



Need lower IOP? Switch or Add

ONCE-DAILY
rocklatan[®]
(netarsudil and latanoprost
ophthalmic solution) 0.02%/0.005%



Consider a **SWITCH** to Rocklatan[®] to maximize IOP reduction with a single drop.^{1,2}

Why SWITCH to Rocklatan[®]?

- Superior IOP reduction vs latanoprost²
- 2 drugs, 1 drop, once a day helps lessen treatment burden, with 1 copay^{1,3}
- Mild, tolerable ocular side effects^{1,4}
- No labeled contraindications¹

SWITCH to Rocklatan[®] for patients who:

- Need to maximize IOP reduction but don't want to add another drop to regimen
- Prefer a simplified drop regimen
- Are burdened by multiple copays

Visit Rocklatan.com/hcp to learn more.

IMPORTANT SAFETY INFORMATION

Contraindications

None.

Warnings and Precautions

- Pigmentation changes
- Eyelash changes
- Intraocular inflammation
- Macular edema
- Herpetic keratitis
- Bacterial keratitis
- Contact lens wear

For full Rocklatan[®] Important Safety Information, see other side.

ONCE-DAILY
rhopressa[®]
(netarsudil ophthalmic
solution) 0.02%



Consider **ADDING** Rhopressa[®] for additional IOP reduction when a PGA isn't enough.⁵

Why ADD Rhopressa[®]?

- Consistent IOP reduction regardless of baseline⁵
- One drop, once a day⁵
- Tolerable ocular side effects^{6,7}
- No labeled contraindications⁵

ADD Rhopressa[®] for patients who:

- Need additional IOP reduction and you prefer to add
- Cannot take a beta-blocker or alpha-agonist due to contraindications
- Cannot take a PGA or are PGA non-responders

Visit Rhopressa.com/hcp to learn more.

IMPORTANT SAFETY INFORMATION

WARNINGS AND PRECAUTIONS

Bacterial Keratitis: There have been reports of bacterial keratitis associated with the use of multiple-dose containers of topical ophthalmic products. These containers had been inadvertently contaminated by patients who, in most cases, had a concurrent corneal disease or a disruption of the ocular epithelial surface.

For full Rhopressa[®] Important Safety Information, see other side.

INDICATIONS

Rocklatan[®] (netarsudil and latanoprost ophthalmic solution) 0.02%/0.005% and Rhopressa[®] (netarsudil ophthalmic solution) 0.02% are approved for the reduction of elevated intraocular pressure (IOP) in patients with open-angle glaucoma or ocular hypertension.

IMPORTANT SAFETY INFORMATION

Contraindications

None.

Warnings and Precautions

- Pigmentation changes
- Herpetic keratitis
- Eyelash changes
- Bacterial keratitis
- Intraocular inflammation
- Contact lens wear
- Macular edema

Adverse reactions

Rocklatan[®]: The most common ocular adverse reaction is conjunctival hyperemia (59%). Five percent of patients discontinued therapy due to conjunctival hyperemia. Other common ocular adverse reactions were: instillation site pain (20%), corneal verticillata (15%), and conjunctival hemorrhage (11%). Eye pruritus, visual acuity reduced, increased lacrimation, instillation site discomfort, and blurred vision were reported in 5-8% of patients.

Netarsudil 0.02%: Instillation site erythema, corneal staining, increased lacrimation and erythema of eyelid.

Latanoprost 0.005%: Foreign body sensation, punctate keratitis, burning and stinging, itching, increased pigmentation of the iris, excessive tearing, eyelid discomfort, dry eye, eye pain, eyelid margin crusting, erythema of the eyelid, upper respiratory tract

Adverse reactions (continued)

infection/nasopharyngitis/influenza, photophobia, eyelid edema, myalgia/arthralgia/back pain, and rash/allergic reaction.

Please visit Rocklatan.com for full Prescribing 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**.

INDICATION

Rocklatan[®] (netarsudil and latanoprost ophthalmic solution) 0.02%/0.005% is approved for the reduction of elevated intraocular pressure (IOP) in patients with open-angle glaucoma or ocular hypertension.

DOSAGE AND ADMINISTRATION

The recommended dosage is one drop in the affected eye(s) once daily in the evening. If one dose is missed, treatment should continue with the next dose in the evening. The dosage of Rocklatan[®] should not exceed once daily. Rocklatan[®] may be used concomitantly with other topical ophthalmic drug products to lower IOP. If more than one topical ophthalmic drug is being used, the drugs should be administered at least five (5) minutes apart.

IMPORTANT SAFETY INFORMATION

WARNINGS AND PRECAUTIONS

Bacterial Keratitis: There have been reports of bacterial keratitis associated with the use of multiple-dose containers of topical ophthalmic products. These containers had been inadvertently contaminated by patients who, in most cases, had a concurrent corneal disease or a disruption of the ocular epithelial surface.

Contact Lenses: Contact lenses should be removed prior to instillation of Rhopressa[®] and may be inserted 15 minutes following its administration.

Adverse reactions: The most common ocular adverse reaction observed in controlled clinical studies with Rhopressa[®] dosed once daily was conjunctival hyperemia, reported in 53% of patients. Six percent of patients discontinued therapy due to conjunctival hyperemia. Other common (approximately 20%) adverse reactions were: corneal verticillata, instillation site pain, and conjunctival hemorrhage. Instillation site erythema, corneal staining, blurred vision, increased lacrimation, erythema of eyelid, and reduced visual acuity were reported in 5-10% of patients.

Adverse reactions (continued)

The corneal verticillata seen in Rhopressa[®]-treated patients were first noted at 4 weeks of daily dosing. This reaction did not result in any apparent visual functional changes. Most corneal verticillata resolved upon discontinuation of treatment.

Please visit Rhopressa.com for full Prescribing 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**.

INDICATION

Rhopressa[®] (netarsudil ophthalmic solution) 0.02% is indicated for the reduction of elevated intraocular pressure in patients with open-angle glaucoma or ocular hypertension.

DOSAGE AND ADMINISTRATION

The recommended dosage is one drop in the affected eye(s) once daily in the evening.

References

1. Rocklatan[®] (netarsudil and latanoprost ophthalmic solution) 0.02%/0.005% Prescribing Information, Aerie Pharmaceuticals, Inc., Irvine, Calif. 2019.
2. Asrani S, McKee H, Scott B, et al. Pooled phase 3 efficacy analysis of a once-daily fixed-dose combination of netarsudil 0.02% and latanoprost 0.005% in ocular hypertension and open-angle glaucoma. Presented at the 13th Biennial Meeting of the European Glaucoma Society, March 2018.
3. Prum B Jr, Rosenberg L, Gedde S, et al. Primary Open-Angle Glaucoma Preferred Practice Pattern guidelines. Ophthalmology. 2016;123(1):P41-P111
4. Data on file, Aerie Pharmaceuticals, Inc.
5. Rhopressa[®] (netarsudil ophthalmic solution) 0.02% Prescribing Information, Aerie Pharmaceuticals, Inc., Irvine, Calif. 2019.
6. Serle JB, Katz LJ, McLaurin E, et al; and ROCKET-1 and ROCKET-2 Study Groups. Two phase 3 clinical trials comparing the safety and efficacy of netarsudil to timolol in patients with elevated intraocular pressure: Rhokinase elevated IOP treatment Trial 1 and 2 (ROCKET-1 and ROCKET-2). *Am J Ophthalmol*. 2018;186:116-127.
7. Khouri AS, Serle JB, Bacharach J, et al; for the ROCKET-4 Study Group. Once-daily netarsudil vs twice-daily timolol in patients with elevated intraocular pressure: the randomized phase 3 ROCKET-4 study. *Am J Ophthalmol*. 2019;204:97-104.