AVAILABLE FOR ORDER

IN A PRE-FILLED SYRINGE (PFS): THE POWER OF EYLEA

NDC 61755-005-01

AS DEMONSTRATED IN PHASE 3 CLINICAL TRIALS[1]

EYLEA First-Line Offers Dosing Flexibility Across Several FDA-Approved Indications[1]

EYLEA 2 mg (0.05 mL) Dosing Schedule[1]

	Initial Dosing	Follow-Up Dosing Options
Wet AMD	2 mg every 4 weeks × 3 injections	2 mg every 8 weeks
		2 mg every 4 weeks
	After one year of effective therapy: 2 mg every 12 weeks	

For Wet AMD, although EYLEA may be dosed as frequently as 2 mg every 4 weeks (≈ every 25 days, monthly), additional efficacy was not demonstrated in most patients when EYLEA was dosed every 4 weeks compared to every 8 weeks. Some patients may need every-4-week (monthly) dosing after the first 12 weeks (3 months).

Although not as effective as the recommended every-8-week dosing regimen, patients may also be treated with one dose every 12 weeks after one year of effective therapy. Patients should be assessed regularly.

AMD = Age-related Macular Degeneration.

	Initial Dosing	Follow-Up Dosing Options
DME	2 mg every 4 weeks × 5 injections	2 mg every 8 weeks
		2 mg every 4 weeks
DR	2 mg every 4 weeks × 5 injections	2 mg every 8 weeks
		2 mg every 4 weeks

For DME and DR, although EYLEA may be dosed as frequently as 2 mg every 4 weeks (≈ every 25 days, monthly), additional efficacy was not demonstrated in most patients when EYLEA was dosed every 4 weeks compared to every 8 weeks. Some patients may need every-4-week (monthly) dosing after the first 20 weeks (5 months).

DME = Diabetic Macular Edema; DR = Diabetic Retinopathy.

	Dosing
Macular Edema following RVO	2 mg every 4 weeks

RVO = Retinal Vein Occlusion (includes Macular Edema following Branch Retinal Vein Occlusion [BRVO] and Macular Edema following Central Retinal Vein Occlusion [CRVO]).

IMPORTANT SAFETY INFORMATION

CONTRAINDICATIONS

EYLEA is contraindicated in patients with ocular or periocular infections, active intraocular inflammation, or known hypersensitivity to aflibercept or to any of the excipients in EYLEA.

Please see additional Important Safety Information throughout and full Prescribing Information.

EYLEA®
(aflibercept) Injection
For Intravitreal Injection

Make EYLEA Your First-Line Treatment **Across All Approved Indications**

START WITH THE POWER OF FLEXIBLE DOSING

AS DEMONSTRATED IN PHASE 3 CLINICAL TRIALS IN WET AMD, DME, AND DR[1]

IMPORTANT SAFETY INFORMATION AND INDICATIONS (cont'd)

WARNINGS AND PRECAUTIONS

- Intravitreal injections, including those with EYLEA, have been associated with endophthalmitis and retinal detachments. Proper aseptic injection technique must always be used when administering EYLEA. Patients should be instructed to report any symptoms suggestive of endophthalmitis or retinal detachment without delay and should be managed appropriately. Intraocular inflammation has been reported with the use of EYLEA.
- Acute increases in intraocular pressure have been seen within 60 minutes of intravitreal injection, including with EYLEA. Sustained increases in intraocular pressure have also been reported after repeated intravitreal dosing with VEGF inhibitors. Intraocular pressure and the perfusion of the optic nerve head should be monitored and managed appropriately.
- There is a potential risk of arterial thromboembolic events (ATEs) following intravitreal use of VEGF inhibitors, including EYLEA. ATEs are defined as nonfatal stroke, nonfatal myocardial infarction, or vascular death (including deaths of unknown cause). The incidence of reported thromboembolic events in wet AMD studies during the first year was 1.8% (32 out of 1824) in the combined group of patients treated with EYLEA compared with 1.5% (9 out of 595) in patients treated with ranibizumab; through 96 weeks, the incidence was 3.3% (60 out of 1824) in the EYLEA group compared with 3.2% (19 out of 595) in the ranibizumab group. The incidence in the DME studies from baseline to week 52 was 3.3% (19 out of 578) in the combined group of patients treated with EYLEA compared with 2.8% (8 out of 287) in the control group; from baseline to week 100, the incidence was 6.4% (37 out of 578) in the combined group of patients treated with EYLEA compared with 4.2% (12 out of 287) in the control group. There were no reported thromboembolic events in the patients treated with EYLEA in the first six months of the RVO studies.

ADVERSE REACTIONS

- Serious adverse reactions related to the injection procedure have occurred in <0.1% of intravitreal injections with EYLEA including endophthalmitis and retinal detachment.
- The most common adverse reactions (≥5%) reported in patients receiving EYLEA were conjunctival hemorrhage, eye pain, cataract, vitreous detachment, vitreous floaters, and intraocular pressure increased.

INDICATIONS

EYLEA® (aflibercept) Injection 2 mg (0.05 mL) is indicated for the treatment of patients with Neovascular (Wet) Age-related Macular Degeneration (AMD), Macular Edema following Retinal Vein Occlusion (RVO), Diabetic Macular Edema (DME), and Diabetic Retinopathy (DR).

Please click for full Prescribing Information.

Reference: 1. EYLEA® (aflibercept) Injection full U.S. Prescribing Information. Regeneron Pharmaceuticals, Inc. August 2019.

EYLEA®
(aflibercept) Injection
For Intravitreal Injection

REGENERON

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