

JOIN US LIVE AT AUA2025

A NOVEL INTRAVESICAL GENE THERAPY FOR NMIBC:

Clinical Outcomes, Real-World Evidence, and Comprehensive Support

SUNDAY, APRIL 27, 2025

9:30-10:15 AM PT

The Venetian Convention & Expo Center | Booth #2001

AGENDA TOPICS

- Understanding the clinical efficacy and safety profile for ADSTILADRIN
- Learning about the administration and quarterly dosing schedule for ADSTILADRIN
- Identifying patient populations who may benefit from ADSTILADRIN therapy
- Reviewing access and reimbursement options for ADSTILADRIN



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INDICATION

ADSTILADRIN is a non-replicating adenoviral vector-based gene therapy indicated for the treatment of adult patients with high-risk Bacillus Calmette-Guérin (BCG)-unresponsive non-muscle invasive bladder cancer (NMIBC) with carcinoma in situ (CIS) with or without papillary tumors.

IMPORTANT SAFETY INFORMATION

CONTRAINDICATIONS: ADSTILADRIN is contraindicated in patients with prior

hypersensitivity reactions to interferon alfa or to any component of the product.

WARNINGS AND PRECAUTIONS:

- **Risk with delayed cystectomy:** Delaying cystectomy in patients with BCG-unresponsive CIS could lead to development of muscle invasive or metastatic bladder cancer, which can be lethal. If patients with CIS do not have a complete response to treatment after 3 months or if CIS recurs, consider cystectomy.

GENERATE THE FIGHT WITHIN

DISCOVER
ADSTILADRIN AT
BOOTH #1859



Your FIRST choice
for patients with
high-risk NMIBC
after BCG

IMPORTANT SAFETY INFORMATION (cont.)

- *Risk of disseminated adenovirus infection:* Persons who are immunocompromised or immunodeficient may be at risk for disseminated infection from ADSTILADRIN due to low levels of replication-competent adenovirus. Avoid ADSTILADRIN exposure to immunocompromised or immunodeficient individuals.

DOSAGE AND ADMINISTRATION: Administer ADSTILADRIN by intravesical instillation only. ADSTILADRIN is not for intravenous use, topical use, or oral administration.

USE IN SPECIFIC POPULATIONS: Advise females of reproductive potential to use effective contraception during ADSTILADRIN treatment and for 6 months after the last dose. Advise male patients with female partners of reproductive potential to use effective

contraception during ADSTILADRIN treatment and for 3 months after the last dose.

ADVERSE REACTIONS: The most common (>10%) adverse reactions, including laboratory abnormalities (>15%), were glucose increased, instillation site discharge, triglycerides increased, fatigue, bladder spasm, micturition (urination urgency), creatinine increased, hematuria (blood in urine), phosphate decreased, chills, pyrexia (fever), and dysuria (painful urination).

You are encouraged to report negative side effects of prescription drugs to FDA. Visit www.FDA.gov/medwatch or call 1-800-332-1088. You may also contact Ferring Pharmaceuticals at 1-888-FERRING.

Full Prescribing Information for ADSTILADRIN can be found at www.adstiladrinhcp.com