

When gout patients are at risk for colchicine toxicity


GLOPERBA[®]
(colchicine) oral solution
Precision Dosing



Go low with GLO

GLOPERBA[®] is the first and only liquid oral colchicine—designed for precision dosing below 0.6 mg for patients with renal impairment or GI sensitivity.¹⁻³

Identify the GLOPERBA patient in your practice

Patient type: In need of gout prophylaxis but is at risk for colchicine toxicity



Renal impairment:

- Severe renal impairment
eGFR 15–29 mL/min/1.73 m²
- Moderate renal impairment
eGFR 30–59 mL/min/1.73 m²



GI sensitivity:

- Current colchicine intolerance
- Prior history of colchicine intolerance
- Pre-existing GI conditions
(eg, inflammatory bowel diseases, peptic ulcer, GERD)

Older patient

Switch at-risk patients on colchicine 0.6 mg tablets/capsules to GLOPERBA

IMPORTANT SAFETY INFORMATION

INDICATION

GLOPERBA[®] (colchicine) 0.6 mg oral solution is indicated for prophylaxis of gout flares in adults. The safety and effectiveness of GLOPERBA for acute treatment of gout flares during prophylaxis has not been studied.

GLOPERBA is not an analgesic medication and should not be used to treat pain from other causes.

Please see Important Safety Information and full [Prescribing Information](#) for GLOPERBA.

Now you can prescribe the strength at-risk patients need, at the precise dose they can safely tolerate:

- ↓ Minimizing colchicine toxicity in renally impaired patients²
- ▽ Mitigating GI sensitivity²
- ⊘ Preventing the progression of gout and related long-term consequences^{1,4,5}



GLOPERBA does not come with a pre-filled syringe.

Click to see the data behind:

- Why colchicine 0.6 mg may be too high
- GLOPERBA suggested starting doses

Start patients with a colchicine dose that's "just right" for them

INDICATION AND IMPORTANT SAFETY INFORMATION

Important Safety Information for GLOPERBA® (colchicine)

- **Colchicine 0.6 mg oral solution is contraindicated in patients with renal or hepatic impairment who are currently prescribed drugs that inhibit both P-gp and CYP3A4.** Combining these dual inhibitors with colchicine in patients with renal or hepatic impairment has resulted in life-threatening or fatal colchicine toxicity. Patients with both renal and hepatic impairment should not be given GLOPERBA.
- **Fatal overdoses** have been reported with colchicine in adults and children. Keep GLOPERBA out of the reach of children.
- **Blood dyscrasias**, such as myelosuppression, leukopenia, granulocytopenia, thrombocytopenia, and aplastic anemia, have been reported with colchicine used in therapeutic doses.
- **Drug interactions:** Concomitant use of GLOPERBA with inhibitors of both CYP3A4 and P-gp should be avoided. If treatment with colchicine is necessary, a reduced daily dose should be considered and the patient should be closely monitored for colchicine toxicity and, if present, consider lowering the dose, temporary interruption, or discontinuation of colchicine.
- **Neuromuscular toxicity** and rhabdomyolysis may occur with chronic treatment with colchicine in therapeutic doses, especially in combination with other drugs known to cause this effect. Patients with impaired renal function and elderly patients (including those with normal renal and hepatic function) are at increased risk. Consider lowering the dose, temporary interruption, or discontinuation of GLOPERBA.
- **The most commonly reported adverse reactions** with colchicine are gastrointestinal symptoms, including diarrhea, nausea, vomiting, and abdominal pain.

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You are encouraged to report negative side effects of prescription drugs to the FDA.

To report suspected adverse reactions, visit www.fda.gov/medwatch or call 1-800-FDA-1088.

Please see full [Prescribing Information](#) for GLOPERBA.

References:

1. GLOPERBA® (colchicine) oral solution. Prescribing Information. SCILEX Pharmaceuticals; March 2024. 2. Robinson PC, Terkeltaub R, Pillinger MH, et al. Consensus statement regarding the efficacy and safety of long-term low-dose colchicine in gout and cardiovascular disease. *Am J Med.* 2022;135(1):32-38. doi: 10.1016/j.amjmed.2021.07.025 Epub 2021 Aug 18. 3. Data on file. SCILEX Pharmaceuticals; March 2024. 4. FitzGerald JD, Dalbeth N, Mikuls T, et al. 2020 American College of Rheumatology guideline for the management of gout. *Arthritis Care Res (Hoboken).* 2020;72(6):744-760. doi: 10.1002/acr.24180 Epub 2020 May 11. 5. Borstad GC, Bryant LR, Abel MP, Scroggie DA, Harris MD, Alloway JA. Colchicine for prophylaxis of acute flares when initiating allopurinol for chronic gouty arthritis. *J Rheumatol.* 2004;31(12):2429-2432