The FDA has significantly restricted the use of rosiglitazone (Avandia, Avandamet, and Avandaryl) medicines to patients with type 2 diabetes who cannot control their blood sugar on other medicines. These new restrictions were instituted in response to data that suggest an elevated risk of heart attacks in patients treated with rosiglitazone.

After November 18, 2011, rosiglitazone (Avandia, Avandamet, and Avandaryl) medicines will no longer be available through retail pharmacies, including Script Care’s diabetic pharmacy, Prescription Mart. Patients will receive their medicine by mail order through specially certified pharmacies participating in the program.

If you are currently taking Avandia, Avandamet, or Avandaryl:
Contact your healthcare provider as soon as possible to determine if it is appropriate for you to continue taking a rosiglitazone medicine and, if it is, how to become enrolled in the Avandia-Rosiglitazone Medicines Access Program. Enrollment information is also available on the Avandia website (www.avandia.com). Your healthcare provider will need to complete and sign a patient enrollment form for you.

For additional information go to www.avandia.com and the attached GlaxoSmithKline communication.
June 27, 2011

IMPORTANT DRUG WARNING

Subject: Rosiglitazone Medicines: Potential Increased Risk of Myocardial Infarction; Withdrawal of Rosiglitazone Medicines from Current Supply Chain
Effective November 18, 2011

Dear Pharmacist,

GlaxoSmithKline (GSK) is informing you about the Avandia-Rosiglitazone Medicines Access Program, hereafter referred to as the Rosiglitazone Risk Evaluation and Mitigation Strategy (REMS). This restricted access and dispensing program has been required by the Food and Drug Administration (FDA) for rosiglitazone medicines [i.e., AVANDIA® (rosiglitazone maleate), AVANDAMET® (rosiglitazone maleate and metformin hydrochloride), and AVANDARYL® (rosiglitazone maleate and glimepiride)] to ensure that the benefits of the drugs outweigh the potential increased risk of myocardial infarction associated with their use. Prescribers and patients must enroll in the Rosiglitazone REMS Program in order for prescribers to be able to prescribe and patients to be able to receive rosiglitazone medicines. Rosiglitazone medicines will only be available through specially certified pharmacies.

The Rosiglitazone REMS limits the use of rosiglitazone to:

- Patients already taking rosiglitazone, who have been advised by a healthcare professional of the risks and benefits of rosiglitazone, including the potential increased risk of myocardial infarction, or
- Patients not already taking rosiglitazone who are: (1) unable to achieve adequate glycemic control on other diabetes medications, and (2) have been advised of the risks and benefits of rosiglitazone, including the potential increased risk of myocardial infarction, and (3) in consultation with their healthcare provider, have decided not to take pioglitazone (ACTOS®) for medical reasons.

Rosiglitazone is not recommended in patients with symptomatic heart failure.

Effective November 18, 2011, GSK will withdraw rosiglitazone medicines from the current supply chain. Therefore, patients prescribed rosiglitazone medicines will no longer be able to have their prescriptions filled at your pharmacy. It is important that you advise any patients filling a prescription at your pharmacy to contact their physician as soon as possible in order to determine if they are appropriate for enrollment in the Rosiglitazone REMS Program. Their physician will discuss the risks and benefits of rosiglitazone medicines, including the potential increased risk of myocardial infarction, and if appropriate, will complete the necessary Rosiglitazone REMS enrollment materials.

You will receive a second communication with instructions on returning rosiglitazone medicines to GSK c/o Stericycle on or about October 18, 2011.
Potential Increased Risk of Myocardial Infarction

A meta-analysis of 52 clinical trials (mean duration 6 months; 16,995 total patients), most of which compared AVANDIA to placebo, showed AVANDIA to be associated with a statistically significant increased risk of myocardial infarction. Three other trials (mean duration 46 months; 14,067 total patients), comparing AVANDIA to some other approved oral antidiabetic agents or placebo, showed a statistically non-significant increased risk of myocardial infarction, and a statistically non-significant decreased risk of death. There have been no clinical trials directly comparing cardiovascular risk of AVANDIA and ACTOS (pioglitazone, another thiazolidinedione), but in a separate trial, pioglitazone (when compared to placebo) did not show an increased risk of myocardial infarction or death.

Please see accompanying complete prescribing information, including the BOXED WARNING and WARNINGS and PRECAUTIONS sections; and Medication Guides, for AVANDIA, AVANDAMET, and AVANDARYL.

If you have any questions regarding the Rosiglitazone REMS Program, please call 1-800-AVANDIA (1-800-282-6342) or visit the Rosiglitazone REMS Web site [www.AVANDIA.com]. The Coordinating Center hours of operation are Monday through Friday from 8:00 AM to 8:00 PM ET.

Sincerely,

Alexander R. Cobitz, MD, PhD
Director, Cardiovascular and Metabolism
Medical Development Center
GlaxoSmithKline Pharmaceuticals