ASTELLAS LAUNCHES VAPRISOL® (CONIVAPTAN HYDROCHLORIDE INJECTION) PREMIXED IN 5% DEXTROSE FOR THE TREATMENT OF HYPONATREMIA

Arginine vasopressin (AVP) receptor antagonist now available in new premixed formulation

DEERFIELD, Illinois, April 1, 2009 — Astellas Pharma US, Inc. today announced the commercial availability of Vaprisol® (conivaptan hydrochloride injection) Premixed in 5% Dextrose, a new premixed formulation. Discovered and developed by Astellas, Vaprisol, an arginine vasopressin (AVP) receptor antagonist, is the first and only approved drug indicated for the treatment of both euvolemic and hypervolemic hyponatremia in hospitalized patients.¹ Hyponatremia is a potentially life-threatening condition that occurs when the body’s blood sodium level falls significantly below normal.² Vaprisol Premixed was approved by the U.S. Food and Drug Administration in October 2008.

The 100mL, single-use premixed formulation of Vaprisol comes in a plastic INTRAVIA® Container, a product of Baxter Healthcare Corporation, containing 20mg of conivaptan hydrochloride in 5% dextrose solution. Lactic acid, USP is added for pH adjustment to pH 3.4 to 3.8. The new formulation will make preparation easier for health care providers, as it requires no measuring or mixing.¹ Additionally, it has an expiration date of 24 months, six months longer than the original ampule formulation.³

“It is imperative to promptly address hyponatremia in emergency and hospital settings,” said Dr. Joseph Verbalis, M.D., Professor of Medicine and Physiology at Georgetown University. “Vaprisol Premixed in 5% Dextrose is a convenient option for quickly preparing treatment for hyponatremia patients.”
Hyponatremia is present in approximately 28 percent of patients upon admission into acute hospital care, and another 14 percent acquire the condition while in acute care. Severe cases are medical emergencies that can result in swelling of the brain, respiratory arrest, catastrophic brain damage and death.

In the treatment of hyponatremia associated with congestive heart failure, Vaprisol is indicated only for those patients for whom the expected benefit of raising serum sodium outweighs the increased risk of adverse events. Vaprisol is contraindicated in patients with hypovolemic hyponatremia.

About Hyponatremia
Hyponatremia, a condition of low serum sodium concentration, often results from elevated levels of the hormone arginine vasopressin (AVP), which regulates water and salt balance in the body. It is the most common electrolyte disorder in clinical medicine and one of the most difficult to treat. Syndrome of inappropriate antidiuretic hormone (SIADH), advanced kidney failure, hypothyroidism and cancer are common causes of hyponatremia. Dilutional hyponatremia, which includes euvoletic and hypervolemic hyponatremia, is the most common form of the condition, and occurs when retained water dilutes serum sodium content. Patients with hyponatremia are classified as hypervolemic if swelling of body tissues (edema) is present or euvoletic if there is an increase in total body water content without edema.

About Vaprisol
Discovered and developed by Astellas Pharma Inc., headquartered in Tokyo, Japan, Vaprisol is a drug that blocks the activity of AVP, resulting in increased urine output without loss of valuable electrolytes such as sodium and potassium. This effect, known as “aquaresis,” helps to increase serum sodium levels in patients with hyponatremia. Vaprisol is the first AVP receptor antagonist with a demonstrated safety profile and that effectively promotes aquaresis in order to help restore salt and water balance in patients with euvoletic and hypervolemic hyponatremia.

Vaprisol is indicated for the treatment of euvoletic and hypervolemic hyponatremia in hospitalized patients. Vaprisol is not indicated for the treatment of congestive heart failure. It should only be used for the treatment of hyponatremia in patients with underlying heart failure when the expected benefit of raising
serum sodium outweighs the increased risk of adverse events. Vaprisol is contraindicated in patients with hypovolemic hyponatremia. In addition, coadministration of Vaprisol with potent CYP3A4 inhibitors, such as ketoconazole, itraconazole, clarithromycin, ritonavir, and indinavir, is contraindicated. Solutions containing dextrose may be contraindicated in patients with known allergy to corn or corn products. Serum sodium, volume, and neurological status must be monitored frequently because Vaprisol potentially can cause overly rapid correction of sodium leading to serious sequelae. The use of Vaprisol in patients with hepatic impairment (including ascites, cirrhosis, or portal hypertension) or renal impairment has not been systematically evaluated. Use caution when administering Vaprisol to these patients. The most common adverse reactions reported were infusion site reactions (incidence of 73% and 63% for 20 mg/day and 40 mg/day respectively) which were also the most common type of adverse reaction leading to discontinuation of Vaprisol. Discontinuations from treatment due to infusion site reactions were more common among Vaprisol-treated patients (3%) than among placebo-treated patients (0%). Other common adverse reactions were headaches (8%, 10%), hypokalemia (22%, 10%), orthostatic hypotension (14%, 6%), and pyrexia (11%, 5%) for Vaprisol 20mg/day and 40mg/day, respectively.¹ For full prescribing information, please visit www.Vaprisol.com.

About Astellas
Astellas Pharma US, Inc., located in Deerfield, Illinois, is a US affiliate of Tokyo-based Astellas Pharma Inc., Astellas is a pharmaceutical company dedicated to improving the health of people around the world through the provision of innovative and reliable pharmaceutical products. The organization is committed to becoming a global pharmaceutical company by combining outstanding R&D and marketing capabilities and continuing to grow in the world pharmaceutical market. For more information about Astellas Pharma US, Inc., please visit our website at www.astellas.com/us.

References:

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