

Bimzelx[®]

(bimekizumab-bkzx)

»»»»» **HAS ARRIVED**

UCB Dermatology invites you to
**EXPERT PERSPECTIVES ON
A DIFFERENT TREATMENT
FOR PLAQUE PSORIASIS**

WEDNESDAY, MAY 29 | 12:00PM

Please refer to the event agenda for further event details including location.

PRESENTED BY:



**NEIL
KORMAN,**
MD, PhD

Speaker is a paid consultant for UCB, Inc.

EVENT DETAILS:

ROOMS 25-26



*Scan the QR code or
visit BIMZELXhcp.com
for additional information*

THIS PRESENTATION WILL HELP YOU:

- > Learn how a different treatment for moderate-to-severe plaque psoriasis works, including the importance of IL-17F inhibition
- > Explore the clinical efficacy and safety profile across three Phase 3 and one 3B clinical trials
- > Find out about dosing, access, patient support, and more

INDICATION

BIMZELX[®] (bimekizumab-bkzx) is a humanized interleukin-17A and F antagonist indicated for the treatment of moderate to severe plaque psoriasis in adults who are candidates for systemic therapy or phototherapy.

Please see Important Safety Information on opposite side, and ask a UCB representative for full Prescribing Information, or visit BIMZELXhcp.com

INDICATION AND IMPORTANT SAFETY INFORMATION

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BIMZELX is a humanized interleukin-17A and F antagonist indicated for the treatment of moderate to severe plaque psoriasis in adults who are candidates for systemic therapy or phototherapy.

IMPORTANT SAFETY INFORMATION

Suicidal Ideation and Behavior

BIMZELX® (bimekizumab-bkzx) may increase the risk of suicidal ideation and behavior (SI/B). A causal association between treatment with BIMZELX and increased risk of SI/B has not been established. Prescribers should weigh the potential risks and benefits before using BIMZELX in patients with a history of severe depression or SI/B. Advise monitoring for the emergence or worsening of depression, suicidal ideation, or other mood changes. If such changes occur, advise to promptly seek medical attention, refer to a mental health professional as appropriate, and re-evaluate the risks and benefits of continuing treatment.

Infections

BIMZELX may increase the risk of infections. Do not initiate treatment with BIMZELX in patients with any clinically important active infection until the infection resolves or is adequately treated. In patients with a chronic infection or a history of recurrent infection, consider the risks and benefits prior to prescribing BIMZELX. Instruct patients to seek medical advice if signs or symptoms suggestive of clinically important infection occur. If a patient develops such an infection or is not responding to standard therapy, monitor the patient closely and do not administer BIMZELX until the infection resolves.

Tuberculosis

Evaluate patients for tuberculosis (TB) infection prior to initiating treatment with BIMZELX. Avoid the use of BIMZELX in patients with active TB infection. Initiate treatment of latent TB prior to administering BIMZELX. Consider anti-TB therapy prior to initiation of BIMZELX in patients with a past history of latent or active TB in whom an adequate course of treatment cannot be confirmed. Closely monitor patients for signs and symptoms of active TB during and after treatment.

Liver Biochemical Abnormalities

Elevated serum transaminases were reported in clinical trials with BIMZELX. Test liver enzymes, alkaline phosphatase and bilirubin at baseline, periodically during treatment with BIMZELX and according to routine patient management. If treatment-related increases in liver enzymes occur and drug-induced liver injury is suspected, interrupt BIMZELX until a diagnosis of liver injury is excluded. Permanently discontinue use of BIMZELX in patients with causally associated combined elevations of transaminases and bilirubin. Avoid use of BIMZELX in patients with acute liver disease or cirrhosis.

Inflammatory Bowel Disease

Cases of inflammatory bowel disease (IBD) have been reported in patients treated with IL-17 inhibitors, including BIMZELX. Avoid use of BIMZELX in patients with active IBD. During BIMZELX treatment, monitor patients for signs and symptoms of IBD and discontinue treatment if new onset or worsening of signs and symptoms occurs.

Immunizations

Prior to initiating therapy with BIMZELX, complete all age-appropriate vaccinations according to current immunization guidelines. Avoid the use of live vaccines in patients treated with BIMZELX.

MOST COMMON ADVERSE REACTIONS

Most common adverse reactions ($\geq 1\%$) are upper respiratory infections, oral candidiasis, headache, injection site reactions, tinea infections, gastroenteritis, Herpes Simplex Infections, acne, folliculitis, other Candida infections, and fatigue.

Ask a UCB representative for full Prescribing Information or visit [BIMZELXhcp.com](https://www.bimzelprescribing.com).

In accordance with the PhRMA Code on Interactions with Healthcare Professionals, attendance at this program is limited to healthcare professionals. Accordingly, attendance by guests or spouses is not appropriate, and associated expenses will not be reimbursed. Certain state and federal requirements place restrictions on and/or require disclosure of items UCB provides to healthcare professionals, including meals and refreshments. UCB is committed to complying with all legal requirements.

his program/event is developed and offered by UCB. This is not an official program/event of the Cleveland Clinic.

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