# **Press Release**



# Verkazia<sup>™</sup> for the Treatment of Severe Vernal Keratoconjunctivitis is now Publicly Reimbursed in Ontario under the Exceptional Access Program

April 8, 2021, Ontario, Canada – Santen Canada Inc., a subsidiary of Santen Pharmaceutical Co., Ltd. (hereinafter, Santen), a global company focused exclusively on ophthalmology, today announced that Verkazia<sup>TM</sup> (cyclosporine topical ophthalmic emulsion 0.1% w/v) eye drops for the treatment of severe vernal keratoconjunctivitis (VKC) is now publicly reimbursed in Ontario through the Exceptional Access Program (EAP), for eligible patients who meet specific clinical criteria.

Verkazia was approved for the treatment of severe vernal keratoconjunctivitis in children from 4 years of age through adolescence by Health Canada in 2018.<sup>1</sup>

"Santen is pleased to see Verkazia reimbursed for patients living with severe VKC in Ontario, where the patients meet specific clinical criteria under the EAP", said Carol Stiff, Head of Santen Canada. "As a company dedicated to Ophthalmology, we aim to reduce the loss of social and economic opportunities for people around the world due to eye conditions and we hope this decision will help provide more access to this underserved population of Canadians." Santen is continuing to have discussions with other provinces, territories and federal agencies regarding the listing of Verkazia under publicly funded drug programs.

## About Vernal Keratoconjunctivitis (VKC)

VKC is a rare and recurrent allergic eye condition, most common in children and adolescents, that causes severe inflammation of the surface of the eye. The main symptoms of VKC – light sensitivity, tearing, itching, and mucous discharge – can prevent those affected from participating in everyday activities. <sup>2,3,4</sup> Approximately one-third of VKC cases are considered severe, and without adequate treatment may result in corneal ulcers and even vision loss. <sup>5</sup>

#### About Verkazia

Verkazia cyclosporine 0.1% topical ophthalmic emulsion is indicated for treatment of severe vernal keratoconjunctivitis in children from 4 years of age through adolescence. The recommended treatment regimen approved by Health Canada is one drop of Verkazia 4 times a day (morning, noon, afternoon and evening) to be applied to each affected eye. The treatment should be discontinued if no improvement in signs and symptoms of Vernal Keratoconjunctivitis is observed. The treatment can be maintained at the recommended dose or decreased to one drop twice daily once adequate control of signs and symptoms is achieved. Treatment should be discontinued after signs and symptoms are resolved and reinitiated upon their recurrence.

### **About Santen**

As a specialized company dedicated to ophthalmology, Santen carries out research, development, marketing, and sales of pharmaceuticals, over-the-counter products, and medical devices. Santen is the market leader for prescription ophthalmic pharmaceuticals in Japan and its products now reach patients in over 60 countries. With scientific knowledge and organizational capabilities nurtured over a 130-year history, Santen provides products and services to contribute to the well-being of patients, their loved ones and consequently to society. For more information, please visit Santen's websites <a href="www.santencanada.ca">www.santenusa.com</a> (North America headquarters).

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<sup>&</sup>lt;sup>1</sup> Verkazia<sup>TM</sup> (cyclosporine topical ophthalmic emulsion 0.1% w/v) Product Monograph. Santen Incorporated. December 21, 2018.

<sup>&</sup>lt;sup>2</sup> Kumar S. Vernal keratoconjunctivitis: a major review. Acta Ophthalmol 2009;87:133-147

<sup>&</sup>lt;sup>3</sup> Leonardi A. Management of vernal keratoconjunctivitis. Ophthalmol Ther. 2013;2:73e88

<sup>&</sup>lt;sup>4</sup> Sacchetti M, et al. Development and testing of quality of life in children with vernal keratoconjunctivitis questionnaire. Am J Ophthalmol 2007;144:557-563

<sup>&</sup>lt;sup>5</sup> Bremond-Gignac D, et al. Prevalence of vernal keratoconjunctivitis: a rare disease? Br J Ophthalmol 2008;92:1097-1102