



What You Need to Know About Bladder Cancer

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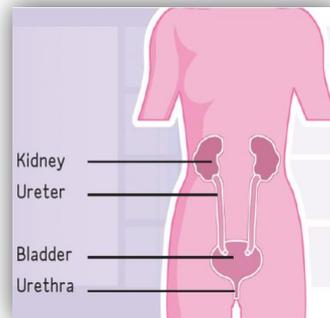
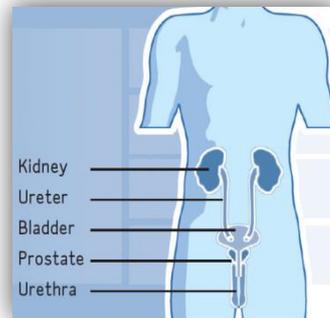


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When It's About Your Bladder...

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 or she may want to examine your bladder more closely to:
 - help find the cause of symptoms you are having
 - treat or monitor conditions
- Your doctor may want to inspect the bladder lining more closely for any abnormal growths or suspicious areas that may indicate bladder cancer





What Is Bladder Cancer?

Bladder cancer occurs when certain chemicals—including cancer-causing agents called aromatic amines—become concentrated in the urine and cause cells in the bladder to start growing out of control¹

- Almost all bladder cancers develop in cells of the inner layer of the bladder, which is in contact with urine
- Some can grow into the deeper bladder layers, then into the wall of the bladder, where they become harder to treat
- The most common sign of possible bladder cancer is blood in the urine

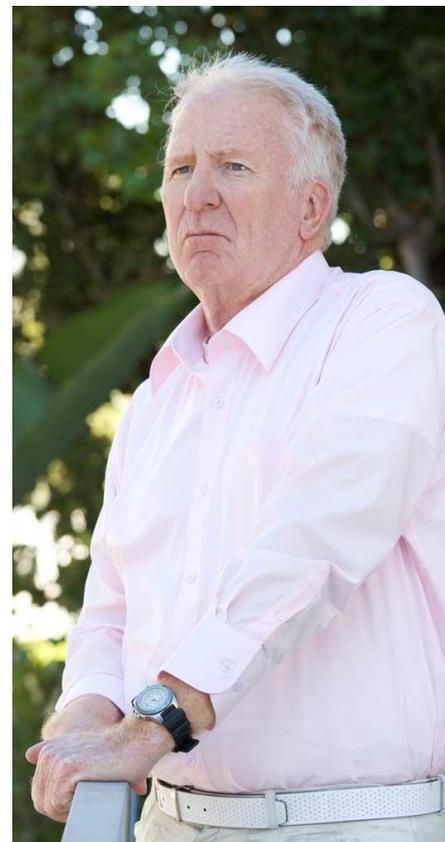
Risk Factors for Bladder Cancer

The most common risk factors for bladder cancer include^{1,2}:

- Cigarette smoking
 - The number-one cause of bladder cancer
 - About 50% of men and 30% of women who are diagnosed have a history of smoking
- Chemical exposure
 - Jobs where chemicals made from aromatic amines are used
 - Includes dye, textile, tire, rubber, leather, and petroleum workers, as well as painters and hairdressers
- Age
 - The risk increases with age
 - About 9 out of 10 people with bladder cancer are over age 55

1. American Cancer Society. Bladder Cancer. <https://www.cancer.org/cancer/bladder-cancer>. Accessed on Sept 9, 2018.

2. Bladder Cancer Advocacy Network. <https://www.bcan.org/knowledge-base>. Accessed Sept 9, 2018.





How Common Is Bladder Cancer?

Bladder cancer is one of the most commonly diagnosed cancers, with an estimated 81,190 new cases each year⁴

- In the US, it's the fourth most common cancer in men and ninth in women
- There are over 520,000 bladder cancer survivors in the US



4. SEER Stats Fact Sheet: Bladder, National Cancer Institute SEER. 2017.



How Bladder Cancer Is Diagnosed

Doctors use 3 main methods to diagnose bladder cancer

- Urine cytology test
 - Patient provides a urine sample, which is then tested to look for abnormal cells
- Cystoscopy procedure
 - A long thin tube is inserted into the area where urine leaves the body
 - The doctor looks through the tube and then traditionally uses a white light to see abnormalities and take samples for further testing
- Radiological, using one of 2 types of tests
 - 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



White Light Cystoscopy Is the Preferred Method, but...

While considered the "gold standard" for diagnosing bladder cancer, the traditional method of white light cystoscopy has limitations

- White light technology helps doctors see abnormalities
- But white light sees only so much, and harder-to-see tumors are often missed
- As a result, tumors that are missed will not be removed and may be identified only later—leading to more procedures for patients—or they may grow and become more dangerous

However, now there is a way to overcome these limitations using a *blue* light...



Blue Light Technology Sees More Cancer Tumors

Blue Light Cystoscopy (BLC) with Cysview® is an innovative technology that greatly improves on traditional white light cystoscopy used alone⁵:

- Cysview (hexaminolevullinate HCl) is an imaging solution that is delivered into the bladder and is absorbed by cancerous tissue
- The doctor then performs the cystoscopy with special equipment called the PDD system
- The PDD system uses a blue light, which enables the solution to highlight tumors and make them more visible
- This lets doctors see more tumors than are detected during white light cystoscopy alone

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



Bladder image using white light cystoscopy alone



Same image after using BLC with Cysview as an adjunct to white light

5. Cysview® [prescribing Information]. Photocure, Inc. Princeton, NJ; 2018.



What Happens During Blue Light Cystoscopy

Here's how Blue Light Cystoscopy with Cysview[®] works⁵

- The Cysview solution is delivered into the patient's bladder about an hour before the cystoscopy
- During the cystoscopy, the doctor inserts a long thin tube and uses white light to examine the bladder
- When the equipment is switched to blue light mode, other hard-to-see tumors that may be present become more visible
- These tumors stand out against the normal bladder tissue, making it easier for doctors to identify and remove them



Can Anyone Get Blue Light Cystoscopy?

Blue Light Cystoscopy with Cysview is recommended for anyone whose doctor suspects or knows that his or her patient has cancer lesions based on a previous cystoscopy



Ask your doctor if Blue Light Cystoscopy with Cysview would be right for you



Is Blue Light Cystoscopy with Cysview Safe?

Any procedure may have some risks, and you should consult your doctor regarding the risks and benefits of this procedure

- The most common patient complaints include such problems as bladder spasm and bladder pain, discomfort when urinating, and frequent urination
- On rare occasions, patients have experienced increased heart rate, chest pain, and fever; also, hypersensitivity reactions may occur in some patients

Is BLC with Cysview right for you

Why Blue Light Cystoscopy with Cysview could be the right choice for you:

- **Improves detection⁵**
so that your doctor can see and remove more cancerous tumors
- **Better disease management**
by removing more tumors





**Talk to your doctor and ask if
Blue Light Cystoscopy with Cysview
would be right for you**

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Important Risk and Safety Information About Cysview

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, cystitis, and abnormal urinalysis have been reported after administration of Cysview. The most common adverse reactions seen in clinical trials were bladder spasm, dysuria, hematuria, and bladder pain.

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



Important Risk and Safety Information About Cysview

Safety and effectiveness have not been established in pediatric patients. There are no available data on Cysview use in pregnant women. Adequate reproductive and developmental toxicity studies in animals have not been performed. Systemic absorption following administration of Cysview is expected to be minimal. There are no data on the presence of hexaminolevulinate in human or animal milk, the effects on a breastfed infant, or the effects on milk production. The development and health benefits of breastfeeding should be considered along with the mother's clinical need for Cysview and any potential adverse effects on the breastfed infant from Cysview or from the underlying maternal condition.

Cysview is approved for use with the KARL STORZ D-Light C Photodynamic Diagnostic (PDD) system. For system set up and general information for the safe use of the PDD system, please refer to the KARL STORZ instruction manuals for each of the components.

Prior to Cysview administration, read the Full Prescribing Information and follow the preparation and reconstitution instructions.