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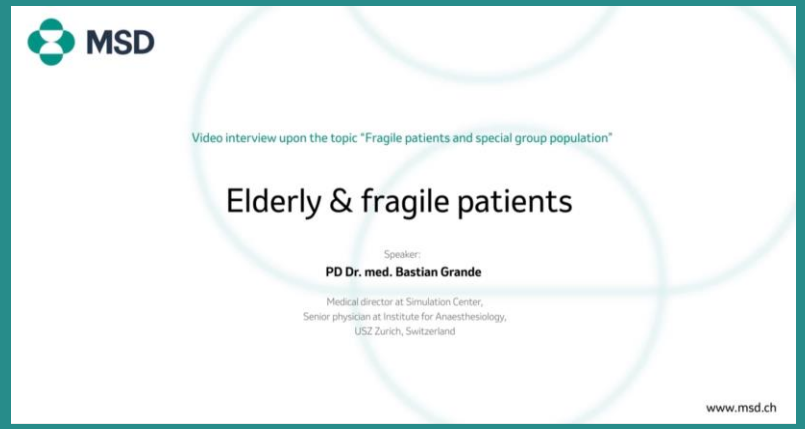

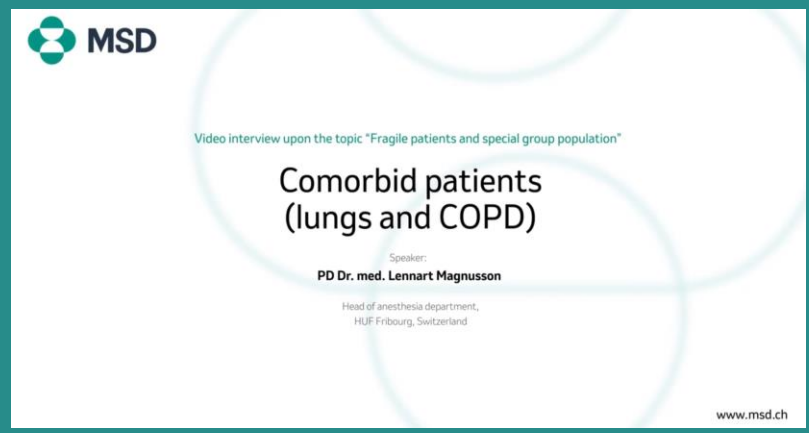

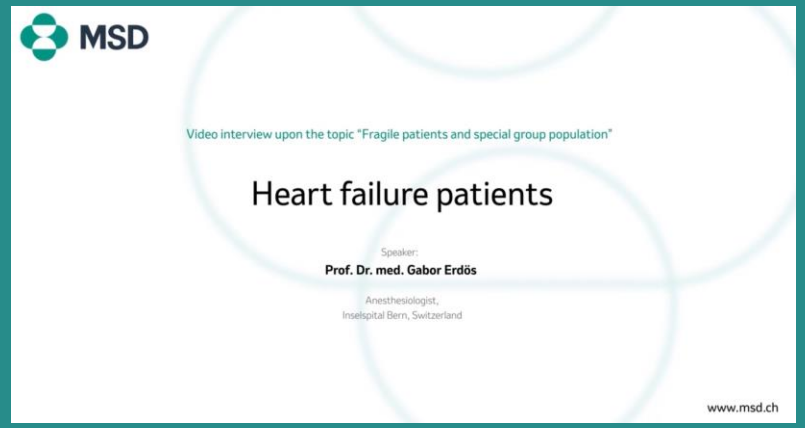

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Bridion® allows you to bring back patients effectively and quickly.[1]

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Bridion® can:

- Improve patient comfort and safety by providing predictable, complete and rapid eversal of moderate and deep NMB[1]
- Be appropriate for use in a wide variety of surgical procedures and patient populations[2]
- Improve intra- and postoperative experience for the operating room team resulting in OR efficiency[3]

1. Jones RK et al. Reversal of profound rocuronium-induced blockade with sugammadex: a randomized comparison with neostigmine. Anesthesiology. 2008 Nov; 109(5):816-24. **2.** Bridion® prescribing information, www.swissmedicinfo.ch **3.** Brueckmann B et al. Effects of sugammadex on incidence of postoperative residual neuromuscular blockade: a randomized, controlled study. Br J Anaesth. 2015 Nov; 115(5):743-51.

Short prescribing information BRIDION® (sugammadex): BRIDION®: C: Sugammadex. I: Reversal of rocuronium- or vecuronium-induced neuromuscular block (NMB). D: Use only by or under the supervision of an anesthetist. Use appropriate neuromuscular monitoring technique. Recommended dose depends on degree of NMB, not anesthesia procedure. Adults: Routine reversal of NMB: dose 4.0mg/kg body weight at 1-2 Post-Tetanic Counts (PTC); dose of 2.0mg/kg if spontaneous recovery until recovery of two stimulus responses (T2). Immediate NMB reversal dose: 16.0mg/kg. Immediate reversal of NMB after vecuronium-induced blockade not recommended. Dosage on recurrence of NMB: Initial 2mg/kg or 4mg/kg, then re-application of 4mg/kg recommended. Possible need for artificial respiration. After 2nd sugammadex dose, closely monitor patient. Renal failure: Not recommended for severely impaired renal function including dialysis (CrCl < 30ml/min). Adipose patients: Base sugammadex dose on actual body weight. Liver failure: Use with great caution in severe liver failure or in liver failure with coagulopathy. Correct route of administration: administer i.v. rapidly (within 10 sec), preferably once-only bolus in existing i.v. route. For further indications and the corresponding dosing, please refer to the full prescribing information. CI: Hypersensitivity to active substance/excipients. Pr: Artificial respiration required until sufficient spontaneous respiration obtained. Even after sufficient recovery from NMB, artificial respiration may be required due to other medications. If recurrence occurs after extubation, provide adequate artificial respiration. Recurrence of NMB: Lower doses than recommended may increase the risk of recurrence of NMB after initial reversal and should not be used. Not for reversal of block by non-steroidal neuromuscular blockers (e.g. succinylcholine or benzylisoquinoline-like substances). Not to reverse NMB by other steroidal neuromuscular blockers than rocuronium or vecuronium. Anesthesia complications: If NMB is reversed under continued anesthesia, additional doses of the anesthetic and/or opioid are required. Close monitoring of hemodynamic parameters during and after administration (bradycardias). In clinically significant bradycardia, immediately take appropriate emergency actions and administer an anticholinergic. Effects on hemostasis: Use cautiously in patients with anamnestic or therapeutic anticoagulation. Hypersensitivity reactions: Prepare and take necessary precautions for hypersensitivity reactions (including anaphylactic reactions). DDI: Displacement of toremifene and fusidic acid, complex formation with hormonal contraceptives (additionally use barrier-forming contraceptives). In vitro: influencing serum progesterone levels, pharmacodynamic interactions (prolongation of aPTT and PT) with vitamin K antagonists, unfractionated heparin, low molecular weight heparinoids, rivaroxaban, dabigatran. P/L: No use during pregnancy unless absolutely necessary. Not recommended during lactation. UDE: Common: cough, nausea, vomiting, attenuated therapeutic effect. P: Solution for injection in vials: 200mg/2ml, 500mg/5ml. C: B. MAH: MSD Merck Sharp & Dohme AG, Werftestrasse 4, 6005 Lucerne, Switzerland. (V4.0); CH-XBR-0000S. Before prescribing, please consult the full prescribing information published on the homepage of Swissmedic (www.swissmedicinfo.ch). Copyright © 2022 Merck & Co., Inc., Rahway, NJ, USA and its affiliates. All rights reserved.Reprints of cited literature can be requested at dpoc.switzerland@msd.com or the following address.

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