

NEW FOR CHEMOTHERAPY-INDUCED NAUSEA AND VOMITING (CINV)*

POWER OVER EMESIS

INTRODUCING ALOXI—THE FIRST AND ONLY
5-HT₃ RECEPTOR ANTAGONIST THAT PROVIDES
POWERFUL, PROLONGED CINV PREVENTION
WITH A SINGLE IV DOSE.

- Improved complete response rates over both ondansetron and dolasetron following moderately emetogenic chemotherapy.^{†1,2}
- Only 5-HT₃ receptor antagonist indicated for the prevention of delayed nausea and vomiting associated with moderately emetogenic chemotherapy.³⁻⁶
- Highest receptor binding affinity⁵ and longest half-life (~40 hrs) of the 5-HT₃ receptor antagonist class.³⁻⁸
- A single, 0.25 mg fixed dose 30 minutes prior to chemotherapy is appropriate for a wide range of patients.^{||3}

NEW
Aloxi.
palonosetron HCl injection
STARTS STRONG
LASTS LONG

[†]ALOXI™ (palonosetron HCl) injection 0.25 mg is indicated for the prevention of acute and delayed nausea and vomiting associated with initial and repeat courses of moderately emetogenic chemotherapy, and acute nausea and vomiting associated with initial and repeat courses of highly emetogenic chemotherapy.

[‡]Complete response defined as no emetic episode and no use of rescue medication.

[§]*In vitro* data; clinical significance has not been established.

^{||}Safety and effectiveness in patients below the age of 18 years have not been established.

ALOXI is contraindicated in patients known to have hypersensitivity to the drug or any of its components. It should be administered with caution in patients who have or may develop prolongation of cardiac conduction intervals, particularly QTc. Most commonly reported adverse reactions include headache (9%) and constipation (5%).

Please see the following brief summary of prescribing information.

ALOXI ALLIANCE PROGRAM

Reimbursement hotline: 1-866-30-ALOXI.

