Understanding Blue Light Cystoscopy with Cysview® for Detection of Bladder Cancer¹

A Patient Guide

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This patient guide is for informational purposes only; it does not replace a conversation with your urologist or other urology healthcare professional.

Cysview can only be used by qualified healthcare professionals.

Please see Full Prescribing Information enclosed.



What is a cystoscopy?

A cystoscopy is a procedure that your urology healthcare professional may use to examine your bladder to help find the cause of symptoms, or to treat or monitor conditions. This procedure allows your healthcare professional (HCP) to look directly inside your bladder and inspect the lining very closely.

If during a cystoscopy any abnormal growths or suspicious areas are seen, your HCP may remove tissue samples (biopsy) and send them to the lab.

A cystoscopy can be done while you are asleep under anesthesia or while you are awake with moderate sedation and/or pain management. Be sure to follow your healthcare professional's instructions about whether you should fast before your procedure and how you should handle any medications you take.

What is a cystoscope?

A cystoscope is a thin, tube-like telescope that is carefully passed up the urethra (the tube through which urine leaves your body) and into the bladder. The cystoscope is a hollow tube that creates a path for surgical instruments to pass through for use in a cystoscopy.

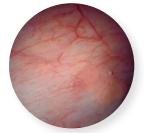


A standard cystoscopy uses white light

During a cystoscopy procedure, the cystoscope shines light inside the bladder to aid in visibility. In a standard procedure, the light is regular white

light—the type we all use every day to light a room.

White light helps your healthcare professional visually assess the general health of your bladder and find irregularities to be further evaluated.



Bladder image under white light

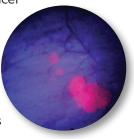
A cystoscopy can also use blue light with Cysview®

Your healthcare professional also has the option of enhancing a cystoscopy by adding blue light and Cysview to the procedure. Called Blue Light Cystoscopy (BLC®) with Cysview, this technology significantly improves the detection of non-muscle invasive bladder cancer (NMIBC).

With a standard cystoscopy procedure, your HCP can see some indicators of cancer

under white light. With the addition of blue light and Cysview, the procedure offers significantly improved detection of suspicious areas compared to white light. The Cysview causes cancerous

cells to glow bright pink under blue light, but it is not a dye.¹ It is an optical imaging agent approved by the FDA.



Same image using blue light and Cysview

The Blue Light Cystoscopy with Cysview® experience¹

- One hour prior to a cystoscopy, a healthcare professional (HCP) uses a catheter to place about 2 oz of Cysview in the bladder.
- For the procedure, your HCP inserts a long, thin tube (a cystoscope) and uses white light to examine the bladder.
- When the HCP switches to blue light, the Cysview causes tumors to glow bright pink making them more visible and possibly also revealing additional tumors not visible under white light.
- With Cysview, tumors stand out against normal bladder tissue, so they are easier for your HCP to identify and remove completely.

Is BLC[®] with Cysview[®] safe?¹

Any procedure may have some risks. You should consult your healthcare professional regarding the risks and benefits of this procedure.

The most common patient complaints include:

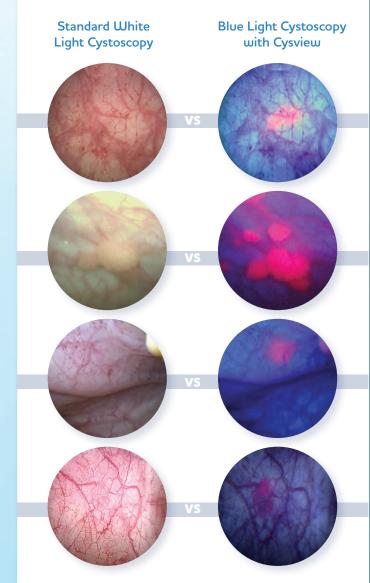
- Bladder spasms
- Trouble urinating
- Discomfort when urinating
- Frequent urination
- Blood in your urine
- Bladder pain

Hypersensitivity reactions to hexaminolevulinate may occur in some patients.

Who can have BLC[®] with Cysview?^{®1}

Anyone who is suspected of having or is known to have bladder cancer (from a previous cystoscopy) can have BLC with Cysview.

Bladder images under white and blue light*



Blue Light Cystoscopy with Cysview has been clinically proven to detect more bladder tumors than White Light Cystoscopy alone.¹

Cysview may not detect all malignant lesions.

* Side-by-side images are the same area of the bladder in white and blue light.

After the procedure

Here are some important things to keep in mind for after your cystoscopy:

- It's a good idea to drink plenty of fluids after any cystoscopy.
- Follow your discharge instructions carefully.
- Be sure to contact your HCP's office with any issues or concerns.

Additional patient resources

Bladder Cancer Advisory Network (BCAN) www.bcan.org

BCAN is the first national advocacy organization dedicated to increasing public awareness about bladder cancer; to advancing bladder cancer research; and to providing educational and supportservices for the bladder cancer community. Founded in May 2005, BCAN is a cooperative effort among bladder cancer survivors, their families and caregivers, and the medical community.

For more information about BLC with Cysview

Visit Cysview.com

Want to speak with a patient like you?

Email Cysview.Patient.Programs@Photocure.com or call (609) 285-4115.

If you have any questions about your Blue Light Cystoscopy with Cysview, ask your urology healthcare professional.

CYSVIEW[®] Hexaminolevulinate HCI

Important Risk & Safety Information

Cysview® (hexaminolevulinate HCI) is an optical imaging agent used to detect non-muscle invasive bladder cancer in patients suspected or known to have lesion(s) on the basis of a prior cystoscopy, or in patients undergoing surveillance cystoscopy for bladder cancer. Cysview is not a replacement for random bladder biopsies or other procedures used in the detection of bladder cancer.

Anaphylactoid shock, hypersensitivity reactions, bladder pain, bladder inflammation (cystitis), and abnormal urine tests have been reported after administration of Cysview. The most common adverse reactions seen in clinical trials were bladder spasm, trouble urinating, discomfort when urinating, frequent urination, blood in the urine, and bladder pain.

Cysview should not be used in patients with large amounts of blood in their urine, any known allergy to Cysview or any derivative of aminolevulinic acid, or porphyria, a condition that means you already have high levels of porphyrins in your body. No specific drug interaction studies have been performed.

Please see Full Prescribing Information enclosed.

Facts about bladder cancer

80,617 estimated new cases of bladder cancer in 2020.2

Bladder cancer incidence is about three times higher in men than in women³



712,644 people living with a diagnosis of bladder cancer in 2019.4

References

- 1. Cysview [prescribing information]. 2019:1-4.
- 2. Globocan. Incidence/mortality by population 2020. Website accessed on February 15, 2023.
- 3. Globocan. Incidence by sex 2020. Available at https://gco.iarc.fr/. Accessed February 15, 2023.
- 4. National Cancer Institute. SEER Stat Facts: Bladder Cancer 2022. https://seer.cancer.gov/statfacts/html/urinb.html. Accessed February 15, 2023.

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