

YOU'RE INVITED TO A LIVE PRESENTATION



Learn more about ANNOVERA® (segesterone acetate and ethinyl estradiol vaginal system) Delivers 0.15 mg/0.013 mg per day

Presented by: Macy Saunders, MSN, APRN

When: Thursday, September 4, 2025 at 6:15 PM EDT

Where: Local 11ten Food
1110 Bull Street
Savannah, GA 31401

Hosted by: Adrienne Soliday at 904-518-9719
or Adrienne.Soliday@maynepharma.com



If you would like to join us for this live program,
please RSVP 1 week prior: <https://mayne.pharmagin.com/reg/Annovera-AL200760> or scan:

Speaker Biography:

Ms. Macy Saunders is an advanced practice nurse practitioner who is passionate about caring for women across the lifespan, though she does have a special place in her heart for providing a safe and comfortable place for girls nervous about seeing an OB/GYN for the first time. Macy is certified through AAFE in aesthetics and offers both Botox and fillers — she loves highlighting natural beauty and making her patients feel their best. You can count on her to always provide compassionate, thorough care. Macy earned her bachelor's in education from Florida State University before pursuing a nursing degree and subsequent master's in nursing from Jacksonville University. When not in the office, you'll find her spending time with her husband and two precious children.

This is a non-CME program sponsored by Mayne Pharma and is only available for healthcare professionals with an appropriate specialty. Mayne Pharma will use registration information to comply with all federal and state laws requiring disclosure of transfers of value to healthcare professionals. Mayne Pharma will aggregate event expenses and apportion them appropriately among participants.

IMPORTANT SAFETY INFORMATION FOR ANNOVERA® (segesterone acetate and ethinyl estradiol vaginal system)
Delivers 0.15mg/0.013 mg per day

WARNING: CIGARETTE SMOKING AND SERIOUS CARDIOVASCULAR EVENTS
See full prescribing information for complete boxed warning.

- Females over 35 years old who smoke should not use ANNOVERA.
- Cigarette smoking increases the risk of serious cardiovascular events from combination hormonal contraceptive (CHC) use.

Please see additional Important Safety Information on next page.



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IMPORTANT SAFETY INFORMATION (continued)

INDICATION

ANNOVERA (segesterone acetate and ethinyl estradiol vaginal system) is a progestin/estrogen combination hormonal contraceptive indicated for use by females of reproductive potential to prevent pregnancy.

CONTRAINDICATIONS

- A high risk of arterial or venous thrombotic diseases
- Breast cancer
- Liver tumors, acute hepatitis, or severe (decompensated) cirrhosis
- Undiagnosed abnormal uterine bleeding
- Hypersensitivity to any of the components of ANNOVERA
- Use of Hepatitis C drug combinations containing ombitasvir/paritaprevir/ritonavir, with or without dasabuvir

WARNINGS AND PRECAUTIONS

- Stop ANNOVERA if a thrombotic or thromboembolic event occurs, and at least 4 weeks before and through 2 weeks after major surgery. Start ANNOVERA no earlier than 4 weeks after delivery, in females who are not breastfeeding. Consider cardiovascular risk factors before initiating in all females, particularly those over 35 years.
- Discontinue if jaundice occurs.
- Stop ANNOVERA prior to starting therapy with the combination drug regimen ombitasvir/paritaprevir/ritonavir. ANNOVERA can be restarted 2 weeks following completion of this regimen.
- Do not prescribe ANNOVERA for females with uncontrolled hypertension or hypertension with vascular disease. Monitor blood pressure and stop use if blood pressure rises significantly in females with well-controlled hypertension.
- Monitor glucose in pre-diabetic or diabetic females taking ANNOVERA. Consider an alternate contraceptive method for females with uncontrolled dyslipidemias.
- Patients using ANNOVERA who have a significant change in headaches or irregular bleeding or amenorrhea should be evaluated. ANNOVERA should be discontinued if indicated.
- Other warnings include: gallbladder disease; depression; cervical cancer; increased serum concentrations of binding globulins; hereditary angioedema; chloasma (females who tend to develop chloasma should avoid exposure to the sun or UV radiation while using ANNOVERA); toxic shock syndrome (TSS) (if a patient exhibits symptoms of TSS, remove ANNOVERA, and initiate appropriate medical treatment); vaginal use (ANNOVERA may not be suitable for females with conditions that make the vagina more susceptible to vaginal irritation or ulceration).

ADVERSE REACTIONS

The most common adverse reactions reported in at least 5% of women who used ANNOVERA were: headache/migraine, nausea/vomiting, vulvovaginal mycotic infection/candidiasis, lower/upper abdominal pain, dysmenorrhea, vaginal discharge, urinary tract infection, breast pain/tenderness/discomfort, bleeding irregularities including metrorrhagia, diarrhea, and genital pruritus.

DRUG INTERACTIONS

Drugs or herbal products that induce certain enzymes, including CYP3A4, may decrease the effectiveness of ANNOVERA or increase breakthrough bleeding. Counsel patients to use a back-up or alternative method of contraception when enzyme inducers are used with ANNOVERA.

Limitations of Use: ANNOVERA has not been adequately studied in females with a body mass index >29 kg/m².

Please note that this information is not comprehensive. Please see full Prescribing Information, including BOXED WARNING, at [ANNOVERA.com/pi.pdf](https://www.annovera.com/pi.pdf).

