

Do you struggle to help your patients on a phosphate binder get to goal?

Discover a different approach with XPHOZAH as add-on therapy for patients on dialysis in whom a phosphate binder does not work well.

Do these patients' serum phosphorus levels look familiar?

Consistently above goal

Monthly sP level is consistently around **7.2 mg/dL**

In and out of goal

Most recent monthly sP levels were **6.0**, **5.2**, and **6.6** mg/dL

Close to goal

Most recent monthly sP level was **5.9 mg/dL**

When you see patients like these, act now!

Make a list of your patients who may benefit from XPHOZAH

List your patient's name and their current sP level, as well as their most recent sP levels.

Patient name	Current sP level	Monthly sP levels over past 6 months
		/

Talk with these patients' prescribers. Consider adding XPHOZAH to help reduce serum phosphorus levels with the goal of getting patients to goal.

When prescribing XPHOZAH, please remember that it cannot be filled through a traditional retail pharmacy. Please send XPHOZAH prescriptions to Transition Pharmacy in Trevose, PA or to a specialty pharmacy in our network. On all prescriptions, be sure to include your patient's dialysis center.

sP = serum phosphorus.

INDICATION

XPHOZAH (tenapanor) 30 mg BID is indicated to reduce serum phosphorus in adults with chronic kidney disease (CKD) on dialysis as add-on therapy in patients who have an inadequate response to phosphate binders or who are intolerant of any dose of phosphate binder therapy.

IMPORTANT SAFETY INFORMATION CONTRAINDICATIONS

XPHOZAH is contraindicated in:

- · Pediatric patients under 6 years of age
- · Patients with known or suspected mechanical gastrointestinal obstruction

*XPHOZAH® (tenapanor) tablets

Help your patients start XPHOZAH by sharing this information with them



XPHOZAH works differently than phosphate binders. XPHOZAH blocks phosphorus and is dosed as **one pill twice a day**, before the first and last meals. Remind patients that this is both the starting and max dose, and they should not take more than the prescribed dose.



Do not take XPHOZAH right before a hemodialysis session as patients may experience diarrhea.

Instead, take XPHOZAH right before the next meal following dialysis.



Stop the use of laxatives and stool softeners. Remind patients to tell their doctor if severe diarrhea occurs.

If patients experience diarrhea, it will likely happen soon after starting XPHOZAH and go away with continued treatment, or their doctor may lower their dose.

Help patients get XPHOZAH by reminding them of the following:



Their healthcare provider will send their XPHOZAH prescription to a specialty pharmacy



Patients must reply to the text or phone call from the specialty pharmacy to get the medication



The specialty pharmacy will work with patients to arrange delivery of XPHOZAH to their home

Reference: XPHOZAH® (tenapanor) full Prescribing Information. Waltham, MA: Ardelyx, Inc.; 2023.

IMPORTANT SAFETY INFORMATION (cont'd)

WARNINGS AND PRECAUTIONS

Diarrhea

Patients may experience severe diarrhea. Treatment with XPHOZAH should be discontinued in patients who develop severe diarrhea.

MOST COMMON ADVERSE REACTIONS

Diarrhea, which occurred in 43-53% of patients, was the only adverse reaction reported in at least 5% of XPHOZAH-treated patients with CKD on dialysis across trials. The majority of diarrhea events in XPHOZAH-treated patients were reported to be mild-to-moderate in severity and resolved over time, or with dose reduction. Diarrhea was typically reported soon after initiation but could occur at any time during treatment with XPHOZAH. Severe diarrhea was reported in 5% of XPHOZAH-treated patients in these trials.

Please see additional Important Safety Information on previous page and full Prescribing Information at XPHOZAH.com/PI.



