Ryeqo®
relugolix, estradiol, and norethisterone acetate

QUICK REFERENCE GUIDE[1]

ENDOMETRIOSIS INDICATION	**Indicated in adult women of reproductive age for symptomatic treatment of endometriosis in women with a history of previous medical or surgical treatment for their endometriosis**
ACTIVE INGREDIENTS	Relugolix 40 mg, estradiol (as hemihydrate) 1 mg, norethisterone acetate 0.5 mg
MECHANISM OF ACTION	Relugolix binds to and inhibits GnRH receptors in the anterior pituitary gland, leading to less circulating FSH and LH and therefore lowering estrogen and progesterone levels Estradiol add-back minimises side effects such as bone mineral density (BMD) loss and hot flushes, whilst the norethisterone acetate reduces the risk of endometrial hyperplasia from the estradiol add-back
CONTRACEPTIVE EFFECT	After at least 1 month of use, Ryeqo will provide adequate contraception. Non-hormonal methods of contraception must be used for at least the 1st month of treatment
FERTILITY AFTER DISCONTINUATION	Ovulation and menstrual bleeding will return rapidly after discontinuing Ryeqo. An alternative method of contraception needs to be started immediately if pregnancy is not desired
WHEN TO START TREATMENT	The first tablet must be taken within 5 days of the onset of menstrual bleeding. If treatment is initiated on another day of the menstrual cycle, irregular and/or heavy bleeding may initially occur
ONCE DAILY DOSING	One tablet once daily, at the same time each day, with or without food. Ryeqo can be taken without interruption
MISSED DOSES	If a dose is missed, treatment must be taken as soon as possible and then continued the next day at the usual time. If doses are missed for 2 or more consecutive days, a non-hormonal method of contraception is to be used for the next 7 days of treatment
WHEN TO EXPECT RESULTS	For many patients, Ryeqo offers relief from endometriosis symptoms from 4 weeks of treatment. If it takes a little longer, this is completely normal as by 24 weeks, over 74% of patients achieved a significant reduction in dysmenorrhoea.[2]
TREATMENT DURATION	Use is recommended to be limited to 24 months, with extension of therapy conditional on stability of BMD as assessed by DXA and reassessment of risk/benefit in the individual patient
SAFETY CONSIDERATIONS	• The most common AEs for patients being treated for endometriosis were headache (17.0%) and hot flush (11.7%) • Bone mineral density was preserved at 2 years • Pregnancy must be ruled out prior to initiating treatment
MAIN CONTRAINDICATIONS	• Concomitant use of hormonal contraceptives • Headaches with focal neurological symptoms or migraine headaches with aura • Osteoporosis • Pregnancy or breastfeeding • VTE/ATE (past or present) • Thrombophilic disorders • Sex steroid influenced malignancies • Liver tumours • Severe hepatic disease • Genital bleeding of unknown aetiology • Hypersensitivity to active substances/ excipients

RYEQO®: NOW PBS LISTED FOR ENDOMETRIOSIS[3]

HAVE YOU SEEN THIS PATIENT?

- Diagnosed with endometriosis
- Still in pain despite trying other treatment
- Wants to reclaim her life by managing the pain that's holding her back

If this describes a patient of yours, Ryeqo may be a suitable treatment option[1]

Ryeqo® can be initiated by GPs with experience in diagnosis and treatment of endometriosis & Gynaecologists.[4]

FOR MORE INFORMATION ABOUT RYEQO®

Get more detail

For more information on the PBS listing, visit **www.pbs.gov.au**

Find out more

For further information and resources visit: **www.ryeqo.com.au**

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PBS INFORMATION: Ryeqo® is PBS listed for the symptomatic treatment of endometriosis – Authority required (STREAMLINED) for endometriosis. Refer to PBS schedule for full authority information. This product is not PBS listed for Uterine Fibroids.

Please review the full Product Information (PI) before prescribing.
Full Product Information is available from the TGA using this QR code.

▼ This medicinal product is subject to additional monitoring in Australia. This will allow quick identification of new safety information. Healthcare professionals are asked to report any suspected adverse events at www.tga.gov.au/reporting-problems

Abbreviations: AE, adverse event; ATE, arterial thromboembolism; BMD, bone mineral density; DXA, Dual-energy X-ray absorptiometry; FSH, follicle-stimulating hormone; GnRH, gonadotropin-releasing hormone; LH, luteinizing hormone; PBS, Pharmaceutical Benefits Scheme; VTE, venous thromboembolism.

References: 1. Ryeqo® Approved Product Information. January 2024. **2.** Giudice LC *et al. Lancet.* 2022;399:2267–2279. **3.** Pharmaceutical Benefits Scheme. Available at: www.pbs.gov.au **4.** Data on file, 5018 DUSC ADV 8. (2024). "Main summary of the issues on drug utilisation", March 2024 PBAC Meeting.

GEDEON RICHTER