



You are cordially invited to attend a KIMYRSA® program

Entitled

Treatment Challenges of Skin infections and the role of single dose KIMYRSA® (oritavancin)

Presented by
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Emory Healthcare
Braselton, GA
On

Tuesday, February 7, 2023 6:30 PM ET

Location

The Capital Grille 9005 Mercato Drive Naples, FL 34108

This is an-person program. The speaker will be presenting in-person and available for questions.

Space is Limited. Preferred to RSVP by: 4 calendar days prior to the program date listed above

To RSVP for this program, click <u>www.hlxregister.com</u> to self-register. Or call (813) 293-3204 or email dsavitsky@melinta.com with invitation code T37D82

This program is not eligible for CME/CE Credits.

As a healthcare professional, certain laws or policies applicable to you may prohibit or limit meals or items of value you may receive. We ask that you comply with any restrictions that govern your receipt of meals or items of value. By accepting food and/or refreshments at this program, you represent that neither your employer, nor the state(s) in which you are licensed, impose restrictions that preclude you from accepting these items. Accepting a meal involves a reportable transfer of value from Melinta to you. The amount of that value will be reported as required by law in accordance with Melinta policy. Melinta does not pay for or provide alcohol at programs taking place in California, Connecticut, District of Columbia, Massachusetts or Nevada. Attendance at this educational program is limited to healthcare professionals only. Thank you for your cooperation.

INDICATION AND USAGE

KIMYRSA® (oritavancin) for injection is indicated for the treatment of adult patients with acute bacterial skin and skin structure infections (ABSSSI) caused or suspected to be caused by susceptible isolates of the following Gram-positive microorganisms: *Staphylococcus aureus* (including methicillin-susceptible [MSSA] and methicillin-resistant [MRSA] isolates), *Streptococcus pyogenes*, *Streptococcus agalactiae*, *Streptococcus dysgalactiae*, *Streptococcus anginosus* group (includes *S. anginosus*, *S. intermedius*, and *S. constellatus*), and *Enterococcus faecalis* (vancomycin-susceptible isolates only).

To reduce the development of drug-resistant bacteria and maintain the effectiveness of KIMYRSA® and other antibacterial drugs, KIMYRSA® should be used only to treat or prevent infections that are proven or strongly suspected to be caused by susceptible bacteria.

IMPORTANT SAFETY INFORMATION

Contraindications

Use of intravenous unfractionated heparin sodium is contraindicated for 120 hours (5 days) after KIMYRSA[®] administration because the activated partial thromboplastin time (aPTT) test results may remain falsely elevated for approximately 120 hours (5 days) after KIMYRSA[™] administration.

KIMYRSA® is contraindicated in patients with known hypersensitivity to oritavancin products.

Warnings and Precautions

Coagulation test interference: Oritavancin has been shown to artificially prolong aPTT for up to 120 hours, and may prolong PT and INR for up to 12 hours and ACT for up to 24 hours. Oritavancin has also been shown to elevate D-dimer concentrations up to 72 hours. For patients who require aPTT monitoring within 120 hours of KIMYRSATM dosing, consider a non-phospholipid dependent coagulation test such as a Factor Xa (chromogenic) assay or an alternative anticoagulant not requiring aPTT.

Serious hypersensitivity reactions, including anaphylaxis, have been reported with the use of oritavancin products including KIMYRSA®. Discontinue infusion if signs of acute hypersensitivity occur. Closely monitor patients with known hypersensitivity to glycopeptides.

Infusion Related Reactions: Infusion reactions characterized by chest pain, back pain, chills and tremor have been observed with the use of oritavancin products (e.g. KIMYRSA®), including after the administration of more than one dose of oritavancin during a single course of therapy. Stopping or slowing the infusion may result in cessation of these reactions.

Clostridioides difficile-associated diarrhea: Evaluate patients if diarrhea occurs.

Concomitant warfarin use: Oritavancin has been shown to artificially prolong PT/INR for up to 12 hours. Patients should be monitored for bleeding if concomitantly receiving KIMYRSA® and warfarin.

Osteomyelitis: Institute appropriate alternate antibacterial therapy in patients with confirmed or suspected osteomyelitis.

Prescribing KIMYRSA® in the absence of a proven or strongly suspected bacterial infection or a prophylactic indication is unlikely to provide benefit to the patient and increases the risk of development of drug-resistant bacteria.

Adverse Reactions

The most common adverse reactions (≥3%) in patients treated with oritavancin products were headache, nausea, vomiting, limb and subcutaneous abscesses, and diarrhea. The adverse reactions occurring in ≥2 patients receiving KIMYRSA® were hypersensitivity, pruritis, chills and pyrexia.

Please see Full Prescribing Information for KIMYRSA® at www.kimyrsa.com