SPEAKER PROGRAM INVITATION

You are cordially invited to attend a Speaker Program on VELTASSA® (patiromer) For Oral Suspension. Please see Indication, Limitations of Use, and Important Safety Information for VELTASSA, including Boxed WARNING, below, and accompanying full Prescribing information.

Introducing VELTASSA (patiromer)

Elizabeth Snyder, MS, PA-C

Nephrology
Penn State Hershey Medical Center
Harrisburg, PA

Hyde Park Steakhouse

1615 Old Henderson Road
Upper Arlington, OH 43220
614-487-0539

Thursday June 23, 2016 at 6:00 PM

Please RSVP by Saturday, June 18, 2016 to
Amy Lewis at alewis@relypsa.com or via phone at 614-325-4958

IMPORTANT NOTE:

HCPs are encouraged but not required to bring their National Provider Identifier (NPI) and/or a State License Number (SLN) to the program. This information will only be used for reporting purposes. You may look up your NPI and SLN at: http://www.npinumberlookup.org.

Relypsa complies with all federal and state reporting requirements. As required meals and beverages provided and accepted by HCPs may be subject to reporting. Relypsa will neither recommend, endorse, nor support the submission of this promotional program for CME credits.

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Indication and Limitation of Use

VELTASSA is indicated for the treatment of hyperkalemia. VELTASSA should not be used as an emergency treatment for life-threatening hyperkalemia because of its delayed onset of action.

IMPORTANT SAFETY INFORMATION

WARNING: BINDING TO OTHER ORAL MEDICATIONS

VELTASSA binds to many orally administered medications, which could decrease their absorption and reduce their effectiveness. Administer other oral medications at least 6 hours before or 6 hours after VELTASSA. Choose VELTASSA or the other oral medication if adequate dosing separation is not possible.

Contraindications

Veltassa is contraindicated in patients with a history of a hypersensitivity reaction to Veltassa or any of its components.

Worsening of Gastrointestinal Motility

Avoid use of Veltassa in patients with severe constipation, bowel obstruction or impaction, including abnormal post-operative bowel motility disorders, because Veltassa may be ineffective and may worsen gastrointestinal conditions. Patients with a history of bowel obstruction or major gastrointestinal surgery, severe gastrointestinal disorders, or swallowing disorders were not included in clinical studies.

Hypomagnesemia

Veltassa binds to magnesium in the colon, which can lead to hypomagnesemia. In clinical studies, hypomagnesemia was reported as an adverse reaction in 5.3% of patients treated with Veltassa. Approximately 9% of patients in clinical trials developed hypomagnesemia with a serum magnesium value < 1.4 mg/dL. Monitor serum magnesium. Consider magnesium supplementation in patients who develop low serum magnesium levels.

Adverse Reactions

The most common adverse reactions (incidence ≥ 2%) are constipation, hypomagnesemia, diarrhea, nausea, abdominal discomfort and flatulence. Mild to moderate hypersensitivity reactions were reported in 0.3% of patients treated with Veltassa and included edema of the lips.

Please see accompanying full Prescribing Information.

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