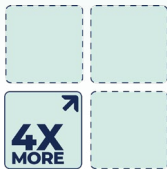


**New increased
treatment area for KLISYRI[®]—**

THE MODERN FACE OF ACTINIC KERATOSIS (AK) FIELD THERAPY

For a larger treatment area—up to 100 cm²

With KLISYRI[®], you have a modern AK management tool at your disposal to help cosmetically conscious patients get the most from facial field therapy.



A **4x increase in treatment area**, allowing you to treat 4 to 12 lesions at a time



Available in convenient, **pre-measured, unit-dose packets** to ensure consistent field-directed dosing over **just 5 days**¹



All with the same **established efficacy and safety** you expect from KLISYRI[®]^{1*}

*The safety of KLISYRI[®] treatment in a 100 cm² treatment field was comparable to previous controlled study results in a 25 cm² treatment field.¹

Prescribe KLISYRI[®] in 350-mg packets

NDC Code: 16110-391-55

(5 unit-dose packets, each containing 350 mg of ointment)



INDICATION

KLISYRI is a microtubule inhibitor indicated for the topical field treatment of actinic keratosis on the face or scalp.

IMPORTANT SAFETY INFORMATION

WARNINGS AND PRECAUTIONS

Ophthalmic Adverse Reactions

KLISYRI may cause eye irritation. Avoid transfer of the drug into the eyes and to the periocular area during and after application. Wash hands immediately after application. If accidental exposure occurs, instruct patient to flush eyes with water and seek medical care as soon as possible.

Please see additional Important Safety Information on next page.

Please click to see full Prescribing Information.

HELPING YOUR PATIENTS ACCESS KLISYRI®



Broad payer coverage

KLISYRI® has **58% of lives covered**
under commercial plans nationwide.²

Cost and savings support

\$25 / \$95

Commercially insured patients using the Almirall Advantage Network may **pay as low as \$25 if covered** by insurance, and **\$95 if not covered***



Patients without (or who opt not to use) commercial insurance coverage can use GoodRx® to **save on their prescription†**



Comprehensive prior authorization support delivered through CoverMyMeds

Cash option available to eligible, insured Medicare Part D patients through Almirall Advantage network pharmacies.‡

Find the nearest in-network pharmacy by visiting www.almiralladvantage.com

*Eligible patients with commercial insurance only (non-government) may pay as low as \$25. Patients who do not have coverage for KLISYRI® under their commercial insurance may pay \$150 at a retail pharmacy or \$95 at a pharmacy within the Almirall Advantage network. Terms and conditions apply. Your available savings may vary and are subject to maximum reimbursement limits.

†GoodRx® is not insurance but may be used instead of insurance.

‡Eligibility criteria and participation terms and conditions apply. Eligible patients must agree to purchase KLISYRI® without using their insurance. Only available at Almirall Advantage Network pharmacies.

IMPORTANT SAFETY INFORMATION (CONTINUED)

WARNINGS AND PRECAUTIONS (CONTINUED)

Local Skin Reactions

Local skin reactions, including severe reactions (erythema, flaking/scaling, crusting, swelling, vesiculation/pustulation, and erosion/ulceration) in the treated area can occur after topical application of KLISYRI. Occlusion after topical application of KLISYRI is more likely to result in irritation. Avoid use until skin is healed from any previous drug, procedure, or surgical treatment.

ADVERSE REACTIONS

The most common adverse reactions (incidence $\geq 2\%$) were local skin reactions, application site pruritus, and application site pain.

Please click to see full [Prescribing Information](#).

REFERENCES: **1.** KLISYRI®. Prescribing information. Almirall, LLC. **2.** Managed Markets Insights & Technology, LLC. June 2024.



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