For your patients with xerostomia

**NeutraSal® is clinically proven to help restore the oral environment:**

**INDICATIONS**
NeutraSal® is indicated for dryness of the mouth (hyposalivation, xerostomia) and dryness of the oral mucosa due to drugs that suppress salivary secretion.

**IMPORTANT SAFETY INFORMATION**
- Not intended to prevent xerostomia or oral mucositis
- Patients should avoid eating or drinking for at least 15 minutes after use
- Solution should not be swallowed but be spit out
- Not intended for systemic use to treat any diseases of the throat or upper gastrointestinal tract
- Not intended for use as an antacid
- No adverse events anticipated if swallowed accidentally
- Contains sodium; consult with patients on a low sodium diet
- No known interactions with medicinal or other products

*NeutraSal® does not treat these conditions

**Dosing guidelines:** The powder in the single-dose packet is mixed with 1 oz water for use as an oral rinse. For xerostomia, use 2-10x/day. For oral mucositis, use 4-10x/day.

**$0 Copay for eligible patients†**

*NeutraSal® (Supersaturated Calcium Phosphate Rinse)*

Please see accompanying Instructions for Use for more information.
NEUTRALIZE DRY MOUTH WITH PROVEN, PRESCRIPTION NEUTRASAL®

Percentage of patients in a clinical study with varying degrees of dry mouth symptoms† who reported improvements‡

90% Swallowing
93% Drinking
80% Eating
86% Taste Disorders
90% Ability to Speak

†30 patients with varying degrees of xerostomia symptoms rinsed with NeutraSal® 2-3 times a day for 28 days. Subjective patient self-assessment using Dry Mouth Questionnaire assessed severity of symptoms on Day 1 vs Day 28.

CLINICAL OUTCOMES⁴

18% improvement
Average salivary pH for study patients improved from 5.9 to 7.0 pH
93% decreased
93% of patients showed a decrease in S. mutans bacteria, aiding remineralization

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• Not intended for systemic use to treat any diseases of the throat or upper gastrointestinal tract
See reverse for additional safety information

$0 Copay for eligible patients†

For more information, contact your OraPharma representative or visit NeutraSalProfessional.com

†Eligibility Restrictions and Requirements: This offer is only valid for patients with commercial insurance where NeutraSal® (Supersaturated Calcium Phosphate Rinse) is a covered medication. This offer is not valid for any person eligible for reimbursement of prescriptions, in whole or in part, by any federal, state, or other governmental programs, including, but not limited to, Medicare (including Medicare Advantage and Part A, B, and D plans), Medicaid, TRICARE, Veterans Administration or Department of Defense health coverage, CHAMPUS, the Puerto Rico Government Health Insurance Plan, or any other federal or state health care programs. By using this program, the patient agrees not to seek reimbursement for all or any part of the benefit received through this offer and is responsible for making any required reports of use of this offer to any insurer or other third party who pays any part of the prescription filled. This offer is good only in the United States of America (including the District of Columbia, Puerto Rico and the U.S. Virgin Islands). This offer is not valid where otherwise prohibited, taxed, or otherwise restricted and not valid for any person that is 65 years of age or older without commercial insurance. Patients must be 18 years of age or older to redeem this offer for themselves or a minor. This offer cannot be redeemed at government-subsidized clinics. This offer is valid for one (1) initial prescription fill of NeutraSal® and up to ten (10) prescription refills. The maximum benefit available is $150 per box. Participating patients are responsible for all costs and expenses after the maximum benefit is reached. If the patient receives coverage through a health savings account (HSA) or similar arrangement, it is the patient’s responsibility to know how claims are processed and understand that amounts paid by the third party for their NeutraSal® prescription may be deducted from their benefits limit automatically. This offer is not valid with other offers. The coupon has no cash value or cash back. This offer is not health insurance. This offer expires on December 31, 2017. Valeant Pharmaceuticals and OraPharma reserve the right to rescind, revoke, terminate, or amend this offer at any time, without notice.