

# EXPERT PERSPECTIVES ON VASCEPA® (icosapent ethyl): A NEW ERA IN CARDIOVASCULAR CARE

NOW AVAILABLE ON DEMAND

**Dean Karalis, MD,  
FACC, FNLA**

Cardiologist & Clinical  
Professor of Medicine  
Thomas Jefferson  
University Hospital  
Philadelphia, PA



**Robert Busch, MD,  
FACE**

Director of Clinical Research  
Albany Medical College  
Faculty Practice:  
Community Endocrine Group  
Albany, NY

Hear insights from leading healthcare professionals about the role of VASCEPA® in elevating the standard of cardiovascular care. Available on demand so you can listen anytime, anywhere, at your convenience.

#### To view the presentation:

- Fill out the registration form via the links provided above.
- A confirmation email from [arkadinevents](http://arkadinevents.com) will be sent to the email address entered, which will include a link to view the video. If you do not receive this email, please check your spam folder.
- If you wish to view the video at the same time that you register, please complete the registration and then re-enter your email into the home page.

Funding for this program provided by Amarin. CME credits are not offered.

Amarin policy limits viewing to physicians, NPs, PAs and nurses who support them, pharmacists, and medical students. No other guests, including non-HCP spouses and retired HCPs, are permitted to view the presentation.\*

This invitation is non-transferable.

\*The intended audience for the presentation is healthcare professionals involved in or who have an interest in the treatment of cardiovascular disease. VASCEPA is not approved for pediatric use; therefore, the program is not intended for physicians who primarily treat patients who are under 18. Additionally VASCEPA is not intended for use by ophthalmologists, dermatologists, orthopedists, oncologists, and psychiatrists.

#### Indications and Limitations of Use

VASCEPA 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.

#### Indications and Limitations of Use cont.

- 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.

Please see additional Important Safety Information on the next page. For more information on VASCEPA, including full Prescribing Information, please go to [www.vascepahcp.com](http://www.vascepahcp.com).



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**Vascepa**<sup>®</sup>  
(icosapent ethyl)



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### **Important Safety Information cont.**

- 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.
- 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.
- 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.
- 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 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.

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