



Heron Therapeutics Announces Inclusion of APONVIE® (aprepitant) Injectable Emulsion in the Newly Released Fifth Consensus Guidelines for the Management of Postoperative Nausea and Vomiting (PONV)

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- APONVIE, an aprepitant product, highlighted as the only FDA-approved IV formulation Neurokinin-1 (“NK-1”) antagonist indicated for the prevention of PONV in adults, with a long half-life and quicker onset than oral aprepitant
 - Aprepitant alone, or added to a multimodal regimen, recognized as significantly reducing the risk of PONV, and aprepitant monotherapies are noted as more effective compared to 5-HT3 receptor antagonists for postoperative vomiting prevention
- Post-discharge nausea and vomiting (PDNV) recognized as a significant risk to discharged postoperative patients and the role of long-acting antiemetic strategies highlighted as extending protection beyond the recovery room and into the home setting

CARY, N.C., Dec. 04, 2025 (GLOBE NEWSWIRE) -- Heron Therapeutics, Inc. (Nasdaq: HRTX) (“Heron” or the “Company”), a commercial-stage biotechnology company, today announced the inclusion of APONVIE® (aprepitant) injectable emulsion in the newly released Fifth Consensus Guidelines for the Management of Postoperative Nausea and Vomiting: [Executive Summary](#) and [Full Report](#) as published in Anesthesia and Analgesia (collectively, the “PONV Guidelines”).

PONV impacts about 30% of postoperative patients in the general surgical population and up to 80% of high-risk patients¹ and is a major cause of patient dissatisfaction after surgery, with patients ranking vomiting as the most undesirable outcome when asked about postsurgical complications.²

The PONV Guidelines name APONVIE as an NK-1 receptor antagonist option for the prevention of PONV in adults and note APONVIE’s long half-life and 30-second IV administration, which provides for quicker onset than oral formulations and a long-acting profile. The PONV Guidelines also provide evidence that aprepitant alone or in combination therapies significantly reduced the risk of PONV and that aprepitant is comparable or superior to ondansetron for PONV prophylaxis. The PONV Guidelines also cite evidence for aprepitant’s significant impact on postoperative vomiting.

“The release of the PONV Guidelines comes at a defining moment for surgical care. More procedures than ever are being performed in outpatient and short-stay settings, and patients are going home within hours of anesthesia. Preventing PONV is not just a comfort measure, it is critical to ensuring a safe and satisfying recovery for patients,” said Craig Collard, Chief Executive Officer of Heron. “We see substantial opportunity for APONVIE to help reduce avoidable postoperative complications, enhance patient and caregiver confidence at home, and support clinicians in delivering a smooth and reliable postoperative recovery experience.”

The PONV Guidelines continue to recommend and reinforce an algorithmic approach to risk assessment, mitigation, multimodal PONV prophylaxis, and rescue treatment as most adult patients undergoing surgery and anesthesia will have at least one risk factor for PONV. For patients at high risk of PONV (e.g., having three or more PONV risk factors), the PONV Guidelines recommended a multimodal approach to prophylaxis with three or more agents. The PONV Guidelines also discussed risk factors for PDNV and recommended prophylactic, long acting antiemetics before discharge for patients at risk of PDNV.

“Importantly, the PONV Guidelines bring renewed attention to the burden that nausea and vomiting place on patients after they leave the hospital,” said Kevin Warner, PharmD, Senior Vice President, Medical Affairs Strategy and Engagement of Heron. “By helping clinicians identify who remains at risk and encouraging the use of long-acting antiemetic options before discharge, the recommendations within the PONV Guidelines give us another chance to protect patients when they are back at home, where support may be more limited. Consistent awareness of the PONV Guidelines and disciplined adherence to its recommendations are essential if we want to translate this progress into safer recoveries, fewer complications, and better overall experiences for patients and their families.”

About APONVIE® for Prevention of Postoperative Nausea and Vomiting (“PONV”) Prevention

APONVIE is a substance P/neurokinin 1 (NK-1) Receptor Antagonist (RA), indicated for the prevention of postoperative nausea and vomiting (PONV) in adults. Delivered via a 30-second IV push, APONVIE 32 mg was demonstrated to be bioequivalent to oral aprepitant 40 mg with rapid achievement of therapeutic drug levels. APONVIE is the same formulation as Heron’s approved drug product CINVANTI. APONVIE is supplied in a single-dose vial that delivers the full 32 mg dose for prevention of PONV. APONVIE was approved by the FDA in September 2022 and became commercially available in the U.S. on March 6, 2023.

Please see full prescribing information at www.APONVIE.com.

About Heron Therapeutics, Inc.

Heron Therapeutics, Inc. is a commercial-stage biotechnology company focused on improving the lives of patients by developing and commercializing therapeutic innovations that improve medical care. Our advanced science, patented technologies, and innovative approach to drug discovery and development have allowed us to create and commercialize a portfolio of products that aim to advance the standard-of-care for acute care and oncology patients. For more information, visit www.herontx.com.

Forward-Looking Statements

This news release contains "forward-looking statements" as defined by the Private Securities Litigation Reform Act of 1995. All statements contained in this news release other than statements of historical facts, including statements regarding our future results of operations and financial position, business and commercialization strategy as well as plans and objectives of management for future operations, are forward-looking statements. Heron cautions readers that forward-looking statements are based on management's expectations and assumptions as of the date of this news release and are subject to certain risks and uncertainties that could cause actual results to differ materially. Therefore, you should not place undue reliance on forward-looking statements. Examples of forward-looking statements include, among others, statements we make regarding the potential market opportunities for APONVIE. Important factors that could cause actual results to differ materially from those in the forward-looking statements are set forth in our most recent Annual Report on Form 10-K and any subsequent Quarterly Reports on Form 10-Q, and in our other reports filed with the Securities and Exchange Commission, including under the caption "Risk Factors." Forward-looking statements reflect our analysis only on their stated date, and Heron takes no obligation to update or revise these statements except as may be required by law.

References:

1. Gan TJ, Belani KG, Bergese S, et al. Fourth consensus guidelines for the management of postoperative nausea and vomiting. *Anesth Analg*. 2020;131(2):411-448. doi:10.1213/ane.0000000000004833.
2. Macario A, Weinger M, Carney S, Kim A. Which clinical anesthesia outcomes are important to avoid? The perspective of patients. *Anesth Analg*. 1999;89(3):652-658. doi:10.1097/00000539-199909000-00022.

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