

A treatment designed for the complexities of atopic dermatitis

- Atopic dermatitis is a complex condition resulting from a range of inflammatory processes^{1,2}
- Each pet can have their own unique set of triggers and symptoms that may go far beyond itch^{1,2}
- Atopica has a broad mode of action, that works to control itch and inflammation,^{7,12,20} making it an important option in your long-term treatment of atopic dermatitis



Atopica is also licensed for use in cats with allergic dermatitis

Prescribe Atopica to deliver long-term treatment of inflammation as well as itch^{5,7,8,20}

References

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Atopica contains Cyclosporine. Legal category POM-V (UK). Further information is available from the Summary of Product Characteristics or datasheet. Advice should always be sought from the medicine prescriber. Information on this veterinary medicinal product is available on the website of the Veterinary Medicines Agency <https://www.vmd.defra.gov.uk>
For further information, call Elanco Animal Health on +44 (0)1256 353131 or write to: Elanco UK AH limited, Form 2, Bartley Way, Bartley Wood Business Park, Hook, RG27 9XA. Use medicines responsibly www.noah.co.uk/ responsible (UK).
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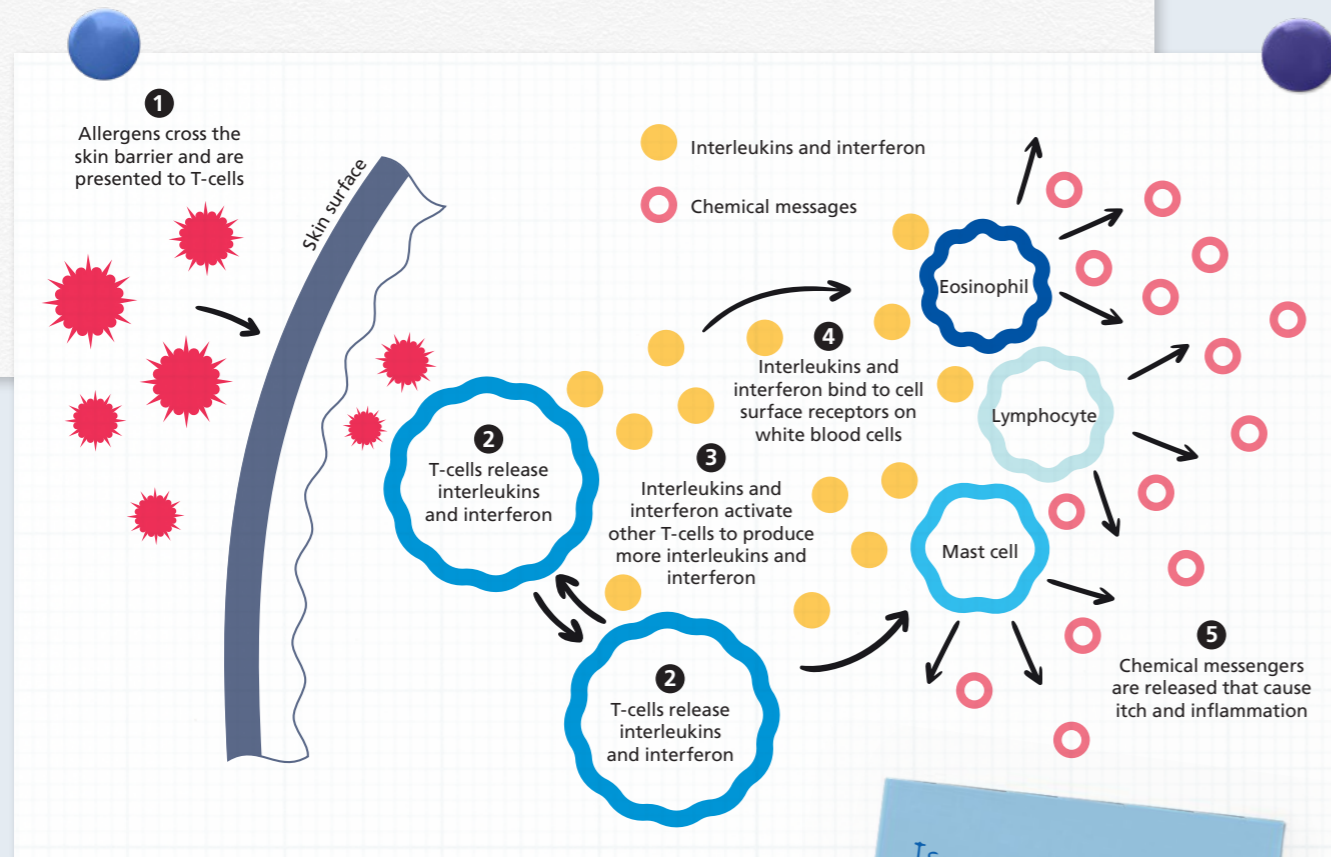
Atopic dermatitis is as individual as your patients

Choose Atopica to treat them beyond the itch



Atopic dermatitis is a complex condition^{1,2}

Atopic dermatitis is the result of a **complex immunological cascade** arising from the interplay of pro-inflammatory cells and mediators including antibodies, antigen-presenting cells, T lymphocytes, eosinophils, and mast cells^{1,3}



Adapted from references 1, 4, and 5

Is your current treatment addressing the complexities of atopic dermatitis?

Each case has its own unique pattern of symptoms, severities and triggers^{1,2}

- Clinical signs can differ between dogs and over time, with some experiencing **skin lesions that go beyond a frustrating itch²**
- Can be caused by genetic susceptibility, e.g. certain dog breeds, and environmental triggers, e.g. house dust and storage mites, pollen and mould spores^{1,2,6}
- Treatment requires long-term commitment

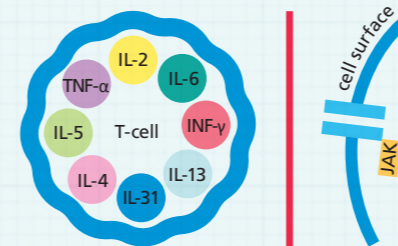
Atopica has a broad mode of action that addresses more than the itch^{7,8}

Unlike treatments with narrow modes of action, Atopica works early in the immune response to:^{5,8-10}

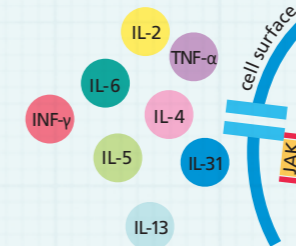
- Regulate the immune response⁸ to manage the allergy at the source, rather than just the symptomatic itch⁵
- Address several underlying inflammatory processes involved in atopic dermatitis by reducing the activity of pro-inflammatory cells and mediators at the site of inflammation^{5,8}

The broad mode of action of Atopica allows it to manage atopic dermatitis beyond the itch^{3,7,8}

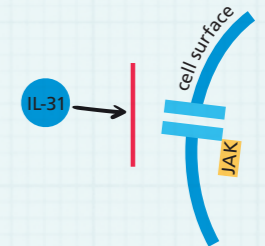
Atopica acts on T-cells, inhibiting the release of several cytokines and preventing their inflammatory actions later in the immune response



Oclacitinib has a semi-narrow MoA that blocks the activity of JAK enzyme attached to cellular cytokine receptors. Cytokines are released from T-cells and bind to receptors, but are unable to exert their effects



Lokivetmab has a narrow MoA that specifically targets IL-31 before it binds to the receptor



Cytokines that use receptors not mediated by the JAK enzyme are still able to exert their inflammatory actions

Lokivetmab does not prevent other cytokines from binding to the receptor and causing further inflammatory actions

Broad MoA

Narrow MoA

Therapy Target

Adapted from references 5 and 8-11
IL, interleukin; JAK, Janus kinase; MoA, mode of action.

Atopica treats beyond the itch by targeting inflammation at its source

Atopica is proven to significantly relieve itch and reduce skin lesions in dogs^{1,12}

In a study of 91 client-owned dogs with atopic dermatitis, who were treated with Atopica vs. placebo:¹

- There was a **67% reduction in skin lesion score** with Atopica at Day 42*
- A marked reduction in skin lesion score was seen **as early as Day 10**[†]
- **More than 7 out of 10 dogs** showed $\geq 50\%$ improvement in the skin lesion score at Day 42[‡]
- Skin lesion score evaluated **erythema** (a marker of acute skin inflammation), **lichenification** (a sign of chronic cutaneous inflammation), and **excoriations** (a sign of pruritus)[§]

In a study of 268 dogs with atopic dermatitis that were treated with Atopica:¹²

- There was a **76% reduction in itch severity scores** over 4 weeks[§]
- Alopecia was significantly improved over 4 weeks while remaining unchanged in dogs receiving placebo ($p < 0.001$)

Atopica treats beyond the itch and may also improve allergic otitis externa, something that can be triggered by atopic dermatitis^{13,14}

* 67% (95% CI: 53–78%) reduction in CADESI scores with Atopica vs. 34% (95% CI: 14%–50%) reduction with placebo.

† The mean percentage reduction in CADESI skin lesion scores was greater for dogs given Atopica than for dogs given placebo.

‡ $\geq 50\%$ improvement observed in 22/31 (71%) dogs in the Atopica group vs. 11/30 (37%) given placebo, $p = 0.002$.

§ Pruritus severity at enrolment was scored as 4 or 5 in 87/130 (67%) dogs in the Atopica group and 87/132 (66%) the control group.

After 4 weeks, proportions were 21/130 (16%) dogs in the Atopica group vs. 81/132 (61%) in the control group.

CADESI, canine atopic dermatitis extent and severity index.

Atopica delivers lasting results that vets value^{12,15}

Atopica clinical trials included dogs treated for 6 weeks¹ and for 16 weeks at full or reduced dose as determined by clinical need¹²

- Pruritus score, alopecia score, and skin lesion score continued to improve over the entire 16-week study period¹²



Atopica has a long track record of delivering a positive experience for vets¹⁵

Well-tolerated long-term control of atopic dermatitis^{7,12}

- Side effects are generally mild and transient, and do not usually require cessation of treatment⁷
 - In the clinical field study, gastrointestinal symptoms (vomiting and diarrhea) were the most common adverse reactions and mostly resolved spontaneously⁷
- No clinically significant effects on vital organs at up to 9x the dose for 1 year in dogs¹⁶



Atopica is an effective long-term treatment,¹² without the potential side effects of steroids¹⁵

Atopica offers flexible treatment for individual dogs

Tapering Atopica allows you to maintain therapeutic effect with reduced dosing frequency and cost in the majority of dogs^{7,12,15}



- Up to 68% of dogs gain long-term relief with a tapered dose of Atopica^{12,15}
- A reduced dosing frequency is easier for owners to administer, and results in increased compliance¹⁷

Atopica offers the option to combine initial therapy with prednisolone or oclacitinib^{18,19}

- Patients treated with Atopica plus short-term, tapered prednisolone showed **significant improvement in itch and overall clinical response as early as 3 or 4 days** after initiation of therapy¹⁸
- Co-administration of Atopica and oclacitinib was well tolerated over a 3-week period¹⁹



Atopica offers proven efficacy and good tolerability in cats with allergic dermatitis

Proven to relieve itch and reduce skin lesions in cats^{21,22}

Atopica is the only licensed non-steroid for the treatment of allergic dermatitis in cats²⁰

- In a field study of 88 cats with feline hypersensitivity dermatitis, treated with Atopica for 4 weeks:
 - The total **lesion score improved by 69%***²³
 - The **owner-assessed pruritus score improved by 61%** ($p < 0.0001$)^{†23}
 - 65% of cats were grooming normally or grooming but being calm at the end of the study²³

Allows for dose tapering in most cats²³

- Up to 70% cats gain long-term relief with a tapered dose of Atopica
 - tapered to every other day or twice weekly²³

Well-tolerated with generally mild side effects^{20,24}

- Side effects are generally mild and transient, and do not usually require cessation of treatment²⁰
- No clinically significant effects on vital organs were observed at up to 5x the approved dose for 6 months²⁴

Highly rated by both vets and owners^{23,25}

- Vets rated the overall efficacy of Atopica as excellent or good in 73% of cats²³
- Pet owners considered Atopica to be effective in 79% of cases, vs. only 26% of cases in the placebo group²⁵



* From inclusion in Phase 1 to week 4 in Phase 2, the mean (\pm SD) TLS decreased from 7.31 (\pm 3.52) to 2.28 (\pm 2.70), an improvement of 69% over Phase 1 baseline.
† The mean Owner-assessed Pruritus Score improved ($p < 0.0001$) by 61% by week 4.