

EHL=extended half-life.

^aEsperoct[®] can be stored at room temperature up to 86 °F for up to 12 months or up to 104 °F for up to 3 months. See Prescribing Information for complete product storage information.

WHAT IS ESPEROCT®?

Esperoct® [antihemophilic factor (recombinant), glycopegylated-exei] is an injectable medicine to treat and prevent or reduce the number of bleeding episodes in people with hemophilia A. Your healthcare provider may give you Esperoct® when you have surgery

• Esperoct® is not used to treat von Willebrand Disease

Please see additional Important Safety Information throughout. Please see Prescribing Information at novo-pi.com/esperoct.pdf.



esperoct[®] antihemophilic factor (recombinant), glycopegylated-exei

Esperoct® has the **highest storage temperature** of **ALL EHL** products





Esperoct® offers **portable** and **flexible storage** across **ALL AGE GROUPS**

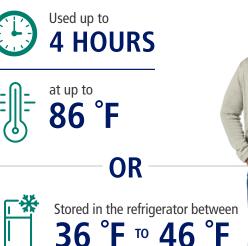
IMPORTANT SAFETY INFORMATION

Who should not use Esperoct®?

• You should not use Esperoct® if you are allergic to factor VIII or any of the other ingredients of Esperoct® or if you are allergic to hamster proteins

A flexibility factor that can fit into your schedule

After reconstitution, Esperoct® can be:



24 HOURS

See Prescribing Information for complete product storage information. Store reconstituted product in vial.

Bradley has severe hemophilia A

Bradley has severe hemophilia A and uses Esperoct[®].



Ready in 3 simple steps



Please note, these are not the complete Esperoct® Instructions for Use. Please see the Instructions for Use provided with the Prescribing Information.

IMPORTANT SAFETY INFORMATION (cont'd)

What is the most important information I need to know about Esperoct®?

• Do not attempt to do an infusion yourself unless you have been taught how by your healthcare provider or hemophilia treatment center



Esperoct® can go with you

Carry your factor and supplies in a portable, reusable kit



See Prescribing Information for complete product storage, reconstitution, and administration information.



Esperoct® has a flexibility factor that fits into your active lifestyle

Please see additional Important Safety Information throughout. Please see Prescribing Information at novo-pi.com/esperoct.pdf.

Esperoct® prophylaxis with simple dosing

Switch to fewer infusions than SHLs with a standard 50 IU/kg dose every 4 days.

No dose adjustment needed. Esperoct® dosing frequency can be individualized to meet your needs





SHL dosing regimens



Esperoct® delivers high factor levels from one dose to the next

Factor levels stay at or above 3% for



Factor activity between 1% to 5% is defined as moderate hemophilia

Factor levels stay at or above 5% for



Factor activity 5% and above is defined as mild hemophilia

Long-term prophylaxis of



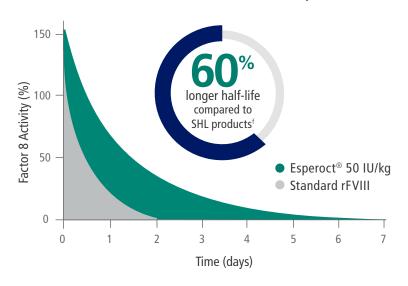
Maintained about 5% trough levels^d (n=53)

novo nordisk[®]

Esperoct® extends half-life beyond the standard

22-hour average half-life in adults^e

Half-life is the time it takes for the level of factor in your blood to fall by 50% (half) after an infusion.



Esperoct® is made by taking the existing Novoeight® (rFVIII) molecule and adding PEGylation technology to extend the half-life.

Novoeight® Antihemophilic Factor (Recombinant)

rFVIII=recombinant Factor 8. SHL=standard half-life.

^eData shown are from 42 adults who received a PK assessment around the first Esperoct[®] 50 IU/kg dose.

IMPORTANT SAFETY INFORMATION (cont'd)

What is the most important information I need to know about Esperoct®? (cont'd)

• Call your healthcare provider right away or get emergency treatment right away if you get any signs of an allergic reaction, such as: hives, chest tightness, wheezing, dizziness, difficulty breathing, and/or swelling of the face

Please see additional Important Safety Information throughout.
Please see Prescribing Information at novo-pi.com/esperoct.pdf.



^aTrough level goal is 1% for prophylaxis. Trough level is when your factor is at the lowest before your next infusion.

^bData shown are from a study where 175 previously treated adolescents and adults received routine prophylaxis with Esperoct® 50 IU/kg every 4 days for 76 weeks. Pre-dose factor activity (trough) levels were evaluated at follow-up visits.

cSteady-state Factor 8 activity levels were estimated in 143 adults and adolescents using pharmacokinetic (PK) modeling.

⁴An analysis was performed on data from a trial of patients 12 years and older with severe hemophilia A. Mean Factor 8 trough levels were measured over time in 53 patients who received Esperoct® 50 IU/kg every 4 days for 6 years or more. Several trough levels were not included in the analysis if they were taken soon after extra dosing to treat a bleed.

Data shown are from a comparison study of 26 previously treated patients (PTPs) 18 years or older who received a 25, 50, or 75 IU/kg dose of their previous SHL product followed by the same dose of Esperoct®. To allow for comparison, all results were adjusted to a 50 IU/kg dose of each product.

Esperoct® Prophylaxis

Stay protected from bleeds

Dose less often^a without sacrificing protection





Overall bleeds per year^b



Joint bleeds per year^b



Spontaneous bleeds per year^b



Traumatic bleeds per year^b

Long-term trial results—up to 6.6 years^c



Overall bleeds per year^c (N=177)



Annual bleeds after the first year in majority of adults and adolescents who completed the entire trial^d

^aCompared to SHL products, 50% fewer infusions when administered every other day and 40% fewer when administered 3x weekly. ^bData shown are from the main phase of a study of 175 previously treated people aged 12 and older with severe hemophilia A who received Esperoct[®] 50 IU/kg every 4 days for 76 weeks. Median annualized bleeding rates are shown.

^cMedian annualized bleeding rate shown is from the main and extension phases of the pivotal clinical trial of previously treated people aged 12 and older with severe hemophilia A who received Esperoct[®] 50 IU/kg every 4 days, for up to 6.6 years.

dBased on a post hoc analysis of patients who completed the entire trial (n=110) who took Esperoct® 50 IU/kg every 4 days for up to 6.6 years. Patients evaluated at Year 2 (n=103), Year 3 (n=66), Year 4 (n=62), and Year 5 (n=62), Year 6 (n=59).



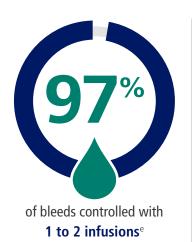
Bradley has hemophilia A

and uses Esperoct®.

Esperoct® On-Demand

Bleed control you can count on

Control for the treatment of bleeding episodes



Dosing for the treatment of bleeding episodes in adults and adolescents

40 IU/kg for minor-to-moderate bleeds

50 IU/kg for major bleeds

For moderate-to-major bleeds, additional dose(s) may be administered every 24 hours.

Tammy has hemophilia A and uses Esperoct®.

Î

^eData shown are from a study where 12 adult and adolescent PTPs with severe hemophilia chose to be treated on demand and received Esperoct[®] for 532 bleeding episodes.

IMPORTANT SAFETY INFORMATION (cont'd) What should I tell my healthcare provider before using Esperoct®?

• Before taking Esperoct[®], you should tell your healthcare provider if you have or have had any medical conditions, take any medicines (including non-prescription medicines and dietary supplements), are nursing, pregnant or planning to become pregnant, or have been told that you have inhibitors to factor VIII

Please see additional Important Safety Information throughout. Please see Prescribing Information at novo-pi.com/esperoct.pdf.

esperoct® antihemophilic factor (recombinant), glycopegylated-exei

Protection that keeps up with children

Esperoct® achieved a



85% half-life compared to SHLb

Factor levels stay at or above 2% for children aged 6 to 11



Factor activity between 1% to 5% is defined as moderate hemophilia

Long-term prophylaxis of



Maintained about 4% trough levels^e (n=54)

^aComparison to prior Factor 8 product was performed at the beginning of the study in previously treated children. The geometric mean terminal half-life in 22 children aged 0 to 11 was 14.3 hours. Esperoct[®] geometric mean terminal half-life was 14.7 hours in 12 children aged 0 to 5 years old and 13.8 hours in 10 children aged 6 to 11 years old.

^bComparison to prior Factor 8 product was performed at the beginning of the study in previously treated children. Esperoct® half-life was 14.7 hours in 12 children aged 0 to 6 years old and 13.8 hours in 10 children aged 6 to 11 years old.

Trough level goal is 1% for prophylaxis. Trough level is when your factor is at the lowest before your next infusion.

^dData shown are from a study where 34 previously treated children received routine prophylaxis with Esperoct[®] 60 IU/kg (50 to 75 IU/kg) twice weekly. Pre-dose factor activity (trough) levels were evaluated at follow-up visits.

ePost hoc analyses were performed on data from a trial of patients aged 11 and under with severe hemophilia A. Mean Factor 8 trough levels were measured over time in 54 patients who received twice-weekly prophylaxis for 5 years or more. Limitations of the analyses include the exclusion of several trough-level data if believed that they were elevated due to dosing to treat a recent bleed.

IMPORTANT SAFETY INFORMATION (cont'd)

What should I tell my healthcare provider before using Esperoct®? (cont'd)

Your body can make antibodies called "inhibitors" against Esperoct®, which may stop Esperoct® from working
properly. Call your healthcare provider right away if your bleeding does not stop after taking Esperoct®

This regimen may be individually adjusted to less or more frequent dosing based on bleeding episodes.

Please see additional Important Safety Information throughout.

Please see Prescribing Information at novo-pi.com/esperoct.pdf.

Simple dosing with a flexibility factor allows for fewer infusions than SHLs



One standard dose makes it easy to switch

65 IU/kg twice weekly

No dose adjustment needed.f

Because Factor 8 products may be cleared from the body faster in children under 12, higher and more frequent dosing may be needed.

43%
FEWER
INFUSIONS
if your child previously
infused every
other day



Fewer infusions per year compared with SHL dosing regimens 33%
FEWER
INFUSIONS
if your child previously
infused 3x/week



Model for illustrative purposes only.

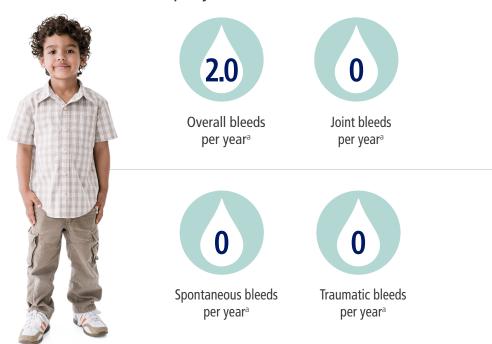
esperoct®

antihemophilic factor (recombinant),
glycopegylated-exei



Reduce bleeding episodes

Low number of bleeds per year for children under 12^a



Model for illustrative purposes only.

^aData shown are from a study of 68 previously treated children (34 aged 0 to 5 years old and 34 aged 6 to 11 years old) who received an average dose of approximately 65 IU/kg twice weekly for 26 weeks. Median annualized bleeding rates are shown.

IMPORTANT SAFETY INFORMATION (cont'd)

What are the possible side effects of Esperoct®?

• Common side effects of Esperoct[®] include rash or itching, and swelling, pain, rash or redness at the location of infusion



Long-term trial results—up to 5.4 years^b





(N=68)





Please see additional Important Safety Information throughout. Please see Prescribing Information at novo-pi.com/esperoct.pdf.

^bMedian annualized bleeding rate shown is from the main and extension phases of the clinical trial in previously treated children with severe hemophilia A, for a median of 5 years.

Based on a post hoc analysis of patients who completed the entire trial who took Esperoct® 60 IU/kg (50 IU/kg to 75 IU/kg) twice weekly for up to 5 years (n=63). Approximately 32% of the patients that participated in both the main and extension phases experienced no bleeding episodes during Year 1, about 50% during Year 2, less than 50% during Year 3, 56% during Year 4, and about 70% during Year 5 had no annual bleeding episodes.

^dA target joint was defined as a single joint with 3 or more bleeding episodes in 6 consecutive months. All baseline target joints reached definition of target joint resolution (if there were no bleeding episodes for 12 consecutive months) in slightly over 2 years of treatment with Esperoct[®]. Twelve patients with 16 documented target joints at baseline participated in the main and extension phases of the clinical trial.

Esperoct® was studied in one of the largest and longest clinical trial programs





Safety proven across 5 clinical studies

- 0 blood clots
- No PEG-related safety concerns
- One PTP with a high-risk gene mutation developed an inhibitor to Factor 8^a
- The development of inhibitor is similar to the reported rate in patients with severe hemophilia A (0.15 per 100 patient years)^b

^aAn 18-year-old African American male developed an inhibitor after 93 infusion days of Esperoct[®]. The inhibitor rose to 13.5 Bethesda units and the patient stopped participation in the study. There was no change in efficacy, and the inhibitor eventually went away on its own (without use of immune tolerance induction therapy).

^bPatient year is the patient experience under treatment of 1 year's duration. For example, 1 patient year is equal to the experience of 2 patients for 6 months, or 12 patients for 1 month each.

IMPORTANT SAFETY INFORMATION (cont'd)

What should I tell my healthcare provider before using Esperoct®? (cont'd)

• Your body can make antibodies called "inhibitors" against Esperoct®, which may stop Esperoct® from working properly. Call your healthcare provider right away if your bleeding does not stop after taking Esperoct®



Patient support with NovoCare[®] (NovoSecure[™])

You may be eligible for:

Free Trial Product Program

Talk to a NovoCare® specialist to find out if you're eligible^a

Product Assistance Program

Apply for the Product Assistance Program by calling 1-844-NOVOSEC (1-844-668-6732) for more information^b

Co-pay Assistance Program

Get help with co-pay costs for Esperoct[®], up to \$12,000^c

Speak with a NovoCare® specialist Visit Novocare.com or call 1-844-NOVOSEC (1-844-668-6732)

^aPatients who have been prescribed a Novo Nordisk hemophilia and rare bleeding disorder product for an FDA-approved indication, and who have commercial insurance, may be eliqible to receive a limited supply of free product. Patients who participate in any government, state, or federally funded medical or prescription benefit programs, including Medicare, Medicaid, Medigap, VA, DOD, and TRICARE, including patients who participate in a managed Medicaid program or have Medicaid as secondary insurance, are not eliqible to receive product support. Product is provided at no cost to the patient or the HCP, is not contingent on any product purchase, and the patient and HCP must not: (1) bill any third party for the free product, or (2) resell the free product. bThe Novo Nordisk Patient Assistance Program (PAP) is administered by NovoCare®. To qualify for the PAP, patients must demonstrate financial need and must have attempted to find alternative reimbursement. Several factors are considered in evaluating financial need, including cost of living, size of household, and burden of total medical expenses. If the applicant qualifies under the PAP quidelines, a limited supply of the requested medication(s) will be shipped to the patient. Patients who qualify for PAP may be eligible to receive the prescribed Novo Nordisk product, for up to 1 year from the approval date. Product limits vary, Novo Nordisk Hemophilia and Rare Bleeding Disorders Copay/Coinsurance Terms and Conditions: Enrolled patients are eligible for up to \$12,000 in co-pay/ coinsurance assistance per calendar year for each NNI hemophilia or rare bleeding disorder product. Assistance is retroactive to 60 days. Patients must be commercially insured and may not be participating in any government, state, or federally funded medical or prescription benefit programs, including Medicare, Medicaid, Medigap, VA, DOD, and TRICARE, including patients who participate in a managed Medicaid program or have Medicaid as secondary insurance. Uninsured, cash-paying patients are not eligible to participate. Patients are eligible to receive co-pay/coinsurance assistance on an annual basis (12 months). Offer good only in the USA, Puerto Rico, Guam, Saipan, and Virgin Islands with participating pharmacies and cannot be redeemed at government-subsidized clinics. Void where taxed, restricted, or prohibited by law, Absent of a change in Massachusetts law, effective July 1, 2019, the Savings Card will no longer be valid for residents of Massachusetts. Patient is responsible for complying with any insurance carrier co-payment disclosure requirements, including disclosing any savings received from this program. Re-confirmation of information may be requested periodically to ensure accuracy of data and compliance with terms. This is not an insurance program. Novo Nordisk reserves the right to rescind, revoke, or amend this offer without notice at any time. Non-medication expenses, such as ancillary supplies or administration-related costs, are not eligible. Must have a current prescription for an FDA-approved indication.

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esperoct® antihemophilic factor (recombinant), glycopegylated-exei

PROTECTION AND FLEXIBILITY ON THE GO^a

ESPEROCT® has a flexibility factor that offers the broadest temperature stability^a and compact packaging for all ages



A flexibility factor that can fit into your schedule

- After reconstitution, Esperoct® can be
 - Used up to 4 hours when stored at up to 86 °F OR
 - Stored in the refrigerator at up to 36 °F to 46 °F for up to 24 hours

Switch to fewer infusions than SHLs with a standard 50 IU/kg dose every 4 days

- 50% fewer infusions for adults and adolescents who previously infused every other day
- 43% fewer infusions if your child previously infused every other day

Portability with compact packaging and easy storage^a For prophylactic and on-demand use across all ages



^aEsperoct[®] can be stored at room temperature up to 86 °F for up to 12 months **or** up to 104 °F for up to 3 months. See Prescribing Information for complete product storage information.

IMPORTANT SAFETY INFORMATION (cont'd) Who should not use Esperoct®?

• You should not use Esperoct® if you are allergic to factor VIII or any of the other ingredients of Esperoct® or if you are allergic to hamster proteins

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