

Indications and clinical use:

Alvesco® is indicated for the prophylactic management of steroid-responsive bronchial asthma in adults, adolescents, and children 6 years of age and older.

Contraindications:

- Untreated fungal, bacterial or tuberculosis infections of the respiratory tract
- Primary treatment of status asthmaticus or other acute episodes of asthma or in patients with moderate to severe bronchiectasis

Relevant warnings and precautions:

- Patients with hypothyroidism
- Patients with cirrhosis and/or severe hepatic impairment
- Immunosuppressive drugs
- May cause eosinophilic conditions
- May cause candidiasis
- As with other inhalation therapy, paradoxical bronchospasm may occur
- Caution in systemic steroid replacement by inhaled steroid
- Patients with hypoprothrombinemia in conjunction with acetylsalicylic acid
- Systemic effects of inhaled corticosteroids may occur, particularly at high doses for prolonged periods
- Monitor HPA axis function and effects on the eye

For more information:

For important information on conditions of clinical use, contraindications, warnings, precautions, adverse reactions, drug interactions and dosing, please consult the product monograph at <https://www.astrazeneca.ca/content/dam/az-ca/downloads/productinformation/alvesco-product-monograph-en.pdf>. The product monograph is available by calling AstraZeneca Canada at 1-800-668-6000.

References:

1. Alvesco® (ciclesonide inhalation aerosol) Product Monograph. AstraZeneca Canada Inc. January 19, 2017.
2. Omnaris® (ciclesonide) Product Monograph. AstraZeneca Canada Inc. January 19, 2017.

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**#1 ICS MDI DISPENSED
IN CANADA WITH
RESPIROLOGISTS†**



Ciclesonide oral inhalation

Simple Once-Daily Dosing¹

- Once-daily dosing for children, adolescents and adults¹
- Alvesco[®] is taken as 1 or 2 puffs once daily in the morning or evening.²

Age	Strength	Rx
Children 6-11	100 mcg	1-2 puffs once a day
	200 mcg	1 puff once a day
12 and up	200 mcg	2 puffs once a day

Adults and adolescents 12 years of age and older: The recommended starting dose for most patients, whether previously maintained on either bronchodilators alone or inhaled corticosteroids, is 400 micrograms once daily. The recommended dose range is 100 to 800 micrograms per day.

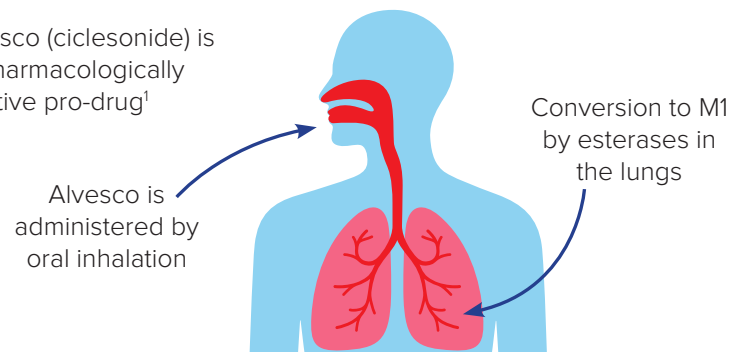
Alvesco[®] can be administered as 1 or 2 puffs once daily either in the morning or evening. Some patients with more severe asthma may be more adequately controlled on 800 micrograms daily, administered as 400 micrograms BID.

Children 6-11 years of age: The recommended starting dose for most patients, whether previously maintained on either bronchodilators alone or inhaled corticosteroids, is 100 to 200 micrograms once daily. The recommended dose range is 100 to 200 micrograms per day, administered as 1 or 2 puffs once daily either in the morning or evening.

As with all inhaled corticosteroids, the dose of Alvesco[®] should be adjusted according to individual response.

Mechanism of Action^{1*}

- Alvesco (ciclesonide) is a pharmacologically inactive pro-drug¹



- Alvesco is converted by esterases in the lungs to M1, the pharmacologically active metabolite of ciclesonide¹
- M1 binds to glucocorticoid receptors in the lung tissues resulting in local pronounced anti-inflammatory activity¹

¹Clinical significance is unknown.

Indication:

Omnaris[®] (ciclesonide) nasal spray is indicated for the treatment of seasonal allergic rhinitis, including hayfever, and perennial allergic rhinitis in adults and adolescents 12 years of age and older.

Contraindications:

- Patients with tuberculosis

Relevant warnings and precautions:

- Patients who are on drugs that suppress the immune system are more susceptible to infections than healthy individuals
- Patients should be examined periodically for changes or signs of adverse effects on the nasal mucosa (e.g. *Candida albicans*)
- Do not use in patients with recent nasal ulcers, nasal surgery, or nasal trauma until healing has occurred
- Monitor for growth in children and adolescents
- Use in pregnant or nursing women only if justified
- Monitor for hypoadrenalism in infants born to mothers taking corticosteroids
- Signs of adrenal insufficiency and withdrawal can accompany the replacement of a systemic corticosteroid with a topical corticosteroid; patients should be carefully monitored. Rapid decreases in systemic corticosteroid dosages following long-term treatment may cause a severe exacerbation of symptoms in patients with asthma or other clinical conditions
- Use with caution, if at all, in patients with untreated local or systemic fungal or bacterial infections, viral or parasitic infections, or ocular herpes simplex
- Use caution in patients with known hypersensitivity to other corticosteroids
- Rare instances of wheezing, nasal septum perforation, cataracts, glaucoma, increased intraocular pressure have been reported with intranasal corticosteroid use
- Not approved for use in patients younger than 12 years of age
- Greater sensitivity in some older individuals cannot be ruled out

For more information:

For important information on conditions of clinical use, contraindications, warnings, precautions, adverse reactions, drug interactions and dosing, please consult the product monograph at <https://www.astrazeneca.ca/content/dam/az-ca/downloads/productinformation/omnarisproduct-monograph-en.pdf>. The product monograph is available by calling AstraZeneca Canada at 1-800-668-6000.

References: 1. Alvesco[®] (ciclesonide inhalation aerosol) Product Monograph. AstraZeneca Canada Inc. January 19, 2017.

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Omnaris[®] (ciclesonide) is indicated for the treatment of seasonal allergic rhinitis, including hayfever, and perennial allergic rhinitis in adults and adolescents 12 years of age and older.



Simple Once-Daily Dosing²

- For adults and adolescents (12 years and older)



**Omnaris®
200 mcg
per day**

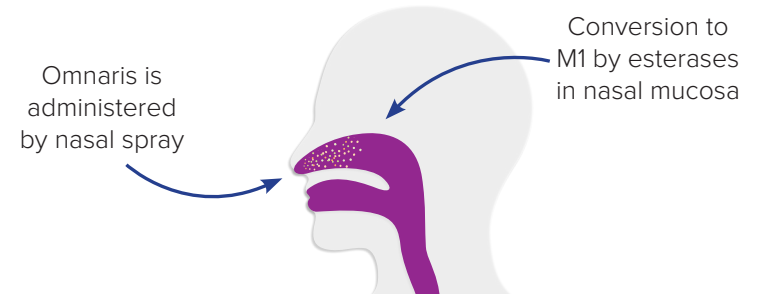


**2 sprays
in each nostril
(50 mcg/spray)**

- Since the effect of Omnaris® depends on its regular use, patients should be instructed to use it at regular intervals and not as they feel necessary.²

Mechanism of Action^{2*}

- Omnaris (ciclesonide) is a pharmacologically inactive pro-drug²



- Omnaris is converted by esterases in the nasal mucosa to M1, the pharmacologically active metabolite of ciclesonide; M1 has potent anti-inflammatory activity²

^{*}Clinical significance is unknown.