INDICATIONS

Atopic Dermatitis: DUPIXENT is indicated for the treatment of patients aged 6 years and older with moderate-to-severe atopic dermatitis whose disease is not adequately controlled with topical prescription therapies or when those therapies are not advisable. DUPIXENT can be used with or without topical corticosteroids.

Asthma: DUPIXENT is indicated as an add-on maintenance treatment of patients aged 6 years and older with moderate-to-severe asthma characterized by an eosinophilic phenotype or with oral corticosteroid dependent asthma. Limitation of Use: DUPIXENT is not indicated for the relief of acute bronchospasm or status asthmaticus.

Chronic rhinosinusitis with nasal polyposis (CRSwNP): DUPIXENT is indicated as an add-on maintenance treatment in adult patients with inadequately controlled CRSwNP.

IMPORTANT SAFETY INFORMATION

CONTRAINDICATION: DUPIXENT is contraindicated in patients with known hypersensitivity to dupilumab or any of its excipients.

Please see additional Important Safety Information below.

Please join us for the discussion:

Type 2 Inflammation in Asthma, Chronic Rhinosinusitis With Nasal Polyposis (CRSwNP), and Atopic Dermatitis

PROGRAM AGENDA

5/4/2022
8:00 PM Eastern

VIRTUAL MEETING INFORMATION

Click on the link to register and join this virtual event.

URL: https://rb.gy/p8hl68

PRESENTED BY

Nicole Chase, MD
Saint Paul Allergy and Asthma

HOSTED BY

Gregory Kristyniak
gregory.kristyniak@regeneron.com
570-445-6795
RGN0020080

You may RSVP to your program host.

IMPORTANT SAFETY INFORMATION, CONTINUED

WARNINGS AND PRECAUTIONS

Hypersensitivity: Hypersensitivity reactions, including generalized urticaria, rash, erythema nodosum, erythema multiforme, anaphylaxis, and serum sickness or serum sickness-like reactions, were reported in <1% of subjects who received DUPIXENT in clinical trials. If a clinically significant hypersensitivity reaction occurs, institute appropriate therapy and discontinue DUPIXENT.

Conjunctivitis and Keratitis: Conjunctivitis and keratitis occurred more frequently in atopic dermatitis subjects who received DUPIXENT with conjunctivitis being the most frequently reported eye disorder in these patients. Conjunctivitis also occurred more frequently in chronic rhinosinusitis with nasal polyposis subjects who received DUPIXENT. Advise patients to report new onset or worsening eye symptoms to their healthcare provider.

Eosinophilic Conditions: Patients being treated for asthma may present with serious systemic eosinophilia sometimes presenting with clinical features of eosinophilic pneumonia or vasculitis consistent with eosinophilic granulomatosis with polyangiitis (EGPA), conditions which are often treated with systemic corticosteroid therapy. These events may be associated with the reduction of oral corticosteroid therapy. Physicians should be alert to vasculitic rash, worsening pulmonary symptoms, cardiac complications, and/or neuropathy presenting in their patients with eosinophilia. Cases of eosinophilic pneumonia were reported in adult patients who participated in the asthma development program and cases of vasculitis consistent with EGPA have been reported with DUPIXENT in adult patients who participated in the asthma development program as well as in adult patients with co-morbid asthma in the CRSwNP development program. A causal association between DUPIXENT and these conditions has not been established.

Acute Asthma Symptoms or Deteriorating Disease: Do not use DUPIXENT to treat acute asthma symptoms, acute exacerbations, acute bronchospasm or status asthmaticus. Patients should seek medical advice if their asthma remains uncontrolled or worsens after initiation of DUPIXENT.

Risk Associated with Abrupt Reduction of Corticosteroid Dosage: Do not discontinue systemic, topical, or inhaled corticosteroids abruptly upon initiation with DUPIXENT. Reductions in corticosteroid dose, if appropriate, should be gradual and performed under the direct supervision of a physician. Reduction in corticosteroid dose may be associated with systemic withdrawal symptoms and/or unmask conditions previously suppressed by systemic corticosteroid therapy.

Please see additional Important Safety Information on the following page.

11/2021 DUP.21.09.0030

DUPIXENT® (dupilumab) Injection
100mg · 200mg · 300mg

Type 2 Inflammation in Asthma, Chronic Rhinosinusitis With Nasal Polyposis (CRSwNP), and Atopic Dermatitis

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IMPORTANT SAFETY INFORMATION, CONTINUED

WARNINGS AND PRECAUTIONS, CONTINUED

Patients with Co-Morbid Asthma: Advise patients with atopic dermatitis or CRSwNP who have co-morbid asthma not to adjust or stop their asthma treatments without consultation with their physicians.

Parasitic (Helminth) Infections: It is unknown if DUPIXENT will influence the immune response against helminth infections. Treat patients with pre-existing helminth infections before initiating therapy with DUPIXENT. If patients become infected while receiving treatment with DUPIXENT and do not respond to anti-helminth treatment, discontinue treatment with DUPIXENT until the infection resolves. Helminth infections (5 cases of enterobiasis and 1 case of ascariasis) were reported in pediatric patients 6 to 11 years old in the pediatric asthma development program.

ADVERSE REACTIONS:

- **Atopic dermatitis:** The most common adverse reactions (incidence ≥1% at Week 16) in adult patients are injection site reactions, conjunctivitis, blepharitis, oral herpes, keratitis, eye pruritus, other herpes simplex virus infection, and dry eye. The safety profile in children and adolescents through Week 16 was similar to that of adults with atopic dermatitis. In an open-label extension study, the long-term safety profile of DUPIXENT in adolescents and children observed through Week 52 was consistent with that seen in adults with atopic dermatitis.
- **Asthma:** The most common adverse reactions (incidence ≥1%) are injection site reactions, oropharyngeal pain, and eosinophilia.
- **Chronic rhinosinusitis with nasal polyposis:** The most common adverse reactions (incidence ≥1%) are injection site reactions, eosinophilia, insomnia, toothache, gastritis, arthralgia, and conjunctivitis.

DRUG INTERACTIONS:
Avoid use of live vaccines in patients treated with DUPIXENT.

USE IN SPECIFIC POPULATIONS

- **Pregnancy:** A pregnancy exposure registry monitors pregnancy outcomes in women exposed to DUPIXENT during pregnancy. To enroll or obtain information call 1-877-311-8972 or go to https://mothertobaby.org/ongoing-study/dupixent/. Available data from case reports and case series with DUPIXENT use in pregnant women have not identified a drug-associated risk of major birth defects, miscarriage or adverse maternal or fetal outcomes. Human IgG antibodies are known to cross the placental barrier; therefore, DUPIXENT may be transmitted from the mother to the developing fetus.
- **Lactation:** There are no data on the presence of DUPIXENT in human milk, the effects on the breastfed infant, or the effects on milk production. Maternal IgG is known to be present in human milk. The developmental and health benefits of breastfeeding should be considered along with the mother's clinical need for DUPIXENT and any potential adverse effects on the breastfed child from DUPIXENT or from the underlying maternal condition.

Please see accompanying full Prescribing Information.

In accordance with the PhRMA Code on Interactions with Healthcare Professionals, this Program is limited to U.S. Healthcare Professionals and persons with bona fide professional interest in the information presented. Attendance at this Program by guests or spouses is not permitted, unless they would qualify as an appropriate attendee on their own. Actively licensed Minnesota and Vermont prescribers may attend, but not partake in the meal. Full-time Federal Employees may attend and partake in the meal if the Program is considered widely attended (50 or more attendees). If not, they may attend, but not partake in the meal. Part-time Federal Employees acting in their civilian capacity may attend the Program and partake in the meal.

The value of any meal provided in connection with the Program may be reported in accordance with federal and state laws and regulations.

SANOFI GENZYME REGENERON

11/2021 DUP.21.09.0030

DUPIXENT® (dupilumab) Injection
100mg · 200mg · 300mg

SPEAKER PROGRAM EXPECTATIONS – COVID-19

Regeneron Pharmaceuticals, Inc., and your local Regeneron Representative look forward to your attendance at the upcoming Speaker Program. Regeneron is committed to the health and safety of our employees, our valued healthcare professional customers, and their patients. As such, we observe all national, state and local guidelines for COVID-19.

Out of an abundance of caution, we ask that you not attend a Speaker Program in-person if any of the following apply:

- You are experiencing symptoms consistent with COVID-19. For the most up to date information and full list of COVID-19 symptoms, please visit the CDC website at https://www.cdc.gov/coronavirus/2019-ncov/index.html
- You are living with someone who tested positive for COVID-19 in the past 14 days, experienced symptoms of COVID-19, or is under self-quarantine due to COVID-19.
- You have traveled by air or live with someone who has returned from international travel within the past 14 days.

Additionally, please notify your Regeneron Representative if you test positive within 14 days after attending the Speaker Program.

Thank you