

# My life:

## Talking with my HCP about hypothyroidism

Use this guide to prepare for the next appointment with your healthcare provider (HCP). Answer a few questions, track your symptoms, and you'll be ready to talk with your HCP about hypothyroidism and find the best treatment plan for your unique needs.

### 1. I want to talk with my HCP about:

*(Choose all that apply)*

- ☐ Hypothyroidism symptoms and how to manage them
- ☐ My treatment options for hypothyroidism
- ☐ How hypothyroidism symptoms are impacting my daily life
- ☐ Natural thyroid extracts such as Adthyza (thyroid tablets, USP)

### 2. The symptoms I'm experiencing:

*(Choose all that apply)*

- ☐ Are new symptoms
- ☐ Are symptoms that keep happening even with medication
- ☐ I am not having symptoms, but I want to talk about new treatments

Please note that Adthyza<sup>®</sup> has not been reviewed by the FDA for safety or efficacy.

#### INDICATIONS:

Adthyza<sup>®</sup> (thyroid tablets, USP) is a prescription medicine indicated as replacement or supplemental therapy in patients with hypothyroidism of any etiology, except transient hypothyroidism during the recovery phase of subacute thyroiditis.

Adthyza<sup>®</sup> is also indicated as a pituitary TSH suppressant in the treatment or prevention of various types of euthyroid goiters, including thyroid nodules, subacute or chronic lymphocytic thyroiditis (Hashimoto's), multinodular goiter, and in the management of thyroid cancer.

Please see Important Safety Information including Boxed Warning throughout and [Full Prescribing Information](#).

# My symptoms:

Hypothyroidism is more than your thyroid stimulating hormone (TSH) number. It's important to talk to your HCP about how you're feeling. Listen to your body. Note all symptoms below and discuss them.

## My current symptoms: *(Choose all that apply)*

- |   |   |
|---|---|
| <input type="checkbox"/> Weight gain  | <input type="checkbox"/> High cholesterol                                     |
| <input type="checkbox"/> Chronic constipation                                       | <input type="checkbox"/> Menstrual cycle irregularities (prolonged and heavy) |
| <input type="checkbox"/> Feeling cold (especially hands and feet) even on warm days | <input type="checkbox"/> Infertility  |
| <input type="checkbox"/> Fatigue, exhaustion, and low energy throughout the day     | <input type="checkbox"/> Numbness and tingling (especially in hands and face) |
| <input type="checkbox"/> Slowness of thought processes (brain fog)                  | <input type="checkbox"/> Brittle hair and nails                               |
| <input type="checkbox"/> Indecisiveness   | <input type="checkbox"/> Hair loss  |
| <input type="checkbox"/> Poor memory and concentration                              | <input type="checkbox"/> Headache or migraines                                |
| <input type="checkbox"/> Sluggishness   | <input type="checkbox"/> Low blood pressure problems                          |
| <input type="checkbox"/> Muscle weakness  | <input type="checkbox"/> Reduced libido                                       |
| <input type="checkbox"/> Pain and stiffness in muscles and joints                   | <input type="checkbox"/> Stiff neck and shoulders                             |
| <input type="checkbox"/> Depression and mood swings                                 | <input type="checkbox"/> Eyebrow thinning (outer third)                       |
| <input type="checkbox"/> Thick, dry, coarse skin                                    | <input type="checkbox"/> Irritability   |
| <input type="checkbox"/> Creviced, cracking skin on heels, elbows, and knee caps    | <input type="checkbox"/> Fluid retention                                      |

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## IMPORTANT SAFETY INFORMATION

### WARNING

DRUGS WITH THYROID HORMONE ACTIVITY, ALONE OR TOGETHER WITH OTHER THERAPEUTIC AGENTS, HAVE BEEN USED FOR THE TREATMENT OF OBESITY. IN EUTHYROID PATIENTS, DOSES WITHIN THE RANGE OF DAILY HORMONAL REQUIREMENTS ARE INEFFECTIVE FOR WEIGHT REDUCTION. LARGER DOSES MAY PRODUCE SERIOUS OR EVEN LIFE-THREATENING MANIFESTATIONS OF TOXICITY, PARTICULARLY WHEN GIVEN IN ASSOCIATION WITH SYMPATHOMIMETIC AMINES SUCH AS THOSE USED FOR THEIR ANORECTIC EFFECTS.

Please see additional Important Safety Information throughout and [Full Prescribing Information](#).

# My questions:

Choose questions you want to discuss with your HCP:

- ☐ What are my hypothyroidism treatment options?
- ☐ What are the side effects of different treatment options?
- ☐ How should I take my medication and how long does it take for medications to take effect?
- ☐ I'm currently taking medication, but still having symptoms. What else can I do?
- ☐ What can you tell me about natural thyroid extracts (NTEs) such as Adthyza?
- ☐ Other:

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Notes

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Appointment Date

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Learn More About Hypothyroidism



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## IMPORTANT SAFETY INFORMATION (cont'd)

Thyroid hormones should be used with great caution in circumstances where the integrity of the cardiovascular system is suspected. In the elderly and in patients with cardiovascular disease, ADTHYZA should be used with greater caution.

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Do not use ADTHYZA in patients with uncorrected adrenal cortical insufficiency, untreated thyrotoxicosis (high thyroid hormone levels), and apparent hypersensitivity to any component of the product.

The use of thyroid hormones for weight loss, alone or combined with other drugs, is unjustified and has been shown to be ineffective. Neither is their use justified for the treatment of male or female infertility unless this condition is accompanied by low thyroid levels.

Thyroid hormones should be used with great caution in circumstances where the integrity of the cardiovascular system is suspected. In the elderly and in patients with cardiovascular disease, ADTHYZA should be used with greater caution.

Tell your doctor about any other medical conditions you may have, especially heart disease, diabetes, blood clotting problems, and adrenal or pituitary gland problems. The dose of other drugs you may be taking to control these conditions may have to be changed while you are taking.

A reportedly apparent association between prolonged thyroid therapy and breast cancer has not been confirmed, and patients on thyroid for established indications should not discontinue therapy. No confirmatory long-term studies in animals have been performed to evaluate cancer causing potential, mutagenicity, or impairment of fertility in either males or females.

Thyroid replacement therapy for hypothyroid women should not be discontinued during pregnancy, and hypothyroidism diagnosed during pregnancy should be promptly treated. Minimal amounts of thyroid hormones are excreted in human milk. However, caution should be exercised when thyroid is administered to a nursing woman. Routine determinations of serum T4 and/or TSH are strongly advised in neonates in view of the deleterious effects of thyroid deficiency on growth and development.

Tell your doctor immediately if you experience chest pain, increased pulse rate, rapid, strong, irregular heartbeat, excessive sweating, or any other unusual event. Partial loss of hair may be experienced by children in the first few months of thyroid therapy, but this is usually a transient phenomenon.

Many drugs and some laboratory tests may alter your therapeutic response to ADTHYZA.

Tell your doctor about all medicines you take, including prescription and nonprescription medicines, vitamins, and herbal supplements. Especially tell your doctor if you take medicines to treat and prevent blood clots (anticoagulants), antidiabetic agents, or oral contraceptives.

For further information, please see the complete [Prescribing Information](#) for ADTHYZA.

To report SUSPECTED ADVERSE REACTIONS, contact Azurity Pharmaceuticals, Inc. at [1-800-461-7449](tel:1-800-461-7449), or to the FDA at [www.fda.gov/medwatch](http://www.fda.gov/medwatch) or call [1-800-FDA-1088](tel:1-800-FDA-1088).