

Join Bayer for a Speaker Program for LYNKUET®



Learn more about Introducing LYNKUET (elinzanetant): A New Treatment Option for Moderate to Severe Vasomotor Symptoms Due to Menopause PP-LNK-US-0276-1.

INDICATION

LYNKUET® (elinzanetant) is indicated for the treatment of moderate to severe vasomotor symptoms (VMS) due to menopause.

 Date:	2/26/26
 Time:	6:30 PM (GMT-05:00) Eastern Standard Time (America/New_York)
 Venue:	Tutto Fresco
 Address:	9501 Reserve Blvd Port St. Lucie, Florida 34986
 Program Number:	BAY0027574
 Bayer Presenter:	Kristy Crawford DO Cleveland Clinic Indian River Hospital Cleveland Clinic Indian River Hospital
 Bayer Healthcare Representative:	Sue Hishmeh Primary Care Sales Consultant sue.hishmeh@bayer.com, +15615736184

This is a non-CME Promotional Program.

If you would like to attend, please RSVP to **Sue Hishmeh** at sue.hishmeh@bayer.com.

If you are unable to register, please contact vde_rsvpbayersb@veeva.com for assistance.

IMPORTANT SAFETY INFORMATION

Contraindications: LYNKUET is contraindicated in pregnancy. Exposure to LYNKUET may cause pregnancy loss or stillbirth when administered during pregnancy.

Warnings and Precautions:

Central Nervous System Depressant Effect and Daytime Impairment:

In the three OASIS trials, nervous system effects (including somnolence, fatigue, vertigo, dizziness and presyncope) occurred in 11.9% of patients on LYNKUET compared to 3.5% on placebo. Advise patients about the potential for somnolence and other nervous system effects. Advise patients who experience these effects to refrain from driving or engaging in hazardous occupations or activities until the effects have resolved.

Hepatic Transaminase Elevations:

Elevations in serum transaminase [alanine aminotransferase (ALT) and/or aspartate aminotransferase (AST)] concentrations equal to or greater than three times the upper limit of normal (ULN) occurred in 0.6% of patients receiving LYNKUET and 0.4% of patients receiving placebo up to 12 weeks in three clinical trials. Perform baseline bloodwork (including ALT, AST, alkaline phosphatase, and total and direct bilirubin) prior to initiation of LYNKUET to evaluate for hepatic function and injury. Do not start therapy if serum transaminase concentration is equal to or exceeds two times the ULN or if the total bilirubin is equal to or exceeds two times the ULN. Perform follow-up evaluations of hepatic transaminase concentration 3 months after initiation of therapy.

Please see additional Important Safety Information on the back page and accompanying Full Prescribing Information.

IMPORTANT SAFETY INFORMATION (CONT'D)

Hepatic Transaminase Elevations (cont'd):

Advise patients to discontinue LYNKUET immediately and seek medical attention including hepatic laboratory tests if they experience signs or symptoms that may suggest liver injury (new onset fatigue, decreased appetite, nausea, vomiting, pruritus, jaundice, pale feces, dark urine, or abdominal pain).

Discontinue LYNKUET if transaminase elevations exceed five times the ULN or if transaminase elevations exceed three times the ULN and total bilirubin exceeds two times the ULN.

Risk of Pregnancy Loss:

LYNKUET is contraindicated for use in pregnancy. Findings from animal studies suggest that LYNKUET can cause pregnancy loss or stillbirth. Exclude pregnancy in females of reproductive potential prior to initiating LYNKUET. Advise females of reproductive potential to use effective contraception during treatment with LYNKUET and for 2 weeks after stopping LYNKUET.

Risk of Seizures in Patients with a History of Seizures:

Seizure was reported in one patient with a history of seizures in the clinical trials of LYNKUET. In addition, convulsions were observed in studies conducted in male and female rats. Use LYNKUET with caution in patients with a history of seizures or with conditions that potentially lower the seizure threshold.

Most Common Adverse Reactions:

The most frequently reported ($\geq 5\%$) adverse reactions with LYNKUET vs placebo in a 52-week study were: headache (9.6% vs 7.0%), fatigue (7.3% vs 2.9%), dizziness (6.1% vs 1.9%) and somnolence (5.1% vs 1.3%).

Drug Interactions:

Effects of Other Drugs on LYNKUET

Strong CYP3A4 Inhibitors and Grapefruit (Juice): Concomitant use of LYNKUET with strong CYP3A4 inhibitors and grapefruit (juice) should be avoided as it may increase the risk of LYNKUET-associated adverse reactions.

Moderate CYP3A4 Inhibitors: Reduce LYNKUET dose if administered concomitantly with moderate CYP3A4 inhibitors as it may increase the risk of LYNKUET-associated adverse reactions.

Strong and Moderate CYP3A4 Inducers: Avoid concomitant use of LYNKUET with strong and moderate CYP3A4 inducers.

Effects of LYNKUET on Other Drugs

CYP3A4 Substrates: Avoid concomitant use unless otherwise recommended in the Prescribing Information for CYP3A4 substrates where minimal concentration changes may lead to serious adverse reactions, as it may increase the risk of adverse reactions related to these substrates.

Use in Specific Populations:

Pregnancy

LYNKUET is contraindicated in pregnancy. If pregnancy occurs during the use of LYNKUET, discontinue treatment.

Hepatic Impairment

LYNKUET is not recommended in patients with moderate (Child-Pugh B) or severe (Child-Pugh C) hepatic impairment.

Renal Impairment

The effect of end-stage renal disease (eGFR < 15 mL/min), with or without hemodialysis, on the pharmacokinetics of LYNKUET has not been studied.

Please see additional Important Safety Information on the front page and accompanying Full Prescribing Information.

You are encouraged to report side effects or quality complaints of products to the FDA by visiting www.fda.gov/medwatch or calling 1-800-FDA-1088.

Attention Attendees: This program is being provided for the education of healthcare practitioners who diagnose or treat the conditions for which this Bayer product is indicated and/or prescribe, recommend, or support the use of this Bayer product. Pursuant to the PhRMA Code, additional guests such as friends, significant others, or family members are not appropriate speaker program attendees. If you have any questions about attendance for the program, please contact the Bayer representative responsible for the program.

Please Note: To maintain the educational focus of the event, alcohol will not be provided.

Certain HCPs and other individuals may be prohibited from participating in this event based on additional state and federal laws that restrict meals and gifts. Bayer requests that you please comply with any and all laws in the state where you hold a license.

Vermont Attendees: If you are a Vermont-licensed HCP, you may attend a Speaker Program, but you must not accept a meal.

Veterans Affairs/Executive Officers/Federal Employee Attendees: If you are an employee of the Department of Veterans Affairs or of the federal government (even part-time), you may attend a Speaker Program, but you will be responsible for your meal.

Minnesota Attendees: If you are a Minnesota-licensed practitioner, you may attend a Speaker Program; however, you may not accept a gift/meal.

Virtual Attendees: Meals will not be provided.



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