Easy to use with reliable dosing

 For your patients' convenience, once-daily Divigel® is supplied in individual-use foil packets for consistent dosing¹

Perforated packets for convenient, easy opening



The travel compact conveniently stores up to 14 foil packets



 All strengths of Divigel® can be discreetly applied to an approximate 5 x 7 inch area of the upper thigh¹





 Smaller volume of gel applied to a smaller application area (200 cm²) than any other gel or lotion estrogen product available¹

Divigel (estradiol gel) 0.1% (estradiol gel) 0.1% Relief to the right degree

Please refer to accompanying full Prescribing Information, including black box and other warnings.

Delivers comfort with discretion

- Divigel® (estradiol gel) 0.1% offers a cool, soothing application that is invisible and odorless when dry¹
- Skin friendly—less than 1% of patients treated with Divigel® experienced application site reactions¹
- Quick drying, so there is little waiting time to dress and no sticky residue left behind¹
- ♦ Little risk of transfer to others¹



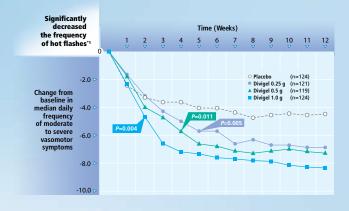
Relief to the right degree

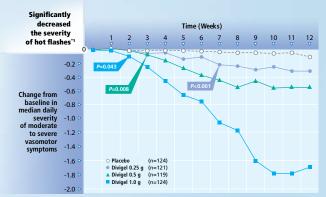
For more information visit www.divigelus.com

Please refer to accompanying full Prescribing Information, including black box and other warnings.

Clinical confidence to treat bothersome symptoms

Divigel® was approved based on a 12-week, randomized, double-blind, placebo-controlled study of 495 postmenopausal women (34-89 years of age) who were assigned in a 1:1:1:1 ratio to receive 0.25 g, 0.5 g, or 1.0 g of Divigel® or placebo gel daily.1





*Statistically significant differences were maintained for all doses through the duration of treatment (12 weeks)

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- 1. Divigel [package insert]. Minneapolis, MN: Upsher-Smith Laboratories, Inc; 2007.
- 2. Estrasorb [package insert]. East Brunswick, NJ: Esprit Pharma, Inc; 2007.
- 3. EstroGel [package insert]. Herndon, VA: Ascend Therapeutics, Inc; 2006.
- 4. Elestrin [package insert]. Lincolnshire, IL: BioSante Pharmaceuticals, Inc; 2007.
- 5. Data on file, Upsher-Smith Laboratories, Inc.
- The North American Menopause Society. Early Menopause Guidebook. 6th ed. Cleveland, OH: The North American Menopause Society; 2006. http://www.menopause.org/edumaterials/earlyguidebook. Accessed June 11, 2007.

Important Safety Information

Estrogens should not be used in women with undiagnosed abnormal vaginal bleeding; known, suspected, or history of breast cancer; known or suspected estrogen-dependent neoplasia; active or history of deep vein thrombosis (DVT) or pulmonary embolism; active or recent arterial thromboembolic disease; liver dysfunction or disease; known hypersensitivity to Divigel® ingredients; or known or suspected pregnancy.

Estrogens increase the risk of endometrial cancer. Close clinical surveillance of all women taking estrogens is important. Adequate diagnostic measures, including endometrial sampling when indicated, should be undertaken to rule out malignancy in all cases of abnormal vaginal bleeding. There is no evidence that the use of "natural" estrogens results in a different endometrial risk profile than synthetic estrogens at equivalent doses. Long-term continuous administration of estrogen, with or without progestin, has also shown increased risk of breast and ovarian cancers.

Cardiovascular and other risks. Estrogens with or without progestins should not be used for the prevention of cardiovascular disease or dementia.

The Women's Health Initiative (WHI) studies reported increased risks of stroke and DVT in certain postmenopausal women with daily oral conjugated estrogens (CE) alone, relative to placebo, and increased risks of myocardial infarction, stroke, invasive breast cancer, pulmonary emboli, and DVT in postmenopausal women with daily oral CE and medroxyprogesterone acetate (MPA), relative to placebo.

The WHI Memory Study (WHIMS) reported increased risk of developing probable dementia in certain postmenopausal women 65 or older with daily oral CE alone and with daily oral CE and MPA, relative to placebo. It is unknown whether this finding applies to younger postmenopausal women.

These risks should be assumed to be similar for other combinations and dosage forms of estrogens and progestins.

The less common but serious risks reported with estrogen therapy include certain cardiovascular disorders, certain malignant neoplasms, dementia, gallbladder disease, hypercalcemia and visual abnormalities.

The most frequently reported adverse events in Divigel® clinical trials were nasopharyngitis, upper respiratory tract infection, vaginal mycosis, breast tenderness and metrorrhagia.

Estrogens with or without progestins should be prescribed at the lowest effective doses and for the shortest duration consistent with treatment goals and risks for the individual woman.

This safety information is not all inclusive. Please see accompanying full Prescribing Information, including black box and other warnings.

Estrasorb® is a registered trademark of Novavax, Inc.

EstroGel® is a registered trademark of Ascend Therapeutics, Inc.

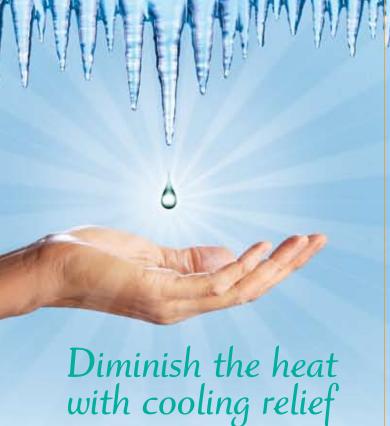
Elestrin™ is a trademark of BioSante Pharmaceuticals, Inc.



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New DIVISEL (estradiol gel) 0.1% 0.25 mg 0.5 mg 1 mg

Divigel® offers an estrogen gel with multiple dosage strengths—including the lowest approved dose of estradiol available—so treatment of vasomotor symptoms can be safely and effectively tailored to meet each patient's needs.

Relief to the right degree

Divigel® is indicated for the treatment of moderate to severe vasomotor symptoms associated with menopause.1

Offers the lowest approved dose

Divigel® 0.25 g/day (0.25 mg estradiol) is the lowest approved dose of any other gel or lotion estrogen product available.¹⁻⁴

- Delivers plant-based 17β-estradiol that is identical to endogenous estradiol¹
- Unlike oral therapies, Divigel® bypasses liver metabolism¹
- Delivers sustained circulating concentrations of estradiol—median serum estradiol concentrations were stable over time^{1,5}

Dosing flexibility for individualized treatment

- Patients should be treated with the lowest effective dose of Divigel®— generally, 0.25 g Divigel® daily¹
- Subsequent dosage adjustments may be made based upon individual patient response¹
- Dosing should be periodically reassessed¹

	Divigel®1	Estrasorb®2	EstroGel®3	Elestrin™ ⁴
Amount of product applied per dose	1) 0.25 g 2) 0.5 g 3) 1.0 g	3.48 g (two pouches)	1.25 g (one pump)	1) 0.87 g (one pump) 2) 1.7 g (two pumps)
Estradiol per dose (estradiol/day)	1) 0.25 mg 2) 0.5 mg 3) 1.0 mg	8.7 mg	0.75 mg	1) 0.52 mg 2) 1.04 mg
Application area	200 cm²	Not specifically defined	750 cm ²	~320 cm²

For the treatment of hot flashes with estrogen therapy,
"...women should use the lowest effective dose
for the shortest time necessary...."

—The North American Menopause Society