



LET’S GET THE CONVERSATION STARTED

Here is the Doctor Discussion Guide. Make sure to save this document, print a copy, or email a copy to yourself to take with you to your next appointment to ensure your doctor understands what is most important to you when selecting an HAE treatment.

Answering some of the questions below may help you identify what you are looking for.

What is your current HAE treatment plan?

Notes:

How frequently have I experienced HAE attacks within the past month?

Notes:

What factors are important to me when managing my HAE?

Notes:

What does convenience mean for me in HAE treatment? Fewer HAE attacks or fewer subcutaneous injections?

Notes:

How important is it for me to not have my day-to-day interrupted by an HAE attack?

Notes:

Asking the right questions can also help facilitate the conversation. Some questions to consider asking your doctor about during your next visit are:

- What are the benefits of preventive treatment for HAE?
- Is there a treatment option that can nearly eliminate the use of rescue medication?
- Does my current treatment option address the root cause of HAE?
- Is there an option that can significantly reduce HAE attacks?

Convenience of HAEGARDA

Finding the right therapy matters. **HAEGARDA is the HAE therapy that reduces attacks by 95%.*** As a preventive therapy, HAEGARDA can effectively reduce the number of HAE attacks you experience.

- With HAEGARDA, use of rescue medication was nearly eliminated by 100%†

You should always have HAE rescue medication available at all times in case of a breakthrough attack.

*In the clinical trial, the median reduction of attacks in people receiving HAEGARDA 60 IU/kg vs placebo.
†Median reduction in rescue medication use in patients receiving 60 IU/kg of HAEGARDA vs placebo.

What could your life look like with fewer attacks?

WITH HAEGARDA,
HAE ATTACKS
WERE REDUCED BY



IMPORTANT SAFETY INFORMATION

HAEGARDA®, C1 Esterase Inhibitor Subcutaneous (Human), is an injectable medicine used to prevent swelling and/or painful attacks in patients 6 years of age and older with hereditary angioedema (HAE).

A healthcare professional can teach you (or caregiver) to self-administer HAEGARDA for prophylaxis. Do not use HAEGARDA to treat an acute HAE attack once it starts; work with your physician to plan for attacks if they occur.

Do not use HAEGARDA if you have previously experienced life-threatening immediate hypersensitivity reactions, such as shock, to HAEGARDA or other C1-INH products.

Immediately report any symptoms of allergic reactions to HAEGARDA, including hives, chest tightness, wheezing, difficulty breathing, turning blue, faintness, facial swelling and fast heartbeat.

Before starting HAEGARDA, tell your healthcare provider about all medical conditions you have—including pregnancy or nursing; a history of heart disease or stroke; an indwelling catheter/access device in a vein; or immobilization for a sustained period. Also tell your physician about any other medications you are taking, as some medications, such as birth control pills and certain androgens, can increase risk of clotting problems. High doses of C1-INH have been known to increase the risk of blood clots.

Immediately report to your physician or an emergency room if you have any of the following symptoms of a blood clot: pain or swelling of arm or leg, with warmth or discoloration over the affected area; unexplained shortness of breath; chest pain or discomfort that worsens on deep breathing; rapid pulse; and numbness or weakness on one side of the body.

In clinical studies, the most common side effects reported with HAEGARDA were injection-site reactions (pain, redness, swelling); hypersensitivity (itching and rash), dizziness, and nasal symptoms, including stuffy or runny nose and sneezing. These are not the only side effects possible with HAEGARDA. Tell your healthcare provider about any side effect that bothers you or does not go away.

Because HAEGARDA is made from human blood, the risk that it may transmit infectious agents, including viruses and theoretically, the agents of Creutzfeldt-Jakob Disease (CJD) and its variant form (vCJD), cannot be completely eliminated.

Please see full prescribing information for HAEGARDA, including the patient product information.

You are encouraged to report negative side effects of prescription drugs to the FDA. Visit www.fda.gov/medwatch, or call 1-800-FDA-1088.

You can also report side effects to CSL Behring’s Pharmacovigilance Department at 1-866-915-6958.