Precedex™
dexmedetomidine HCl injection

WHEN CHOOSING A SEDATIVE, TAKE A CLOSER LOOK.

Precedex has a different mechanism of action.[1, 2-9]

The first and only alpha$_2$ agonist indicated for sedation.[1,9]

Precedex exerts sympatholytic effects.[1,10]

Reduces the sympathetic stress response.[1,10]

May be used in conjunction with vasopressors.[1]

Precedex maintains respiratory stability.[1,11-13]

Maintains consistent respiratory rates and oxygen saturation before, during and after extubation without discontinuing the sedative.[11,13]

Does not have to be discontinued prior to extubation.[1]

Patients may be arousable from a sedative state when stimulated.[1,14,15]

May be able to interact with clinicians and complete cognitive and pulmonary function assessments.[1,14,15]

Precedex reduces the need for opioids while maintaining patient comfort.[1,11,16,17]

In a randomized, open-label, multicenter trial of 295 adults undergoing CABG surgery, the mean dose of morphine needed for adequate postoperative analgesia was 4 times less in patients sedated with Precedex than in patients sedated with propofol.[11]

Only 28% of patients receiving Precedex-based sedation required morphine for postoperative pain compared to 63% of patients receiving propofol-based sedation.[11]

See more at precedex.com

Important Precedex Safety Information

Clinically significant episodes of bradycardia, sinus arrest and hypotension have been associated with Precedex infusion and may necessitate medical intervention.

Some patients receiving Precedex have been observed to be arousable and alert when stimulated. This alone should not be considered as evidence of lack of efficacy in the absence of other clinical signs and symptoms.

Please see more complete description of these and other Warnings and Precautions on the next page and within the complete prescribing information.

Prescribing Information on the adjacent page.

1. Precedex [package insert]. Lake Forest, IL: Hospira, Inc; 2013. **2.** Richards G, Schock P, Haefely W. Benzodiazepine receptors: new vistas. *Sem Neurosci.* 1991;3(3):191-203. **3.** Vanlersberghe C, Camu F. Propofol. In: Schuttler J, Schwilden H, eds. *Modern Anesthetics: Handbook of Experimental Pharmacology 182.* Berlin, Germany: Springer-Verlag; 2008:227-252 **4.** Reves JG, Glass PSA, Lubarsky DA, et al. Intravenous nonopioid anesthetics. In: Miller RD, ed. *Miller's Anesthesia.* 6th ed. Philadelphia, PA: Elsevier Churchill Livingstone; 2005:317-378. **5.** Aantaa R. Assessment of the sedative effects of dexmedetomidine an α_2-adrenergic agonist, with analysis of saccadic eye movements. *Pharmacol Toxicol.* 1991;68:394-398. **6.** Duke P, Maze M, Morrison P. Dexmedetomidine: a general overview. In: Maze M, Morrison P, eds. *International Congress and Symposium Series—Redefining Sedation.* London, England: Royal Society of Medicine Press Limited; 1998:11-22. **7.** Hayashi Y, Maze M. Alpha$_2$ adrenoceptor agonists and anaesthesia. *Br J Anaesth.* 1993;71(1):108-118. **8.** Maze M, Bonnet F. Analgesics: receptor ligands—α_2-adrenergic agonists. In: *Anesthetic Pharmacology: Physiologic Principles and Clinical Practice. A Companion to Miller's Anesthesia.* Philadelphia, PA: Churchill Livingstone: 2004:473-490. **9.** Langer SZ. Presynaptic regulation of the release of catecholamines. *Pharmacol Rev.* 1981;32(4):337-362. **10.** Talke P, Richardson CA, Scheinin M, et al. Postoperative pharmacokinetics and sympatholytic effects of dexmedetomidine. *Anesth Analg.* 1997;85(5):1136-1142. **11.** Herr DL, Sum-Ping STJ, England M. ICU sedation after coronary bypass graft surgery: dexmedetomidine-based versus propofol-based sedation regimens. *J Cardiothorac Vasc Anesth.* 2003:17(5):576-584. **12.** Venn RM, Hell J, Grounds RM. Respiratory effects of dexmedetomidine in surgical patient requiring intensive care. *Crit Care.* 2000;4(5):302-308. **13.** Data on file. Hospira, Inc. Protocol W99-302 **14.** Hall JE, Uhrich TD, Barney JA, et al. Sedative, amnestic, and analgesic properties of small-dose dexmedetomidine infusions. *Anesth Analg.* 2000;90(3):699-705. **15.** Data on file. Hospira, Inc. Protocol DEX-97-028 **16.** Martin E, Ramsay G, Mantz J, et al. The role of the α_2-andrenoceptor agonist dexmedetomidine in postsurgical sedation in the intensive care unit. *J Intensive Care Med.* 2003;18(1):29-41. **17.** Candiotti KA, Bergese SD, Bokesch PM, et al. Monitored anesthesia care with dexmedetomidine: a prospective, randomized, double-blind, multicenter trial. *Anesth Analg.* 2010;110(1):47-56.

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