

**\$9 FOR 90 DAYS\***

For adults on maximally tolerated statins with TG  $\geq$ 150 mg/dL and established CVD or diabetes and  $\geq$ 2 CVD risk factors

VASCEPA<sup>®</sup> (icosapent ethyl)  
gives your patients  
**25% added CV protection  
on top of a statin<sup>1</sup>**



\*Savings details for commercially insured patients' offer restrictions on back.

**INDICATIONS AND LIMITATIONS OF USE**

- VASCEPA<sup>®</sup> (icosapent ethyl) is indicated as an adjunct to maximally tolerated statin therapy to reduce the risk of myocardial infarction, stroke, coronary revascularization and unstable angina requiring hospitalization in adult patients with elevated triglyceride (TG) levels ( $\geq$ 150 mg/dL) and established cardiovascular disease or diabetes mellitus and 2 or more additional risk factors for cardiovascular disease
- VASCEPA is indicated as an adjunct to diet to reduce TG levels in adult patients with severe ( $\geq$ 500 mg/dL) hypertriglyceridemia

The effect of VASCEPA on the risk for pancreatitis in patients with severe hypertriglyceridemia has not been determined.

**IMPORTANT SAFETY INFORMATION**

- VASCEPA is contraindicated in patients with known hypersensitivity (e.g., anaphylactic reaction) to VASCEPA or any of its components
- VASCEPA was associated with an increased risk (3% vs 2%) of atrial fibrillation or atrial flutter requiring hospitalization in a double-blind, placebo-controlled trial. The incidence of atrial fibrillation was greater in patients with a previous history of atrial fibrillation or atrial flutter

Please see additional Important Safety Information for VASCEPA inside.  
Please see accompanying full Prescribing Information for VASCEPA or  
go to [www.vascepahcp.com](http://www.vascepahcp.com).

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THE NEXT LEVEL OF HEART PROTECTION

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# VASCEPA is icosapent ethyl (IPE), the **only EPA approved** to reduce CV risk<sup>1,2</sup>

Unlike VASCEPA, Lovaza® (omega-3-acid ethyl esters) contains both EPA and DHA, which may raise LDL-C<sup>1,2</sup>

	VASCEPA <sup>1,3</sup>	Lovaza (and its generics) <sup>2,4-8</sup>
Active ingredients	IPE	Omega-3-acid ethyl esters
Approved for CV risk reduction	✓	
Clinically proven to significantly reduce major adverse cardiovascular events	✓	
Demonstrated lower TG	✓	✓
No demonstrated increase in or recommendation to monitor LDL-C*	✓	
No eructation or taste perversion	✓	

This chart contains FDA-approved prescription product information related to patients with very high triglycerides taking 4 grams per day.<sup>1,2,4-8</sup>

- ▶ 5 trials in the omega-3 class, including ORIGIN, Risk and Prevention Study, OMEGA, ASCEND, and VITAL, that studied fish oil or mixtures of omega-3 fatty acids that include DHA have failed to demonstrate an impact on cardiovascular events<sup>9-13</sup>
- ▶ CV outcomes studies of earlier generation drug therapies, including prescription omega-3 mixture products containing DHA, have failed to demonstrate CV benefit on top of statins<sup>9-13</sup>

## Lovaza is not AB-rated to prescription VASCEPA<sup>14</sup>

EPA=eicosapentaenoic acid.

\*DHA-containing products may raise LDL-C in patients with elevated TG levels.

No head-to-head trials have been conducted between VASCEPA and Lovaza.

Cross-trial comparisons are subject to differences in populations, primary outcomes, and other trial design aspects.

DHA-containing products are not FDA approved for co-administration with statins to affect lipid, lipoprotein, or inflammation parameters with the aim of reducing CV mortality or morbidity.

### IMPORTANT SAFETY INFORMATION (cont'd)

- It is not known whether patients with allergies to fish and/or shellfish are at an increased risk of an allergic reaction to VASCEPA. Patients with such allergies should discontinue VASCEPA if any reactions occur

Please see additional Important Safety Information for VASCEPA throughout. Please see accompanying full Prescribing Information for VASCEPA or go to [www.vascepahcp.com](http://www.vascepahcp.com).

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THE NEXT LEVEL OF HEART PROTECTION

# Fish oil dietary supplements: **Not intended nor proven** to treat, cure, or prevent any disease<sup>15</sup>

When it comes to heart protection, it's important to know how fish oil dietary supplements are different from VASCEPA:

- ▶ **CV outcomes are missing**—They are not required to demonstrate efficacy or safety prior to being marketed, and they have repeatedly failed to demonstrate CV benefit in previous trials<sup>9-11,16</sup>
  - In 2019, the FDA concluded that evidence used to support CV claims for fish oil dietary supplements was inconclusive and highly inconsistent<sup>17</sup>
- ▶ **Rx designation is missing**—They do not have to meet strict FDA standards for prescription drug approval and are not FDA approved to treat any medical conditions<sup>15,16</sup>
- ▶ **Consistent composition is missing**—Fish oil dietary supplements are regulated as food, not drugs, and frequently vary in actual DHA and EPA content and composition<sup>18</sup>
  - Can contain up to 36% saturated fats and oxidized lipids<sup>19-21</sup>
- ▶ **Stability is missing**
  - Omega-3 fatty acids can be easily oxidized or damaged<sup>21</sup>
  - Unlike fish oil dietary supplements, VASCEPA is expertly manufactured and encapsulated to ensure stability<sup>†</sup>
    - Demonstrated multi-year stability with consistent reproducibility

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## Fish oil dietary supplements are not an alternative to VASCEPA<sup>16</sup>

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VASCEPA looks different because it is different

Fish oil dietary supplements contain high saturated fat content<sup>19,20</sup>



VASCEPA is EPA only<sup>†</sup>

<sup>†</sup>Data on file.

### IMPORTANT SAFETY INFORMATION (cont'd)

- VASCEPA was associated with an increased risk (12% vs 10%) of bleeding in a double-blind, placebo-controlled trial. The incidence of bleeding was greater in patients receiving concomitant antithrombotic medications, such as aspirin, clopidogrel or warfarin

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THE NEXT LEVEL OF HEART PROTECTION

# Prescription VASCEPA® delivers proven CV risk reduction<sup>1</sup> at an affordable price

## The VASCEPA Savings Program

The codes below can be used for all your eligible customers

**Pay as little as \$9**  
for 90 days.



Expiration Date: 12/31/2020  
No Activation Required.  
Reimbursement limited to \$150 per month or \$450 on a 90 day fill.

**Vascepa®**  
(icosapent ethyl)

Powered by:  
CHANGE HEALTHCARE  
BIN# 004682  
PCN# CN  
GRP# ECVASCEPA  
ID# 59021139303

Pharmacist and Beneficiary: When you use this card, you are certifying that you have not submitted and will not submit a claim for reimbursement under any Federal, State, or other Governmental programs for this prescription.

Commercially insured patients can pay as little as

# \$9 for 90 days\*

With the VASCEPA Savings Card  
Subject to availability. Restrictions apply.\*

You can download the universal VASCEPA Savings Card at  
[vascepahcp.com/savings](http://vascepahcp.com/savings)<sup>†</sup>

\*Offer Restrictions: May not be used to obtain prescription drugs paid in part by Federal or State Programs including Medicare, Medicaid, Medicare Advantage, Medicare Part D, Tricare, VA. Most eligible, insured patients will pay as little as \$9 of their copay for either each month or a 90 day fill, with a maximum savings of up to \$150 per month or \$450 on a 90 day fill. Not for use by residents of VT, nor medical professionals licensed in VT. This offer is not valid for those patients under 18 years of age or patients whose plans do not permit use of a copay card. Void where prohibited by law, taxed, or restricted. Eligible patients include those who participate in commercial insurance, through a healthcare exchange, or pay cash. Offer good through December 31, 2020

<sup>†</sup>Universal Pharmacy Card (UPC) may be applied for any eligible patient by entering all 4 codes.

### IMPORTANT SAFETY INFORMATION (cont'd)

- Common adverse reactions in the cardiovascular outcomes trial (incidence  $\geq 3\%$  and  $\geq 1\%$  more frequent than placebo): musculoskeletal pain (4% vs 3%), peripheral edema (7% vs 5%), constipation (5% vs 4%), gout (4% vs 3%) and atrial fibrillation (5% vs 4%)
- Common adverse reactions in the hypertriglyceridemia trials (incidence  $\geq 1\%$  more frequent than placebo): arthralgia (2% vs 1%) and oropharyngeal pain (1% vs 0.3%)
- Adverse Events, Product Complaints, or Special Situations may be reported by calling 1-855-VASCEPA or the FDA at 1-800-FDA-1088
- Patients receiving VASCEPA and concomitant anticoagulants and/or anti-platelet agents should be monitored for bleeding

Please see additional Important Safety Information for VASCEPA inside. Please see accompanying full Prescribing Information for VASCEPA or go to [www.vascepahcp.com](http://www.vascepahcp.com). Please see list of references inside the pocket.

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**References:** **1.** VASCEPA [package insert]. Bridgewater, NJ: Amarin Pharma, Inc.; 2019. **2.** Lovaza [package insert]. Research Triangle Park, NC: GlaxoSmithKline; 2019. **3.** Bays HE, Ballantyne CM, Kastelein JJ, Isaacsohn JL, Braeckman RA, Soni PN. Eicosapentaenoic acid ethyl ester (AMR101) therapy in patients with very high triglyceride levels (from the Multi-center, placebo-controlled, Randomized, double-blind, 12-week study with an open-label Extension [MARINE] trial). *Am J Cardiol.* 2011;108(5):682-690. **4.** Megaza [package insert]. Bengaluru, India: Strides Shasun Limited; 2016. **5.** Omega-3-acid ethyl esters [package insert]. Weston, FL: Apotex Corp.; 2019. **6.** Omega-3-acid ethyl esters [package insert]. Bridgewater, NJ: Amneal Pharmaceuticals LLC; 2019. **7.** Omega-3-acid ethyl esters [package insert]. Chestnut Ridge, NY: Par Pharmaceutical, Inc.; 2017. **8.** Omega-3-acid ethyl esters [package insert]. North Wales, PA: Teva Pharmaceuticals USA, Inc.; 2019. **9.** ORIGIN Trial Investigators; Bosch J, Gerstein HC, Dagenais GR, et al. n-3 fatty acids and cardiovascular outcomes in patients with dysglycemia. *N Engl J Med.* 2012;367(4):309-318. **10.** Risk and Prevention Study Collaborative Group. n-3 fatty acids in patients with multiple cardiovascular risk factors. *N Engl J Med.* 2013;368(19):1800-1808. **11.** Rauch B, Schiele R, Schneider S, et al; for the OMEGA Study Group. OMEGA, a randomized, placebo-controlled trial to test the effect of highly purified omega-3 fatty acids on top of modern guideline-adjusted therapy after myocardial infarction. *Circulation.* 2010;122(21):2152-2159. **12.** ASCEND Study Collaborative Group; Bowman L, Mafham M, Wallendszus K, et al. Effects of n-3 Fatty Acid Supplements in Diabetes Mellitus. *N Engl J Med.* 2018;379(16):1540-1550. **13.** Manson JE, Cook NR, Lee IM, et al. Marine n-3 Fatty Acids and Prevention of Cardiovascular Disease and Cancer. *N Engl J Med.* 2019;380(1):23-32. **14.** US Department of Health and Human Services. *Approved Drug Products With Therapeutic Equivalence Evaluations (Orange Book)*. 37th ed. Washington, DC: US Dept of Health and Human Services; 2017. **15.** US Food and Drug Administration. Food facts: Dietary supplements. <https://www.fda.gov/media/79995/download>. Accessed June 11, 2020.

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