

What You Need to Know About Bladder Cancer

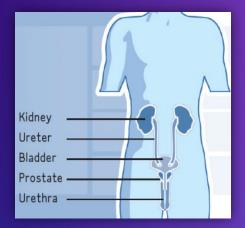
Sponsored by: CYSVIEW® Hexaminolevulinate HCI

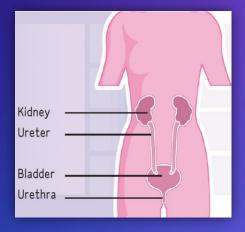
When It's About Your Bladder¹

Your bladder plays an important role in your body by collecting urine from the kidneys, then holding it until you are ready to urinate.

When your doctor suspects that there's a problem with your bladder, he/she may want to:

- examine your bladder more closely to help find the cause of symptoms you are having or to treat or monitor conditions
- inspect the bladder lining more closely for any abnormal growths or suspicious areas that may indicate bladder cancer
- The most common sign of possible bladder cancer is blood in the urine.







Risk Factors for Bladder Cancer¹

- Cigarette smoking is the #1 cause of bladder cancer
- Exposure to certain chemicals
- History of bladder infections or irritation
- Family history of bladder cancer
- Age
 - About 9 out of 10 people with bladder cancer are over age 55
 - The risk increases with age



How Common Is Bladder Cancer?

Bladder cancer is one of the most commonly diagnosed cancers, with an estimated 80,600 new cases in the US in 2020¹



most commonly diagnosed cancer in men in the US¹ most commonly diagnosed cancer in women in the US¹

There were nearly 713,000 bladder cancer survivors in the US in 2020¹



1. Globocan. Incidence/mortality in US by Population 2020. <u>https://gco.iarc.fr/today/</u>. Accessed on March 16, 2023.

2. National Cancer Institute. SEER Stat Facts: Bladder Cancer 2022. https://seer.cancer.gov/statfacts/html/urinb.html. Accessed on March 16, 2023.

How Bladder Cancer Is Diagnosed¹

Urine cytology test

• Patient provides a urine sample to be tested for abnormal cells

Radiology tests (two types)

- Intravenous pyelogram (IVP), which uses a contrast dye and an x-ray to evaluate the urinary tract system
- Computed tomography (CT) scan to examine the kidneys, bladder, and the tube that runs between them

Cystoscopy procedure

- A long, thin tube is inserted into the area where urine leaves the body
- The doctor looks through the tube and then uses a white light to see abnormalities and take samples for further testing



About White Light Cystoscopy (WLC)

WLC is currently considered the "gold standard" for diagnosing bladder cancer, but it does have an important limitation:

Some tumors can be missed under white light

Missed tumors

- can grow and become more dangerous
- if detected later, may require additional procedures for patients

However, there is a way to overcome this limitation



Blue Light Cystoscopy with CYSVIEW® Hexaminolevulinate HCI

Cysview is an optical imaging agent that makes non-muscle invasive bladder cancer tumors glow bright pink under blue light during a cystoscopy.¹

Because the cancer is more visible, urologists can remove it more completely than if they weren't using Cysview.

Cysview is not a replacement for random biopsies. Full Prescribing Information can be found at <u>www.Cysview.com</u>. <i>For more information review the Important Risk & Safety Information later in this presentation.



Cysview[®] Detects More Bladder Cancer¹

Cysview is clinically proven to detect bladder cancer missed by white light alone

- Administered as a solution directly into the bladder
- Absorbed by cancer cells
- Glows bright pink under blue light

Cysview is used for patients suspected or known to have a certain kind of bladder cancer called non-muscle invasive bladder cancer

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The Cysview[®] Experience





About one hour prior to a cystoscopy, the bladder cancer patient has about 2 oz of the Cysview solution placed into the bladder via a catheter. To start the procedure, a thin, tube-like telescope, called a cystoscope, gets inserted into the bladder through the urethra (where urine leaves the body). The urology healthcare professional looks through the cystoscope using white light, then blue light. In blue light, Cysview makes abnormal cells easier to identify.

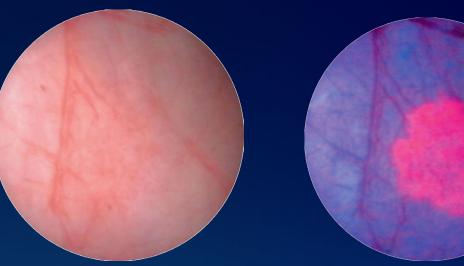
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The healthcare professional visually inspects the inside of the bladder and may remove some abnormal cells for testing.



See the Difference¹



Bladder image

using white light

Same image using blue light and Cysview

Bladder image using white light

Same image using blue light and Cysview

Cysview may fail to detect some malignant lesions. False-positive fluorescence may occur due to inflammation, cystoscopic trauma, scar tissue, previous bladder biopsy, and recent BCG therapy or intravesical chemotherapy. No specific drug interaction studies have been performed.

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Is 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

Contraindications

Cysview should not be used in patients with porphyria, gross hematuria, or with known hypersensitivity to hexaminolevulinate or any derivative of aminolevulinic acid.

Hypersensitivity reactions to hexaminolevulinate may occur in some patients.

Cysview is not a replacement for random biopsies. Full Prescribing Information can be found at <u>www.Cysview.com</u>. <i>For more information review the Important Risk & Safety Information later in this presentation.



Can Anyone Get a Blue Light Cystoscopy?

Blue Light Cystoscopy with Cysview is recommended for anyone who is suspected of having or is known to have nonmuscle invasive bladder cancer based on a previous cystoscopy.¹





Day of Procedure





Ask your urologist if Blue Light Cystoscopy with Cysview[®] would be right for you



Additional Resources

BCAN.org

Cysview.com

Photocure Medical Affairs: 1-855-CYSVIEW



Important Risk & Safety Information for Cysview^{®1}

Cysview 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. False-positive fluorescence may occur due to inflammation, trauma from past cystoscopies, scar tissue, previous bladder biopsy, and recent BCG therapy or intravesical chemotherapy. No specific drug interaction studies have been performed.

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.

There are no available data on Cysview use in pediatric patients, pregnant women, or nursing mothers.





Thank you



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