



# Break the cycle of vernal keratoconjunctivitis (VKC) with Verkazia

The first and only FDA-approved cyclosporine uniquely  
formulated to treat VKC in children and adults<sup>1</sup>

Verkazia is here! Sign up for more  
information at [verkazia.com](https://www.verkazia.com)

 **Verkazia**<sup>®</sup>  
cyclosporine ophthalmic  
emulsion 0.1%

## Not just allergies: VKC is a year-round, episodic disease in need of year-round treatment

23%

of patients have perennial symptoms from disease onset<sup>2</sup>

Th2 lymphocytes, mast cells, eosinophils, and their mediators **all play a role in disease pathogenesis**<sup>3</sup>

## Conventional VKC treatment options are often unsuccessful in long-term use or have severe side effects<sup>4,5</sup>

Up to  
28%

of patients have an adverse response to chronic steroid use, such as elevated IOP<sup>4</sup>

**Antiallergic drugs do not work for all patients**—particularly those with moderate-to-severe VKC<sup>5</sup>

## Cyclosporine A, the active ingredient of Verkazia, is understood to inhibit multiple disease pathways in VKC<sup>3</sup>

- Blocks Th2 lymphocyte proliferation and interleukin-2 production<sup>3</sup>
- Inhibits histamine release by reducing interleukin-5 production<sup>3</sup>
- May reduce eosinophil recruitment<sup>3</sup>

### SELECT IMPORTANT SAFETY INFORMATION

#### WARNINGS AND PRECAUTIONS

**Potential for eye injury and contamination:** To avoid the potential for eye injury and contamination, advise patient not to touch the vial tip to the eye or other surfaces.

Please see additional Important Safety Information on back cover.

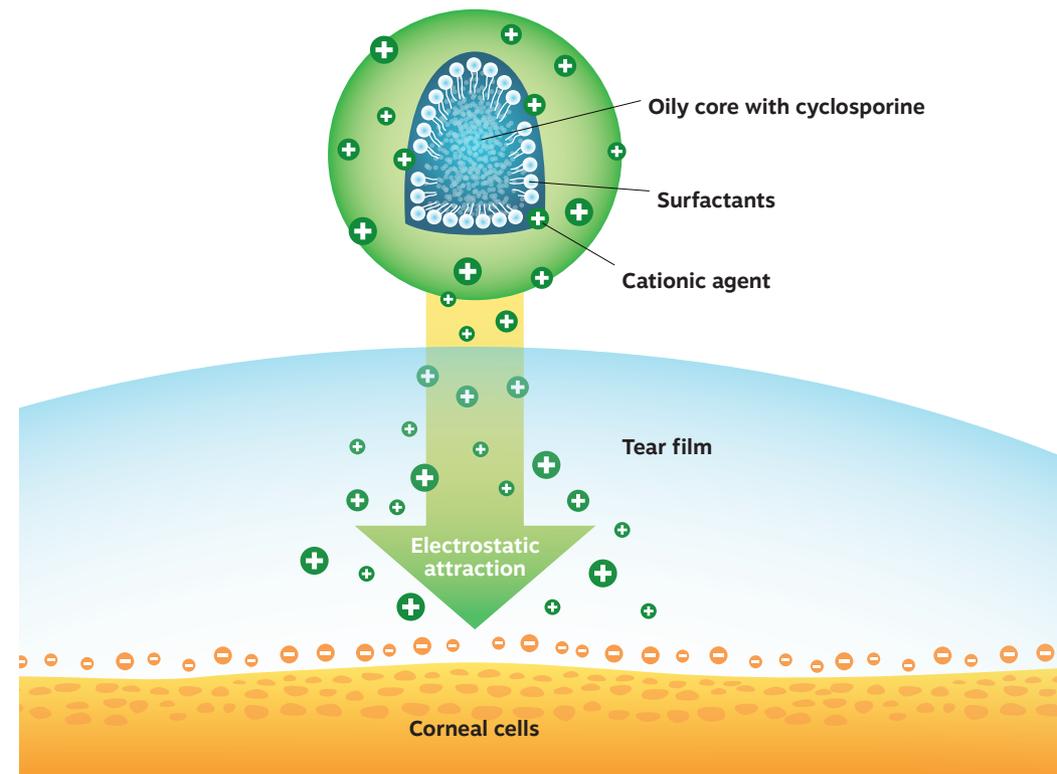
■ **Verkazia**<sup>®</sup>  
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## Verkazia uses proprietary cationic emulsion technology to increase cyclosporine bioavailability in the eye<sup>1,6,7</sup>

Verkazia is formulated as a cationic emulsion that enables **rapid spread, maximization of contact, and prolonged exposure of cyclosporine**<sup>1,6,7</sup>

In a preclinical study in animals, the cationic emulsion nearly doubled the concentration of cyclosporine in the cornea<sup>8,\*</sup>

Cationic ophthalmic emulsion provides an additional palliative effect by reducing inflammation and discomfort<sup>1</sup>



\*Clinical significance of these preclinical data has not been established.

**Verkazia is the only topical cyclosporine FDA-approved for children and adults with VKC<sup>1</sup>**

Turn page to see clinical trial results from Verkazia

# Verkazia delivered significant efficacy and established a 12-month safety profile in clinical trials<sup>1</sup>

- **Reduction in itching and keratitis scores** as early as month 1<sup>1</sup>
- **Additional reductions in photophobia, mucous discharge, and tearing** observed over 4 months in the pivotal trial<sup>7</sup>
- **Established 12-month safety profile** with low rates of mild-to-moderate adverse events<sup>1,9</sup>



Santen is working closely with partners to provide active support for your practice, your patients, and their caregivers. **Find support at [verkazia.com](https://www.verkazia.com)**

## INDICATIONS AND USAGE

Verkazia® (cyclosporine ophthalmic emulsion) 0.1% is a calcineurin inhibitor immunosuppressant indicated for the treatment of vernal keratoconjunctivitis in children and adults.

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### ADVERSE REACTIONS

The most common adverse reactions reported in greater than 5% of patients were eye pain (12%) and eye pruritus (8%), which were usually transitory and occurred during instillation.

**Please see Full Prescribing Information accompanying this brochure.**

**REFERENCES:** **1.** Verkazia [package insert]. Emeryville, CA: Santen Inc.; 2021. **2.** Bonini S, Bonini S, Lambiase A, et al. Vernal keratoconjunctivitis revisited: a case series of 195 patients with long-term followup. *Ophthalmology*. 2000;107(6):1157-1163. doi:10.1016/s0161-6420(00)00092-0 **3.** Leonardi A. Management of vernal keratoconjunctivitis. *Ophthalmol Ther*. 2013;2(2):73-88. doi:10.1007/s40123-013-0019-y **4.** Ang M, Ti S-E, Loh R, et al. Steroid-induced ocular hypertension in Asian children with severe vernal keratoconjunctivitis. *Clin Ophthalmol*. 2012;6:1253-1258. doi:10.2147/OPHT.S32936 **5.** Mantelli F, Santos MS, Petitti T, et al. Systematic review and meta-analysis of randomised clinical trials on topical treatments for vernal keratoconjunctivitis. *Br J Ophthalmol*. 2007;91(12):1656-1661. doi:10.1136/bjo.2007.122044 **6.** Leonardi A, Doan S, Amrane M, et al; for VEKTIS Study Group. A randomized, controlled trial of cyclosporine A cationic emulsion in pediatric vernal keratoconjunctivitis: the VEKTIS study. *Ophthalmology*. 2019;126(5):671-681. doi:10.1016/j.ophtha.2018.12.027 **7.** Data on file. Santen Inc. **8.** Lallemand F, Daul P, Benita S, Buggage R, Garrigue J-S. Successfully improving ocular drug delivery using the cationic nanoemulsion, Novasorb. *J Drug Deliv*. 2012;604204. doi:10.1155/2012/604204 **9.** Bremond-Gignac D, Doan S, Amrane M, et al; for VEKTIS Study Group. Twelve-month results of cyclosporine A cationic emulsion in a randomized study in patients with pediatric vernal keratoconjunctivitis. *Am J Ophthalmol*. 2020;212:116-126. doi:10.1016/j.ajo.2019.11.020

