Bayer HealthCare
Pharmaceuticals

Dear Health Care Professional,

After careful consideration, Bayer HealthCare Pharmaceuticals will discontinue marketing Nimotop® (nimodipine) capsules – unit dose 30's NDC 00026-2855-48 and unit dose 100's NDC 00026-2855-70 – for subarachnoid hemorrhage (SAH) in the United States. The company made this decision based on the availability of generic treatment alternatives and diminished market demand for the Nimotop brand in the U.S. The decision to discontinue the marketing of Nimotop is not the result of safety or efficacy issues.

Based on product expiration dates, we will fulfill Nimotop orders to wholesalers until the end of October. Generic nimodipine is available, and we encourage you to discuss treatment alternatives with your patients.

For those patients who may be receiving Nimotop through Bayer's Patient Assistance Program (PAP), we are committed to supporting the program through the end of 2008. Please contact the PAP program at **(866) 575-5002** if you have any questions specific to the Patient Assistance Program.

On behalf of Bayer HealthCare, I regret any inconvenience this business decision may have on your practice, and we very much appreciate your support for Nimotop and the patients we have had the honor of serving over the years. Should you have any questions, please call Bayer Customer Service **(877) 229-3750** or Bayer Medical Communications **(888) 842-2937 (option 3, option 7)**.

Sincerely,

Pamela Cyrus, MD
Vice President, U.S. Medical Affairs
Bayer HealthCare Pharmaceuticals

About Nimotop®

Nimotop® (nimodipine) was approved by the FDA on December 22, 1988. It is indicated for the improvement of neurological outcome by reducing the incidence and severity of ischemic deficits in patients with subarachnoid hemorrhage from ruptured intracranial berry aneurysms regardless of their post-ictus neurological condition (ie, Hunt and Hess Grades I-V).

- In patients with SAH, Nimotop® controls damage with a low side effect profile.
- Decreased blood pressure is the most common side effect, occurring in 4.4% of patients. Blood pressure should be monitored during therapy.[1]
- Other side effects occurring at a low frequency of ≥1.0% include headache, nausea and bradycardia.[1]
- No clinically significant effects on hematologic factors, renal or hepatic function, or carbohydrate metabolism have been causally associated with oral nimodipine.[1]
- Nimotop® does not appear to affect anesthetic management.[2]

[1] *Nimotop® (nimodipine) Capsules Prescribing Information September 2007*

[2] *Stullken EH, Johnston WE, Prough DS. Implications of nimodipine prophylaxis of cerebral vasospasm on anesthetic management during intracranial aneurysm clipping. J. Neurosurg. 1985; 62:200-205.*

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