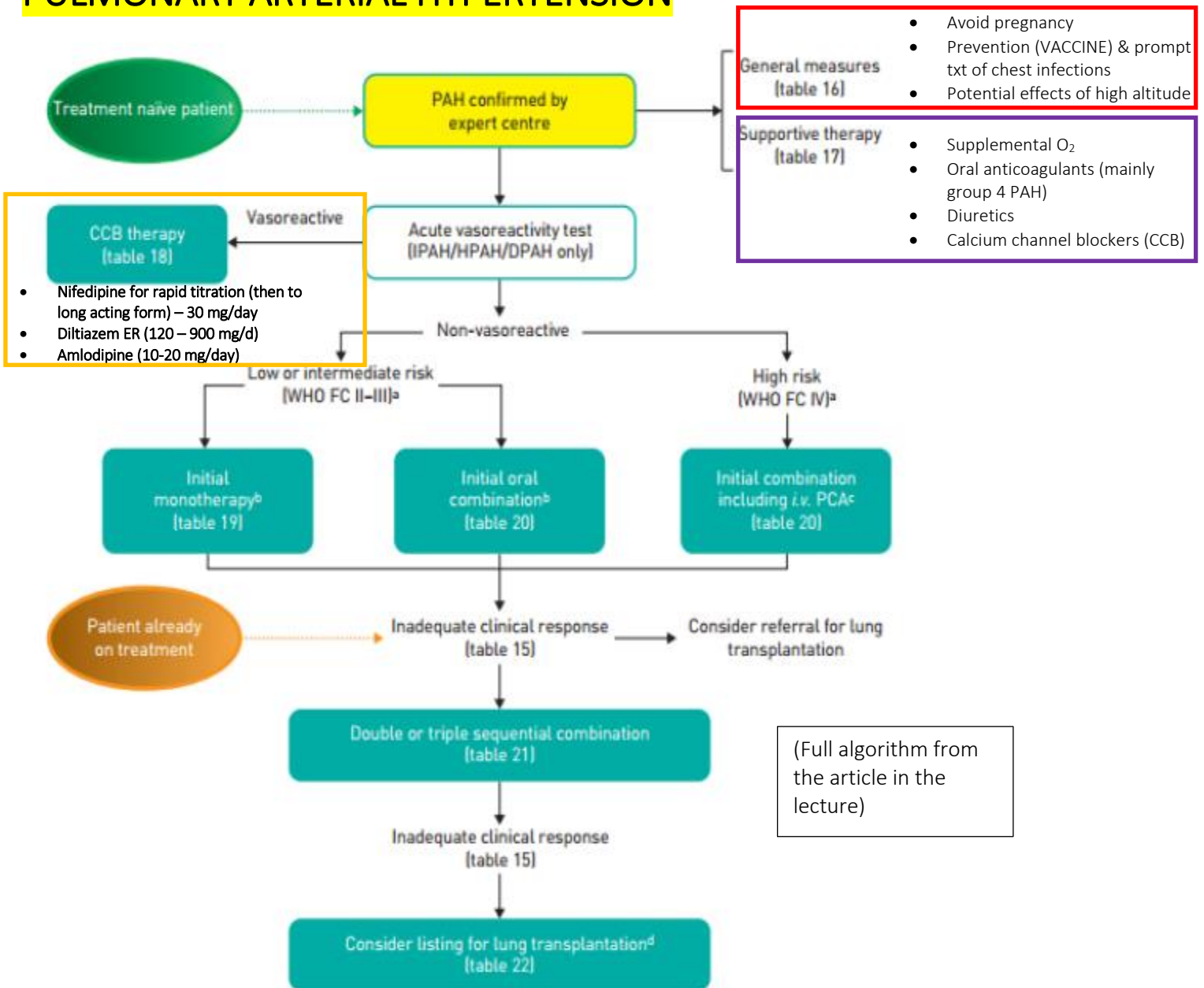


PULMONARY ARTERIAL HYPERTENSION



| Therapy | MOA | Drugs |
|--|--|--|
| Endothelial receptor antagonists (ERAs) | Blocks binding of ET to one (single antagonist) or both (dual antagonist) of its receptors | <ul style="list-style-type: none"> • Bosentan (oral) • Ambrisentan (oral) • Macitentan (oral) |
| Nitric Oxide | Cyclic guanosine monophosphate enhancer | PDE-5 inhibitors: <ul style="list-style-type: none"> • Sildenafil (oral & IV) • Tadalafil (oral) |
| | | Soluble guanylate cyclase stimulant <ul style="list-style-type: none"> • Riociguat (oral) |
| Synthetic prostacyclins and prostacyclin analogues | Help correct the deficiency of endogenous prostacyclin seen in pts with PAH | <ul style="list-style-type: none"> • Epoprostenol (IV) • Treprostinil (IV, SC) • Selexipag (oral) |