102-30 | 20 mg capsules in a 30-count bottle |
| 68012-054-30 | 40 mg powder for oral suspension in a 30-count box |
| 68012-052-30 | 20 mg powder for oral suspension in a 30-count box |

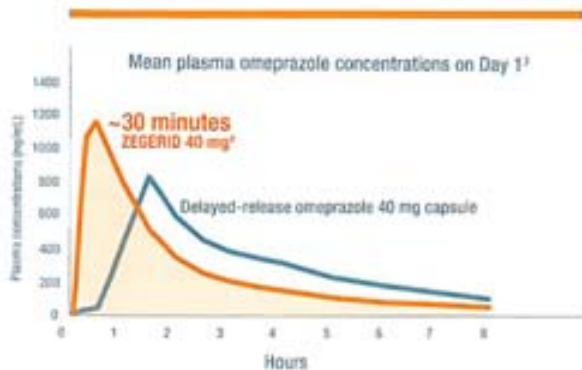


Visit the ZEGERID Pharmacy Corner at
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First and Only Immediate-Release Oral PPI

Zegerid[®]
omeprazole / sodium bicarbonate

THE ONLY ORAL PPI FORMULATED TO OFFER IMMEDIATE RELEASE AND CONTINUED ACID CONTROL²⁻⁹



Achieves peak plasma levels in **~30 minutes**, so it may start working earlier than delayed-release oral PPIs^{2-9††}



40 mg dose provides **18.6 hours** (median) of continued acid control, maintaining gastric pH >4 throughout the Night and Day²¹⁵

The correlation of pharmacodynamic data to clinical effect has not been established.

Prilosec and Prilosec OTC are registered trademarks of the AstraZeneca group of companies.

[†]Pharmacodynamic study measuring the median percentage of time gastric pH >4 as 18.6 hours over 24 hours with ZEGERID 40 mg Powder for Oral Suspension (n=24) and 12.2 hours over 24 hours with ZEGERID 20 mg Powder for Oral Suspension (n=28) in healthy subjects.

^{††}Powder for oral suspension.

^{†††}Mean peak plasma concentration on Day 1; ZEGERID and delayed-release omeprazole were administered 1 hour premeal.

^{*}Median values for the time gastric pH >4 for patients taking ZEGERID Powder for Oral Suspension and Capsules, 20 mg and 40 mg doses, ranged from 12.2 to 18.6 hours on Day 7, respectively.

Product Description

ZEGERID[®] (omeprazole/sodium bicarbonate) contains omeprazole, a proton pump inhibitor (PPI), and sodium bicarbonate, an antacid, which raises the gastric pH and thus protects omeprazole from acid degradation.

Indications and Recommended Dosing for ZEGERID

ZEGERID is indicated for heartburn and other symptoms associated with gastroesophageal reflux disease (GERD) (20 mg); for the short-term treatment (4-8 weeks) of erosive esophagitis diagnosed by endoscopy (20 mg); for maintenance of healing of erosive esophagitis (20 mg) (controlled studies do not extend beyond 12 months); for short-term treatment (4-8 weeks) of active duodenal ulcer (20 mg); for short-term treatment (4-8 weeks) of active benign gastric ulcer (40 mg); and for reduction of risk of upper gastrointestinal bleeding in critically ill patients (only powder for oral suspension 40 mg; use beyond 14 days has not been evaluated).

Important Safety Information about ZEGERID

The most frequently reported adverse events with ZEGERID are headache, diarrhea, and abdominal pain. In 178 critically ill patients treated with ZEGERID Powder for Oral Suspension, adverse events generally reflected the serious,

underlying medical condition of the patients, but some adverse events occurred with more frequency in patients treated with ZEGERID Powder for Oral Suspension than in those treated with the comparator (acid-controlling) drug. For more information about these and other events, please see Table 13 of the full Prescribing Information. Symptomatic response to therapy does not preclude the presence of gastric malignancy. Atrophic gastritis has been noted occasionally in gastric corpus biopsies from patients treated long term with omeprazole.

ZEGERID Capsules contain 304 mg of sodium per dose. ZEGERID Powder for Oral Suspension contains 460 mg of sodium per dose. This should be taken into consideration for patients on a sodium-restricted diet.

Sodium bicarbonate is contraindicated in patients with metabolic alkalosis and hypocalcemia. ZEGERID is contraindicated in patients with known hypersensitivity to any component of the formulation.

Since both 20 mg and 40 mg ZEGERID contain the same amount of sodium bicarbonate (1100 mg in capsules, 1680 mg in packets of powder for oral suspension), two 20 mg capsules are not equivalent to, and should not be substituted for, one 40 mg capsule, and two 20 mg packets are not equivalent to, and should not be substituted for, one 40 mg packet.

Please see accompanying full Prescribing Information for additional information.

References: 1. FDA Web site. Electronic Orange Book. <http://www.fda.gov/cder/ob/default.htm>. Accessed July 3, 2008. 2. ZEGERID Prescribing Information. Santarus, Inc. January 2008. 3. Castell D. Review of immediate-release omeprazole for the treatment of gastric acid-related disorders. *Expert Opin Pharmacother*. 2005;6:2501-2510. 4. Aciphex Prescribing Information. Eisai Inc. and Janssen Pharmaceutica Inc. June 2008. 5. Nexium Prescribing Information. AstraZeneca. February 2006. 6. Prevacid Prescribing Information. Takeda Pharmaceuticals America, Inc. November 2008. 7. Prilosec Prescribing Information. AstraZeneca. March 2008. 8. Protonix Prescribing Information. Wyeth Pharmaceuticals Inc. May 2008. 9. Kapidex Prescribing Information. Takeda Pharmaceuticals America, Inc. January 2009.

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Zegerid[®]
omeprazole/sodium bicarbonate



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