DID YOU KNOW...

9 out of 10 people† struggle with food cravings while dieting?

Help control your cravings and lose weight with CONTRAVE

The exact neurochemical effects of CONTRAVE leading to weight loss are not fully understood.

CONTRAVERE (naltrexone HCl/bupropion HCl) is a prescription weight-loss medicine that may help adults with obesity (BMI greater than or equal to 30 kg/m²), or who are overweight (BMI greater than or equal to 27 kg/m²) with at least one weight-related medical condition, lose weight and keep the weight off. CONTRAVERE should be used along with diet and exercise.

†Overweight or struggling with obesity (BMI ≥27).

Important Safety Information

One of the ingredients in CONTRAVERE, bupropion, may increase the risk of suicidal thinking in children, adolescents, and young adults. CONTRAVERE patients should be monitored for suicidal thoughts and behaviors. In patients taking bupropion for smoking cessation, serious neuropsychiatric adverse events have been reported. CONTRAVERE is not approved for children under 18.

Please see additional Important Safety Information on page 7.

Learn more at CONTRAVERE.com
Cravings and hunger are very different weight-loss challenges

Did you know that cravings are one of the main reasons diets fail?

<table>
<thead>
<tr>
<th>Cravings ARE:</th>
<th>Cravings ARE NOT the same as:</th>
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<tbody>
<tr>
<td>WANTING to eat specific foods. Your brain tells you it wants these specific foods even when you are not hungry</td>
<td>Hunger, which is your brain and body telling you they need nutrition and any food will satisfy this NEED</td>
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You may experience cravings in different ways:

1. **As a reward for something good**  
   *Let’s get some ice cream to celebrate!*  

2. **In certain situations or as part of a habit**  
   *Watching TV with a soda and a bag of potato chips.*

3. **When experiencing certain emotions**  
   *Chocolate calls my name when I’m stressed, bored, or lonely.*

Do any of these craving situations sound familiar?  
Get help controlling your cravings to lose weight today!
Talk to your doctor about ways to help control your cravings to lose weight

DID YOU KNOW...

MORE THAN 90% of people report cravings while dieting

MORE THAN 60% of people who gave in to their cravings did so even when they were not hungry

YOU ARE less likely to lose weight with diet and exercise alone if you struggle with cravings

DON'T WAIT!

Talk to your doctor about ways to help control your cravings to lose weight

Share the times and situations you find yourself struggling with cravings.

For example, do you...

1. Feel like you deserve to eat a special treat when something good happens?
2. Want to snack whenever you sit down to watch TV?
3. Find yourself looking for comfort food when you’re stressed, lonely, or bored?

Take 2 minutes to fill out the Doctor Discussion Guide in this booklet and review it with your doctor.
If you’re trying to lose weight and keep it off, 2 areas of your brain could be working against you*

- The hunger center (hypothalamus) can either reduce or trigger hunger
- The mesolimbic reward system can create cravings even when you’re not hungry

*Other areas of the brain may be involved in weight loss.

Have you heard about set point theory?

Your body is thought to be programmed to defend against weight loss and maintain a certain range of body weight—a range that can be determined by your heaviest past weight.

This may be why hunger, and especially cravings, increase when dieting!

When weight loss occurs, the brain causes cravings that seem uncontrollable and increases hunger as a way to bring the body back to its predetermined set point.

Your set point may increase as you gain weight.
CONTRAVERSE is believed to work on 2 areas of your brain to reduce hunger and help control cravings*

The hypothalamus (hunger center) to reduce hunger

The mesolimbic reward system to help control cravings

*The exact neurochemical effects of CONTRAVERSE leading to weight loss are not fully understood.

2–4x MORE WEIGHT LOST
along with diet and exercise

• Across 3 studies, patients who were overweight or struggling with obesity lost approximately 2–4x more weight over one year by adding CONTRAVERSE than with diet and exercise alone
  - Nearly half of patients taking CONTRAVERSE lost 5% or more body weight and kept it off (vs 23% of patients taking placebo). Individual results may vary

MORE THAN 70%

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MORE THAN
70%

of responders† with a BMI of 30.0–34.9 were able to move into a healthier, non-obese category (BMI 29.9 or less) after 1 year of CONTRAVERSE

†Patients who experienced 5% weight loss by Week 16.

Important Safety Information

Do not take CONTRAVERSE if you:
• have uncontrolled hypertension
• have or have had seizures or an eating disorder
• use other medicines that contain bupropion
• are dependent on opioid pain medicines, use medicines to help stop taking opioids, or are in opiate withdrawal
• drink a lot of alcohol and abruptly stop drinking, or take sedatives, benzodiazepines, or anti-seizure medicines and you abruptly stop using them
• are taking monoamine oxidase inhibitors (MAOIs). **Do not** start CONTRAVERSE until you have stopped taking your MAOI for at least 14 days
• are allergic to any of the ingredients in CONTRAVERSE
• are pregnant or planning to become pregnant or are breastfeeding

Before taking CONTRAVERSE, tell your healthcare provider about all of your current or past health conditions.

Please see additional Important Safety Information, including boxed warning, on page 7.
Study design for CONTRAVE clinical trials

**Study 1 (COR-I):** In this 56-week study, the group taking CONTRAVE along with diet and exercise lost 5.4% of their body weight (on average) compared with the placebo group who lost 1.3% (on average) with diet and exercise alone. Additionally, 42% of the CONTRAVE users lost at least 5% of their total body weight (while 17% of the placebo group lost at least 5% of their total body weight with diet and exercise). For participants who remained on CONTRAVE for the whole study, average weight loss was 8.1% or approximately 18 pounds, which was 4 times more weight than participants taking placebo.

**Study 2 (COR-BMOD):** In this 56-week study, all patients participated in an intensive diet and exercise program, including group visits. At 56 weeks, the CONTRAVE users lost 8.1% (on average) of their total body weight compared with a body weight loss of 4.9% (on average) for the placebo group. Additionally, 57% of those who took CONTRAVE lost at least 5% of their total body weight (while 43% of those on placebo lost at least 5% of their total body weight). For participants who remained on CONTRAVE for the whole study, average weight loss was 11.5% or 27 pounds.

**Study 3 (COR-Diabetes):** In this 56-week study of obese or overweight patients with type 2 diabetes, the group taking CONTRAVE along with diet and exercise lost 3.7% of their body weight (on average) compared with the placebo group who lost 1.7% (on average) with diet and exercise alone after 56 weeks. Additionally, 36% of the CONTRAVE users lost at least 5% of their total body weight (while 18% of the placebo group lost at least 5% of their total body weight). CONTRAVE users also had a reduction in HbA1c of 0.6% (compared with a reduction of 0.1% in the placebo group) at 56 weeks. CONTRAVE is not indicated to treat diabetes.

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**A Healthier Weight...**

...gives you more to feel good about!

By working toward a healthier weight, you can help reduce your risk or symptoms of many weight-related conditions that can impact your health and everyday life, including:

- Sleep apnea
- Knee pain
- Shortness of breath
- Heartburn
- Foot pain
- Acid reflux
- Hip pain
- Joint pain

Your doctor will use BMI (body mass index) to assess your weight.

Ask your doctor how a lower BMI can be beneficial to your health and everyday life.

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Stop taking CONTRAVE and call your healthcare provider right away if you experience thoughts about suicide or dying; depression, or anxiety; panic attacks; trouble sleeping; irritability; aggression; mania; or other unusual changes in behavior or mood.

Do not take CONTRAVE if you:

- have uncontrolled hypertension
- have or have had seizures or an eating disorder
- use other medicines that contain bupropion
- are dependent on opioid pain medicines, use medicines to help stop taking opioids, or are in opiate withdrawal
- drink a lot of alcohol and abruptly stop drinking, or take sedatives, benzodiazepines, or anti-seizure medicines and you abruptly stop using them
- are taking monoamine oxidase inhibitors (MAOIs). Do not start CONTRAVE until you have stopped taking your MAOI for at least 14 days
- are allergic to any of the ingredients in CONTRAVE
- are pregnant or planning to become pregnant or are breastfeeding

Before taking CONTRAVE, tell your healthcare provider about all of your current or past health conditions.

Tell your healthcare provider about all the medicines you take, including prescription and over-the-counter medicines, vitamins, and herbal supplements. Do not take any other medicines while you are taking CONTRAVE unless your healthcare provider says it is okay.

If you have a seizure while taking CONTRAVE, stop taking CONTRAVE and call your healthcare provider right away.

Additional serious side effects may include: opioid overdose or sudden opioid withdrawal; severe allergic reactions; increases in blood pressure or heart rate; liver damage or hepatitis; manic episodes; visual problems (glaucoma); and increased risk of low blood sugar (hypoglycemia) in people with type 2 diabetes mellitus who take certain medicines to treat their diabetes.

The most common side effects of CONTRAVE include nausea, constipation, headache, vomiting, dizziness, trouble sleeping, dry mouth, and diarrhea.

These are not all the possible side effects of CONTRAVE. Please refer to the full Prescribing Information, including Medication Guide, for CONTRAVE or talk to your doctor.

You are encouraged to report negative side effects of drugs to the FDA. Visit www.fda.gov/medwatch or call 1-800-FDA-1088.
Consider these situations and talk to your doctor about cravings and other weight-related struggles

Check all that apply:

- I'm good all day long but then I reach for ice cream at night
- I often celebrate or reward myself with food
- When I am stressed or upset, I reach for comfort foods
- During holidays or special occasions, I find myself eating even when I'm not hungry

Other weight-related struggles

- My weight is holding me back from fully enjoying my life
- I feel like my weight interferes with my ability to feel intimate with my partner
- At work, I feel like people judge me for my weight, not for my abilities
- My weight affects my self-confidence
- Due to my weight, I feel like I can't keep up with my kids or friends as much as I'd like to

If you checked any of these circles, your weight may be impacting your life. Talk to your doctor today about weight-loss treatment options.
3 ways to connect with CONTRAVE

1. Visit CONTRAVE.com/health-and-fitness for diet and exercise tips, resources, and more.

2. Sign up at CONTRAVE.com/sign-up for weight-loss tips and reminders to help you stay on track.

3. Follow CONTRAVE on Facebook and Instagram for tips to stay on track.
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  - Cravings are wanting specific foods regardless of whether you are hungry
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Why wait?
Ask your doctor about CONTRAVE today!

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