Recommendations for treatment with

EYLEA® 2mg
(aflibercept solution for injection)

EYLEA® 8mg
(aflibercept 114.3mg/mL, solution for injection)

Prescriber Guide

This Guide provides you important information on EYLEA® 2 mg solution for injection (aflibercept 40 mg/ml) and EYLEA 8 mg solution for injection (aflibercept 114.3 mg/ml), the medication itself, and how to correctly administer it to your patients.

Please provide your patients with the EYLEA® patient guide which includes reference to an audio version (read out of the patient guide), and the Patient Information Leaflet.

To access the EYLEA Prescriber Video, please scan the QR code:

https://ophthalmology.bayer.co.il/tools-resources

For further information on EYLEA, please refer to the Prescribing Information.

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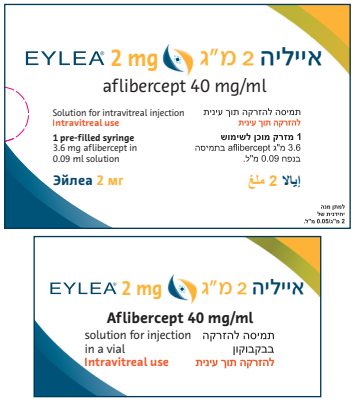
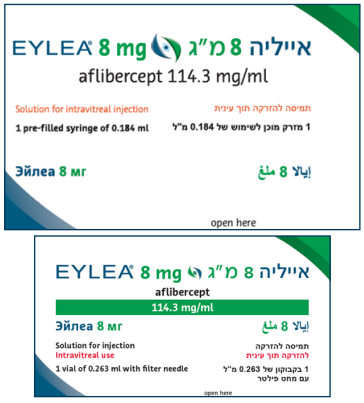
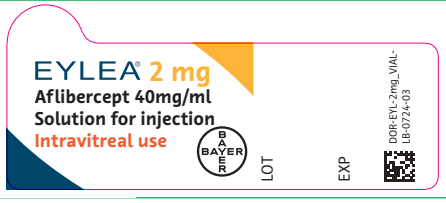
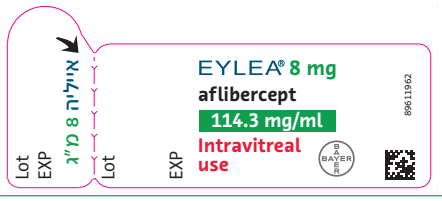
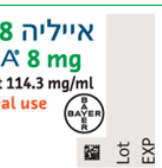
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KEY SUMMARY FOR EYLEA

Differences between EYLEA 2 mg solution for injection (aflibercept 40 mg/ml) and EYLEA 8 mg solution for injection (aflibercept 114.3 mg/ml)

	EYLEA 2 mg (aflibercept 40 mg/ml)	EYLEA 8 mg (aflibercept 114.3 mg/ml)
Approved Indications (Adults)	• Neovascular (wet) age-related macular degeneration (wAMD) • Visual impairment due to diabetic macular oedema (DME) • Visual impairment due to macular oedema secondary to central retinal vein occlusion (CRVO) • Visual impairment due to macular oedema secondary to branch retinal vein occlusion (BRVO) • Visual impairment due to myopic choroidal neovascularisation (mCNV)	• Neovascular (wet) age-related macular degeneration (wAMD) • Visual impairment due to diabetic macular oedema (DME)
Dose per injection	2 mg	8 mg
Injection volume	0.05 ml	0.07 ml
Presentation	Pre-filled syringe (PFS) and vial	Pre-filled syringe with OcuClick system and vial
Packaging		
Vial		
Label on vial		
Pre-filled syringe		
Label on pre-filled syringe		

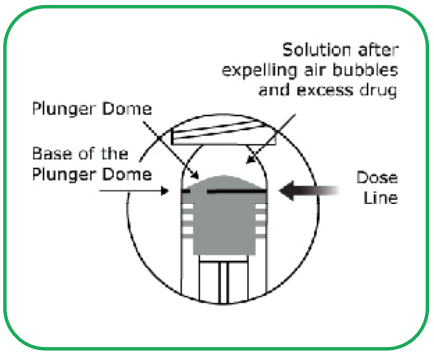
Contraindications

- Hypersensitivity to aflibercept or to any of the excipients listed in section 6.1 of the Prescribing Information
- Active or suspected ocular or periocular infection
- Active severe intraocular inflammation

Key instructions for use

- The vials and the pre-filled syringes contain excess volumes. Before injecting, syringes with solution withdrawn from the vial as well as the pre-filled syringes must be primed to the correct volume for injection according to the steps in the instructions for use.
- The EYLEA 8 mg pre-filled syringe does not have a dose line because it is designed to set the dose mechanically as shown in the key steps briefly summarized below and provided in detail in the instructions for use section of this guide. Priming and setting the dose must be done using the steps described below and in the instructions for use section.
- Ensure proper aseptic technique including the use of broad-spectrum microbicide to minimise risk of intraocular infection.
- For the intravitreal injection, a **30 G x ½ inch injection needle** should be used. Use of a smaller size injection needle (higher gauge) than the 30 G x ½ inch needle may result in increased injection forces.

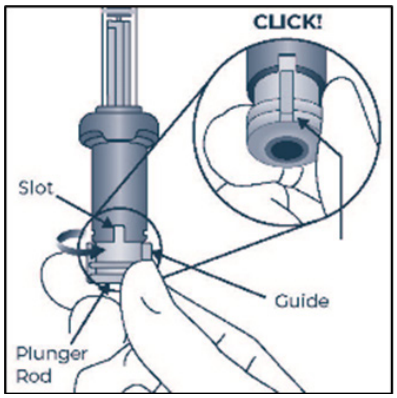
Correct plunger position

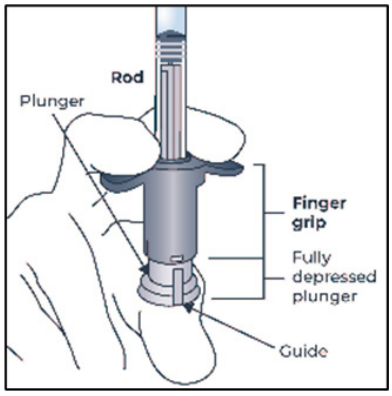


- **EYLEA 2 mg pre-filled syringe:**
  - o Expel excess volume and air bubbles from the pre-filled syringe and adjust the base of the plunger dome **(<u>NOT</u> the tip)** to the dose line before injection
  - o Push the plunger slowly and with constant pressure, and do not administer any residual volume remaining in the syringe after injection

- **EYLEA 8 mg pre-filled syringe:**
  - o This pre-filled syringe does not have a dose line because it is designed to set the dose using the following steps:
    - Expel excess volume and air bubbles by pushing the plunger slowly and with constant pressure until it stops, i.e., when the guide on the plunger rod reaches the finger grip.
    - Turn the end of the plunger rod 90 degrees clockwise or counter-clockwise until the guide of the plunger rod aligns with the slot (click sound may be heard). Now the device is ready to be inserted into the eye for dosing.
  - o Upon insertion of the needle into the injection site, inject the solution by slowly pushing the plunger rod until it stops. Do not apply additional pressure after the plunger reaches the stop.

o Residual solution remains in the syringe after the injection.





Selected instructions for storage and handling

- **Store EYLEA in the refrigerator** (2°C to 8°C).
- Prior to use, the unopened vials and pre-filled syringes may be kept in their cartons at room temperature (below 25°C) for up to 24 hours.
- EYLEA is **not licensed for multi-dose,** further compounding or vial splitting. Use of more than one injection from the vial or the pre-filled syringe **can lead to contamination and subsequent infection**

Special warnings and precautions for use

In all cases, instruct patients to immediately report signs and symptoms of adverse events

Adverse event/risk	Measures to minimise risk
Intraocular inflammation including endophthalmitis	Use proper aseptic technique when preparing the injection and during the injection itself. Use recommended antiseptic agents. Monitor patients after the injection.
Transient intraocular pressure (IOP) increase	Properly prime the syringe by removing excess volume and air bubbles from syringe before administration. Monitor patient's vision and IOP after the injection.
Medication error	Check the carton and the label on the medication to ensure you have the correct dose of EYLEA.
Retinal pigment epithelial tear	Review retinal pigment epithelial detachments features for risk of retinal pigment epithelial tears. Monitor patient after the injection for symptoms such as acute decrease in (central) vision, blind spot (central scotoma) and distorted vision with deviation of either vertical or horizontal lines (metamorphosia).
Cataract	Measure the correct site for the injection, use correct injection technique.
Off-label use/misuse	Use medication only for treatment of approved indications and use approved dose.
Embryo-foetotoxicity	Instruct patient to use effective contraception during treatment and: • For at least **3 months** after last intravitreal injection of **EYLEA 2 mg** • For at least **4 months** after last intravitreal injection of **EYLEA 8 mg** EYLEA 2 mg and EYLEA 8 mg should not be used during pregnancy, unless the potential benefit outweighs the potential risk to the foetus.
Exposure during breast-feeding	EYLEA is not recommended in patients who are breast-feeding.

For a complete list of adverse events, please refer to the Prescribing Information

After the injection

- **Immediately following the intravitreal injection, patients should be monitored for elevation in intraocular pressure**
- Following intravitreal injection, patients should be instructed to report any symptoms suggestive of endophthalmitis (e.g., eye pain, redness of the eye, photophobia, blurring of vision) without delay

GENERAL INFORMATION

You must explain to the patient the implications of anti-VEGF treatment. The patient guide is a tool that will help you to communicate to your patient about the disease and treatment. It contains the information on the signs and symptoms of adverse events and when the patient should seek immediate medical attention.

This guide is available upon request to Bayer, and you should distribute it to your patients. It is available as a booklet and as an audio guide option. It is also available at the Ministry of Health website in the following link:

https://www.gov.il/he/Departments/DynamicCollectors/patient-safety-information?skip=0&safety_information_audience=1

The Prescribing Information (PI) describes the properties of EYLEA and the approved indications for use. It is an important source of information for healthcare professionals on how to use EYLEA safely and effectively. It is available inside the EYLEA package and in the Israeli Drug Registry on the Ministry of Health at https://israeldrugs.health.gov.il/. Refer to the approved Prescribing Information for EYLEA for complete information on posology and dosing recommendations for EYLEA 2 mg and EYLEA 8 mg.

ABOUT EYLEA

EYLEA is for intravitreal injection only. It must only be administered by a qualified physician experienced in administering intravitreal injections and familiar with the handling of the vial/pre-filled syringe.

	EYLEA 2 mg	EYLEA 8 mg
Presentations	Pre-filled syringe and vial	Pre-filled syringe with OcuClick dosing system and vial
Approved indications in adult patients (18 years and older)		
Neovascular (wet) age-related macular degeneration (wAMD)	Yes	Yes
Visual impairment due to diabetic macular oedema DME)	Yes	Yes
Visual impairment due to macular oedema secondary to retinal vein occlusion (RVO), branch (BRVO) or central CRVO)	Yes	No
Visual impairment due to myopic choroidal neovascularisation (mCNV)	Yes	No
Recommended dose	2 mg	8 mg
Volume to inject	50 microliters or 0.05 ml	70 microliters or 0.07 ml
Posology for approved indications	Refer to the Prescribing Information for complete information on posology and dosing for EYLEA 2 mg and for EYLEA 8 mg, for approved indications.	

IMPORTANT SAFETY INFORMATION ABOUT EYLEA

Contraindications

EYLEA is contraindicated in the following:

- Hypersensitivity to aflibercept or to any of the excipients listed in section 6.1 of the Prescribing Information.
- Active or suspected ocular or periocular infection.
- Active severe intraocular inflammation.

Special warnings and precautions for use

Intravitreal injection-related reactions

Intravitreal injections, including those with EYLEA, have been associated with endophthalmitis, intraocular inflammation, rhegmatogenous retinal detachment, retinal tear and iatrogenic traumatic cataract.

- **Always use proper aseptic injection techniques** when administering EYLEA
- **Monitor patients during the week following injection** to permit early treatment if an infection occurs
- **Instruct patients to immediately report any signs and symptoms** suggestive of endophthalmitis or any of the adverse reactions including those mentioned above

The pre-filled syringe and the vial contain more than the recommended dose of 2 mg or 8 mg aflibercept (equivalent to 0.05/0.07 ml). Expel the excess volume and air bubbles from the syringe, prior to injection.

The EYLEA 8 mg pre-filled syringe has a push and twist priming mechanism and is different from other pre-filled syringes including the EYLEA 2 mg pre-filled syringe.

- Administer the recommended dose and do not inject any residual volume, as increased injection volume can lead to clinically relevant intraocular pressure elevation.

Increase in intraocular pressure

Transient increases in intraocular pressure have been seen within 60 minutes of intravitreal injection, including injections with EYLEA.

- **Monitor your patient after the injection procedure** and take special precaution in patients with poorly controlled glaucoma. Do not inject EYLEA while the intraocular pressure is ≥30 mm Hg. Both the intraocular pressure and perfusion status of the optic nerve head must be monitored and managed appropriately.
- Refer to the post-injection care section for further instructions

Immunogenicity

EYLEA is a therapeutic protein and has potential for immunogenicity.

- **Instruct patients to report any signs or symptoms of intraocular inflammation** (e.g. pain, photophobia or redness), which may be attributable to hypersensitivity
- Refer to the post-injection care section for further instructions.

Systemic effects

Systemic adverse events including non-ocular haemorrhages and arterial thromboembolic events have been reported following intravitreal injection of VEGF inhibitors, and there is a theoretical risk that these may relate to VEGF inhibition.

- Exercise caution when treating patients with a history of stroke, transient ischaemic attacks or myocardial infarction within the last 6 months as there are limited data on safety of EYLEA in these groups.

Special populations

The following recommendations are made:

Women of childbearing potential

Use effective contraception during treatment and **for at least 3 months** after the last intravitreal injection of EYLEA 2 mg.

Use effective contraception during treatment and for at least 4 months after the last intravitreal injection of EYLEA 8 mg.

Pregnancy

EYLEA 2 mg and EYLEA 8 mg should not be used during pregnancy unless the potential benefit outweighs the potential risk to the foetus.

Breast-feeding

Based on very limited human data, aflibercept may be excreted in human milk at low levels. Aflibercept is a large protein molecule and the amount of medication absorbed by the infant is expected to be minimal. The effects of aflibercept on a breast-fed newborn/infant is unknown. As a precautionary measure. breast-feeding is not recommended during the use of EYLEA.

Post-injection care

Immediately after intravitreal injection:

- Monitor the patient for elevation in intraocular pressure. Appropriate monitoring may consist of a check for perfusion of the optic nerve head or conducting a tonometry test. Sterile equipment for paracentesis should be readily available if anterior chamber paracentesis needs to be done.
- Instruct the patient to report any signs and symptoms suggestive of endophthalmitis (e.g. eye pain, redness of the eye, photophobia, blurring of vision) without delay
- Instruct the patient to report any signs or symptoms after the injection that get worse over time.

Adverse drug reactions

The safety profiles observed in the clinical program for EYLEA 2 mg and EYLEA 8 mg and similar. Key sign and symptoms of adverse reactions include:

Adverse Drug Reaction	Key Signs and Symptoms
Transient increased intraocular pressure (IOP)	Patients may experience vision changes such as temporary vision loss, eye pain, halos around lights, red eye, nausea and vomiting.
Tear of the retinal pigment epithelium	Patients may experience acute decrease in (central) vision, blind spot (central scotoma), and distorted vision with deviation of either vertical or horizontal lines (metamorphopsia).
Tear or detachment of the retina	Patients may experience sudden flashes of light, a sudden appearance or an increase of the number of vitreous floaters, a curtain over a portion of their visual field and vision changes.
Intraocular inflammation including endophthalmitis	Patients may experience eye pain or increased discomfort, worsening eye redness, photophobia or sensitivity to light, swelling, and vision changes, such as a sudden decrease in vision or blurring of vision.
Cataract (traumatic, nuclear, subcapsular, cortical) or lenticular opacities	Patients may experience less vivid lines and shapes, shadows and colour vision than before, and vision changes.

See section 4.8 of the Prescribing Information for full list of potential adverse reactions, and their frequency categories.

Management of adverse reactions

In case of any adverse reactions that concern your patient, he or she must have immediate access to an ophthalmologist.

Appropriate management of ALL adverse reactions, including those associated with the intravitreal injection, should be carried out according to clinical practice and/or following standardised guidelines.

Healthcare Professionals are asked to report any suspected adverse reactions

Reporting suspected adverse reactions after authorization of the medicinal product is important. It allows continued monitoring of the benefit/risk balance of the medicinal product. Any suspected adverse events should be reported to the Ministry of Health according to the National Regulation by using an online form: https://sideeffects.health.gov.il

Additionally, adverse events and product quality complaints can be reported to Bayer Israel:
E-mail: dsisrael@bayer.com
Fax: 09-7626741

STORAGE AND HANDLING OF EYLEA

The EYLEA 2 mg solution is clear. The EYLEA 8 mg solution is clear to slightly opalescent. Both solutions are colourless to pale yellow. It is an iso-osmotic solution.

Inspect the solution visually before use, for any foreign particulate matter and/or unusual colour (the solution can be pale yellow, which is normal) **or any variation in physical appearance. If any of these are observed, do not use the product.**

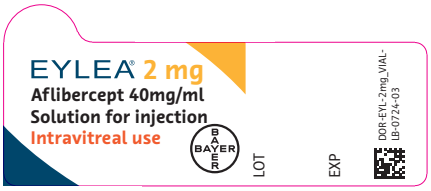
The EYLEA 2 mg vial pre-filled syringe are different from the EYLEA 8 mg vial and pre-filled syringe, including in their appearance, to allow easy identification. Please take this into consideration when selecting the product to be administered (please see pictures below).

Do not split a vial/pre-filled syringe into more than one dose. Each vial/pre-filled syringe is for single use in one eye only. Extraction of multiple doses from a single vial/pre-filled syringe may increase the risk of contamination and subsequent infection in the patient.

EYLEA 2 mg



Each EYLEA 2 mg solution for injection in pre-filled syringe contains more than the recommended 0.05 ml dose of aflibercept.
The excess volume and any air bubbles in the syringe must be expelled before injecting the patient with the recommended dose.



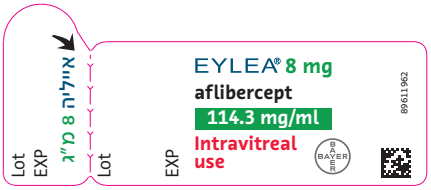


Each EYLEA 2 mg solution for injection in a vial contains more than the recommended 0.05 ml dose of aflibercept.
The excess volume and any air bubbles in the disposable syringe must be discarded before injecting the patient with the recommended dose.

EYLEA 8 mg



Each EYLEA 8 mg solution for injection in a pre-filled syringe contains more than the recommended 0.07 ml dose of aflibercept. The excess volume and any air bubbles in the syringe must be expelled before injecting according to the priming steps in the instructions for use. **Remember that the priming steps of this syringe differ from other pre-filled syringes. Carefully review the instructions below.**

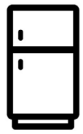
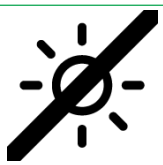




Each EYLEA 8 mg solution for injection in a vial **contains more than the recommended 0.07 ml dose of aflibercept. The excess volume and any air bubbles in the disposable syringe must be discarded before injecting the patient with the recommended dose.**

For further information and additional details on EYLEA, please refer to the Prescribing Information.

Special precautions for storage

	Store in a refrigerator (2–8°C).
	Do not freeze.
	Keep the pre-filled syringe in its blister and in the outer carton in order to protect it from light. Keep the vial in the outer carton in order to protect from light.
	Prior to use, the unopened vials and pre-filled syringes may be kept in their cartons at room temperature (below 25°C) for up to 24 hours.

The inside of the sealed pre-filled syringe blister packaging of EYLEA 2 mg and EYLEA 8 mg is sterile. Do not open the pre-filled syringe blister outside the clean administration room. **After opening the blister or vial, proceed under aseptic conditions.**

INSTRUCTIONS FOR USE OF EYLEA

General preparation for injection

- Intravitreal injections must be carried out according to medical standards and applicable guidelines by **a qualified physician, experienced in administering intravitreal injections and familiar with the handling** of the vial/pre-filled syringe.
- Surgical hand disinfection, sterile gloves, a sterile drape and a sterilised eyelid speculum (or equivalent) are recommended.
- For the intravitreal injection, a **30 G x ½ inch injection needle** should be used. Use of a smaller size injection needle (higher gauge) than the 30G x ½ inch needle may result in increased injection forces.

Pre-filled syringe – EYLEA 2 mg solution for injection

Note: Become familiarized with how to use this syringe before using it on patients.
The EYLEA 2 mg pre-filled syringe is a glass syringe with a rubber plunger that requires slightly more force to depress compared with plastic syringes (such as those used with the vial presentation).

1 Prepare the pre-filled syringe for administration

It is important to prepare the pre-filled syringe using aseptic technique.

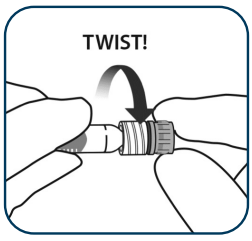
An assistant should carry out the following steps: Remove the carton containing the pre-filled syringe from the refrigerator. Open the carton and remove the blister containing the syringe. The blister must not be placed on a sterile surface because the outside surface of the blister is not sterile. The inside of the sealed blister and the pre-filled syringe are sterile. Carefully peel open the blister. **Aseptic technique must be used once the blister is opened.**

The qualified physician carries out the remainder of the steps with sterile technique including the use of sterile gloves (white gloves in pictures) when handling: With two fingers, remove the pre-filled syringe from the blister. Visually inspect the syringe. Place the syringe in a sterile tray until ready for assembly.

2 Remove the syringe cap

Hold the syringe in one hand while using the other hand to grasp the syringe cap with the thumb and forefinger.

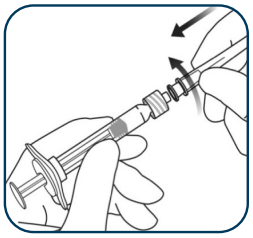
Twist off – do not snap off – the syringe cap.



3 **Do not pull back the plunger.** This may compromise the sterility of the product.

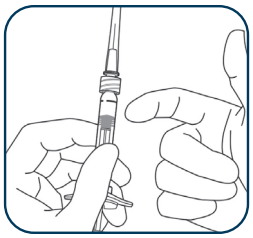
4 Attach the needle

Using aseptic technique, **firmly twist the 30 G x ½ inch injection needle onto the Luer-lock syringe tip.**



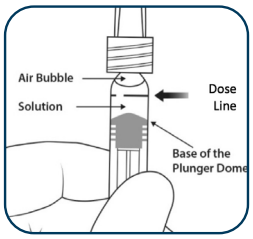
5 Check for bubbles

Holding the syringe with the needle pointing upwards, **check the solution for bubbles. If bubbles are present, gently tap the syringe with your finger until the bubbles rise to the top.**



6 Eliminate air bubbles and excess drug

Correct handling of the pre-filled syringe is important in order to avoid the risk of medication errors. This includes removal of the excess volume (to avoid overdosing) and air bubbles.

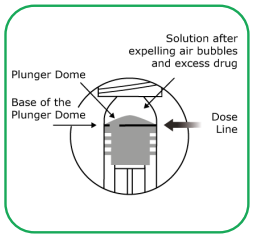


Remove the air bubbles and excess drug from the syringe by slowly depressing the plunger rod to align the base of the plunger dome (not the tip of the dome) with the dose line on the syringe. Remember that the feel with this syringe is different from disposable syringes.

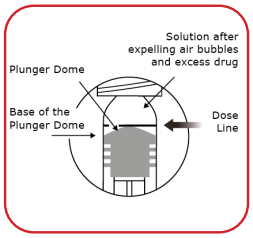
The remaining volume after aligning to the dose line ensures appropriate dosing.

Accurate positioning of the plunger is critical. Incorrect plunger positioning can lead to overdosing or underdosing.

Correct plunger position



Incorrect plunger position



7 Inject EYLEA

Inject the solution into the eye carefully with constant pressure on the plunger. Do not apply additional pressure once the plunger has reached the bottom of the syringe.

Do not administer any residual solution observed in the syringe.

8 The pre-filled syringe is for single use in one eye only.

Dispose of any unused medicinal product or waste material in accordance with local regulations.

Pre-filled syringe – EYLEA 8 mg, solution for injection

Note: Become familiarized with how to use this syringe before using it on patients.
The EYLEA 8 mg pre-filled glass syringe does not have a dose line because it is designed to set the dose using the steps listed below. Residual solution will remain in the syringe after the injection and is to be discarded.

The pre-filled syringe and contents must be inspected before use.
Do not use the pre-filled syringe if any part is damaged or loose. Do not use it if the syringe cap is loose or detached from the syringe. Look for any particulate matter and/or unusual colour or any variation in physical appearance. If any of these are observed, do not use the product.

1 Prepare the pre-filled syringe for administration

It is important to prepare the pre-filled syringe using aseptic technique.

Remove the carton containing the pre-filled syringe from the refrigerator. Open the carton and remove the blister containing the syringe. The blister must not be placed on an aseptic surface because the outside surface of the blister is not sterile. The inside of the sealed blister and the pre-filled syringe are sterile. Carefully peel open the blister. **Aseptic technique must be used once the blister is opened.**

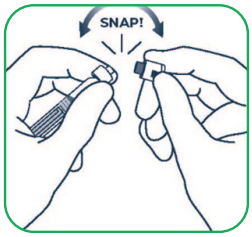
The remaining steps have to be carried out by a qualified physician using aseptic technique including the use of sterile gloves (white gloves in pictures) when handling.

With two fingers, remove the pre-filled syringe from the blister, visually inspect the syringe and place the syringe in a sterile tray until ready for assembly.

2 Remove the syringe cap

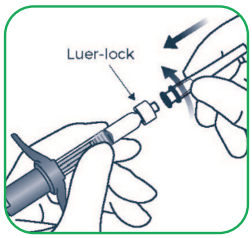
SNAP OFF (do not twist off) syringe cap by holding the syringe in one hand and the syringe cap with the thumb and forefinger of the other hand.

Note: Do not pull back on the plunger rod.



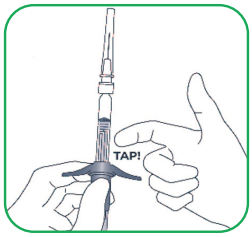
3 Attach needle

Firmly twist the 30 G x ½ inch injection needle onto the Luer-lock syringe tip. Use of a smaller size injection needle (higher gauge) than the 30G x ½ inch needle may result in increased injection forces.



4 Dislodge air bubbles

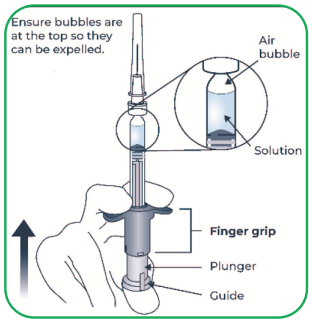
Holding the syringe with the needle pointing up, check the syringe for bubbles. If there are bubbles, gently tap the syringe with your finger until the bubbles rise to the top.

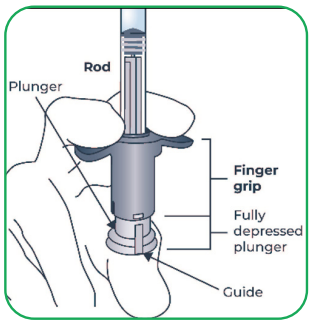


5

Expel air and excess volume to prime

The EYLEA 8 mg pre-filled syringe does not have a dose line because it is designed to set the dose mechanically.
Priming and setting the dose must be done using the following steps. To eliminate all bubbles and to expel excess drug, slowly depress the plunger rod (top figure) until it stops, i.e. when the guide on the plunger rod reaches the finger grip (bottom figure).



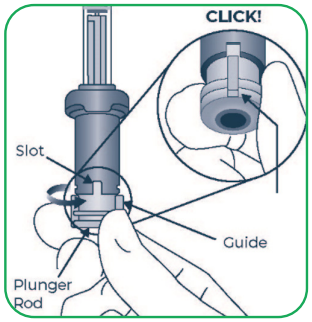


6

Set to dose

Turn the end of the plunger rod 90 degrees clockwise or counterclockwise until the guide of the plunger rod aligns with the slot. You may hear a "click".

Note: Now the device is ready to dose. Do not push the plunger rod before insertion into the eye.



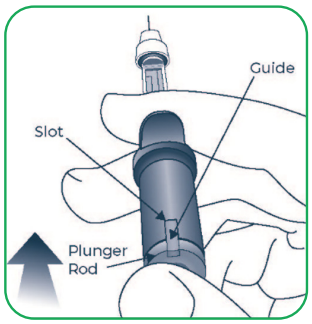
7

Administer the injection

Insert the needle into the ocular injection site.

Inject the solution by pushing in the plunger rod until it stops, i.e. until the guide is completely within the slot. Do not apply additional pressure once the guide is within the slot.

It is normal to see a small amount of residual solution left in the syringe.



8

The pre-filled syringe is for single use in one eye only.

Dispose of any unused medicinal product or waste material in accordance with local regulations.

Vial - EYLEA 2 mg and EYLEA 8 mg, solution for injection

1 Inspect the vial, and remove the vial cap

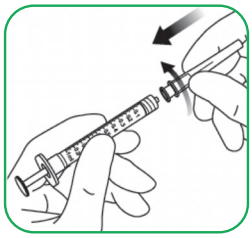


It is important to prepare the syringe with EYLEA from the vial, using aseptic technique. Note in the pictures that darker/grey gloves are not aseptic and white gloves are aseptic.

An assistant should carry out the following steps (assistant is shown with darker gloves in the images): Remove the carton containing the vial from the refrigerator. Let the carton and its contents reach room temperature. Open the carton, remove the vial and place it upright on a flat surface to allow the solution to accumulate at the bottom of the vial. **Check the carton, the vial and label to ensure the correct EYLEA solution is chosen**. The vial should not be placed on an aseptic surface because the outside surface of the vial is not sterile. The inside of the vial is sterile.

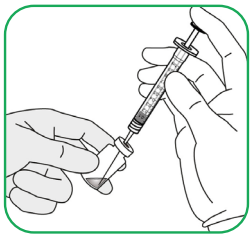
Check that the liquid is at the bottom of the vial. Visually inspect the vial and contents (the liquid). Remove the plastic cap and disinfect the outer part of the rubber vial stopper.

2 Attach the filter needle



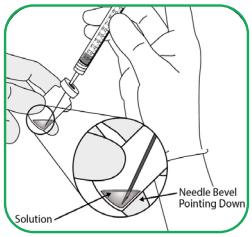
The qualified physician should carry out the remaining steps using sterile technique, including the use of sterile gloves: Using aseptic technique, screw on the 18 G, 5-micron filter needle supplied in the carton to a 1 ml sterile Luer-lock syringe.

3 Insert needle into vial



Insert the filter needle into the centre of the vial stopper until the needle is completely inserted into the vial and the needle tip touches the bottom or bottom edge of the vial.

4 Draw up the solution



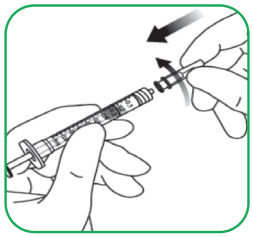
Withdraw all of the EYLEA vial contents slowly into the syringe, keeping the vial in an upright position, slightly inclined to ease complete withdrawal. This helps to prevent air bubbles. To avoid the introduction of air, ensure the bevel of the filter needle is submerged in the liquid. Continue to tilt the vial while withdrawing to allow the liquid to collect to the corner of the vial, keeping the bevel of the filter needle submerged in the liquid. Ensure that the plunger rod is drawn sufficiently back when emptying the vial in order to completely empty the filter needle.

5 Remove the filter needle

Unscrew and properly dispose of the filter needle. **Do not use the filter needle for intravitreal injection.**

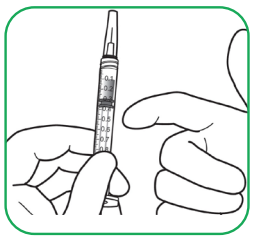
6 Attach the injection needle

Using aseptic technique, **firmly twist a 30 G x ½ inch injection needle** to the Luer-lock syringe tip. Use of a smaller size injection needle (higher gauge) than the 30G x ½ inch needle may result in increased injection forces.



7 Check for air bubbles

Holding the syringe with the needle pointing upwards, visually inspect the contents of the syringe. **Check the solution for bubbles. If bubbles are present, gently tap the syringe with your finger until the bubbles rise to the top.**



8 Eliminate air bubbles and excess drug

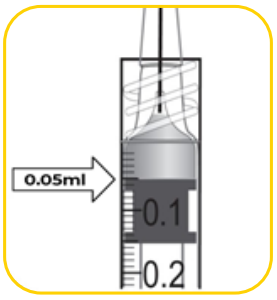
Correct handling of the filled syringe is important in order to avoid the risk of medication errors. This includes removal of the excess volume and air bubbles, in order to avoid overdosing.

Attention! The EYLEA 2 mg dose uses 0.05 ml volume of EYLEA 40 mg/ml solution. The EYLEA 8 mg dose uses 0.07 ml volume of EYLEA 114.3 mg/ml solution.

EYLEA 2 mg dose

Use 0.05 ml volume of EYLEA 2 mg solution (aflibercept 40 mg/ml)

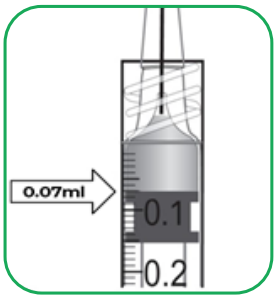
Eliminate all air bubbles and expel excess drug by slowly depressing the plunger rod to align the flat plunger edge with the **0.05 ml line on the syringe for the EYLEA 2 mg vial.**



EYLEA 8 mg dose

Use 0.07 ml volume of EYLEA 8 mg solution (aflibercept 114.3 mg/ml)

Eliminate all air bubbles and expel excess drug by slowly depressing the plunger rod to align the flat plunger edge with the **0.07 ml line on the syringe for the EYLEA 8 mg vial.**



Accurate positioning of the plunger, shown in the diagrams above, is critical. Incorrect plunger positioning can lead to delivering more or less than the recommended dose.

9 **Each vial is for single use in one eye only. Dispose of any unused medicinal product or waste material in accordance with local regulations.**

For further information and additional details on EYLEA, please refer to the Prescribing Information.

Injection Procedure

For further information on intravitreal injection procedure, sterile techniques (including peri-ocular and ocular disinfection) and anaesthesia, please refer to local and/or national clinical guidelines.

1 Administer topical anaesthesia.



2 Apply disinfectant (e.g. 5% povidone iodine solution or equivalent) to the eyelids, eyelid margins and into the conjunctival sac. The disinfectant should be on the surface for the length of time recommended in local practice guidelines.



3 A disinfectant (e.g. 10% povidone iodine solution or equivalent) should also be applied to the periocular skin, eyelids and eyelashes, avoiding extensive pressure to the periocular glands. The disinfectant should be on the surface for the length of time recommended in local practice guidelines.

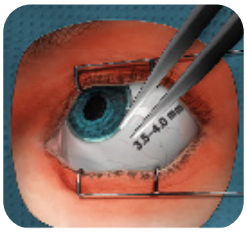


4 Cover with sterile drape and insert sterile lid speculum. A second application of disinfectant, e.g., 5% povidone iodine solution, may be made to the conjunctival sac. Disinfectant should be on the surface for the length of time recommended in local practice guidelines.



5 Tell patient to look away from the injection site.

Position the eye adequately. At an area of 3.5–4.0 mm posterior to the limbus, mark an injection site.



6 Insert the injection needle into the vitreous cavity, avoiding the horizontal meridian and aiming towards the centre of the globe.

Inject the recommended dose, with careful and constant pressure on the plunger. Do not apply additional pressure once the plunger has reached the bottom of the syringe. Do not inject any residual volume remaining in the syringe after the injection.

Use a different scleral site for subsequent injections.



ADDITIONAL INFORMATION

For more information please refer to the Prescribing Information.

Additional information about EYLEA, including the EYLEA Prescriber Video, is also available in the following link and QR code:

https://ophthalmology.bayer.co.il/tools-resources

For any question, please contact Bayer Israel:

36 Hacharash St., Hod Hashron,

Tel: 09-7626700, Fax: 09-7626730

E-mail: dsisrael@bayer.com

This Prescriber Guide was approved according to the guidelines of the Ministry of Health on 06-Jun-2025.

MA-M_AFL-IL-0133-1


EYLEA® 2mg
(aflibercept solution for injection)


EYLEA® 8mg
(aflibercept 114.3mg/mL, solution for injection)