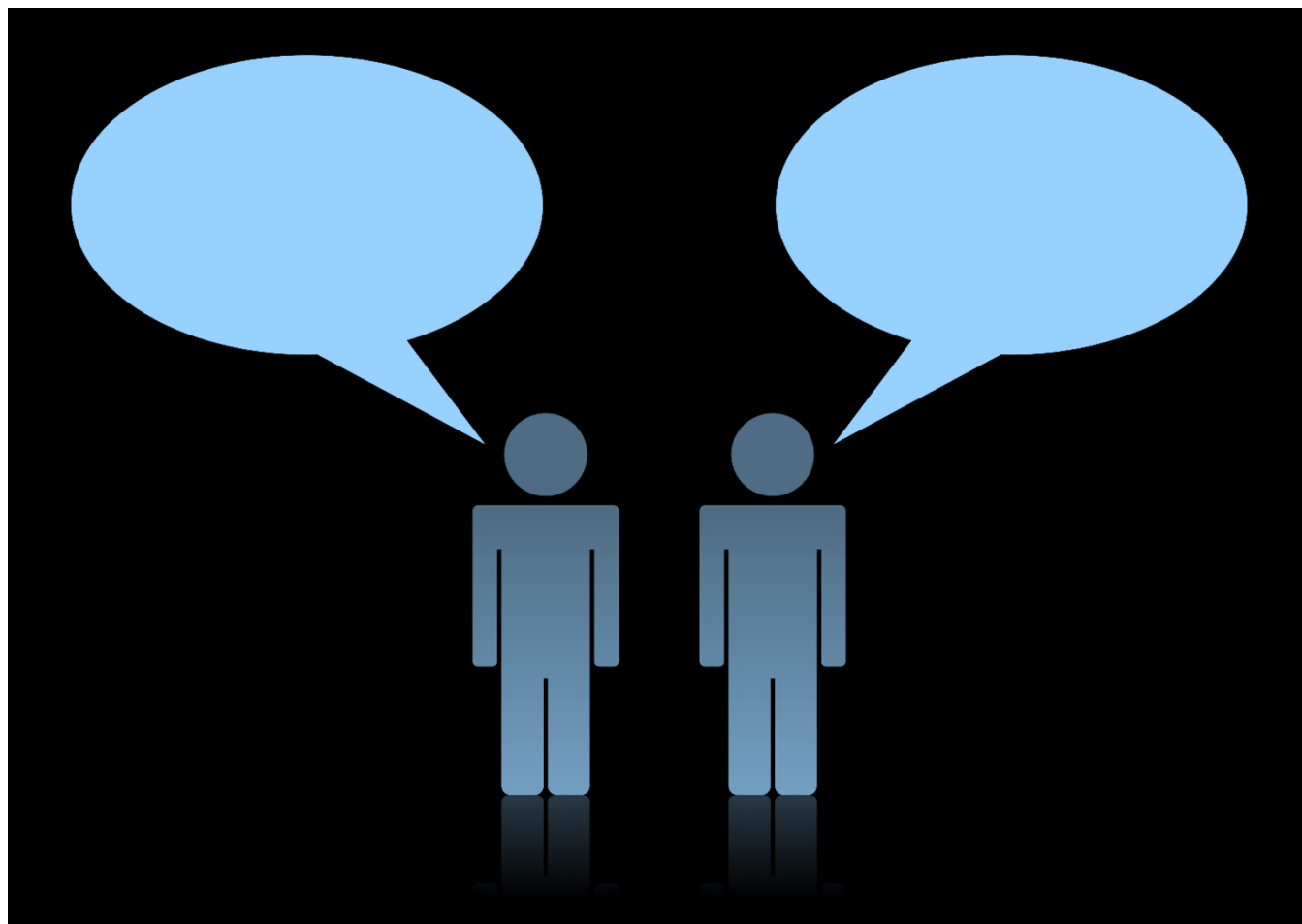


CYSVIEW[®]
Hexaminolevulinate HCl



Communication Toolkit



THE
BLADDER CANCER
COMPANY

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1. Welcome

Congratulations on offering Blue Light Cystoscopy with Cysview to your bladder cancer patients! We know that your facility's investment in helping these patients will save a lot of bladders and even lives.

It's important that you spread the word about its availability, so as many bladder cancer patients as possible can get the critical care they need... and come to your facility to get it.

This Communication Toolkit is designed to help you use a variety of different methods to share information about Blue Light Cystoscopy with Cysview at your facility. You are invited to copy and paste the templates provided in this Toolkit and make them your own on facility stationery; or you can simply use these suggestions as a guide to create your own unique marketing program. Either way, we on the Cysview U.S. Marketing Team are available to provide assistance and support as needed.

We hope you find this Toolkit useful in some way.

Please contact us through your local Photocure/Cysview contact person or directly using the contact information below.

Sincerely,

Jo Elynn Cook
North America Marketing
+1 (609) 908-0993

Email us: Marketing@Photocure.com

Blue Light Cystoscopy (BLC®) with Cysview® Overview

Cysview® (hexaminolevulinate HCl) is the only FDA-approved agent for use in Blue Light Cystoscopy. It is an optical imaging agent indicated for the detection of non-muscle invasive bladder cancer, including carcinoma in situ (CIS), in patients:

- suspected or known to have lesion(s) based on a prior cystoscopy or
- undergoing surveillance cystoscopy for carcinoma of the bladder.

Cysview makes tumor cells glow bright pink in blue light, but it is not a dye. It drives increased production of a natural compound inside cells. Unhealthy cells do not process out the compound as quickly as healthy cells; the resulting accumulation creates a pink glow in blue light.

During a standard cystoscopy procedure, a healthcare professional examines the bladder using regular white light. During a Blue Light Cystoscopy, the HCP uses both white and blue light. However, the blue light is only effective if Cysview has been instilled in the patient's bladder at least one hour before the procedure.

In the US, Cysview is indicated for use only with the KARL STORZ D-Light C Photodynamic Diagnostic (PDD) system.

Globally, hexaminolevulinate HCl has been used in more than a half-million patients.

Important Risk & Safety Information

Cysview® (hexaminolevulinate HCl) is not a replacement for random bladder biopsies or other procedures used in the detection of bladder cancer.

Anaphylactoid shock, hypersensitivity reactions, bladder pain, bladder inflammation (cystitis), and abnormal urine tests have been reported after administration of Cysview. The most common adverse reactions seen in clinical trials were bladder spasm, trouble urinating, discomfort when urinating, frequent urination, blood in the urine, and bladder pain.

Cysview should not be used in patients with large amounts of blood in their urine, any known allergy to Cysview or any derivative of aminolevulinic acid, or porphyria, a condition that means you already have high levels of porphyrins in your body. No specific drug interaction studies have been performed.

Introduction to this Educational Resource

This Communication Toolkit is designed to help you publicize the availability of Blue Light Cystoscopy with Cysview to a variety of audiences who will find this news relevant – and even life-changing.

While the information in this Toolkit can be used by anyone, it is organized by different user types to create greater relevance for each user.

Feel free to explore all the resources available or simply jump to the section that best matches your situation. Information for:

- [Marketing Personnel introducing the availability of BLC with Cysview](#)
- [Marketing Personnel promoting the availability of BLC with Cysview](#)
- [Individual urologists who want to promote their use of BLC with Cysview](#)
- [Anyone who would like help and support from the Cysview Marketing Team](#)

Available templates are written from two different perspectives, when appropriate:

1. Introducing the availability of BLC with Cysview
2. Promoting the availability of BLC with Cysview

1. Information for Marketing Personnel – Introducing the Availability of BLC® with Cysview®

Educating Local Healthcare Professionals

Set yourself up for referrals

One of the first steps you probably want to take is letting your local primary care physicians and other referring physicians know that Blue Light Cystoscopy with Cysview is now available at your facility. You want to encourage their referrals.

See [available resources for educating local healthcare professionals](#)

Building Community Awareness

Attract patients directly and through their influencers

After you've informed the local healthcare community, then you probably want to let everyone else in your vicinity know about your new medical offering. You want anyone who hears the words *bladder cancer* to think of your facility for state-of-the-art diagnosis, treatment, and care.

See [tips and available resources for building community awareness](#)

A community awareness event also presents a perfect opportunity to approach your local media.

See the [Media Relations Basics](#) section of this Toolkit for tips and resources.

Educating Patients

Create educated patients that will seek out your facility for their care

In your communication efforts directed to patients, you can include information about the BLC with Cysview procedure. It will be important for current and potential patients to understand how it works and its benefits. It will also be worthwhile to continue to remind them that your facility is the one providing this valuable option for their care.

See [tips and available resources for educating patients](#)

2. Information for Marketing Personnel – Promoting the Availability of BLC® with Cysview®

Educating Local Healthcare Professionals

Reminding for referrals

You want to encourage referrals from the primary care physicians and other physicians in your area when they have patients who might be appropriate for Blue Light Cystoscopy with Cysview. Schedule and send out periodic reminders to keep this topic top-of-mind so they are on the lookout for opportunities to send the right patients to your facility.

See [available resources for educating local healthcare professionals](#)

Building Community Awareness

Attract patients directly and through their influencers

In addition to reminding the local healthcare community, you probably want to remind everyone else in your vicinity as well. Find regular opportunities to remind the community about this remarkable medical offering at your facility. You want anyone who hears the words *bladder cancer* to think of your facility for state-of-the-art diagnosis, treatment, and care.

See [tips and available resources for building community awareness](#)

A community awareness event also presents a perfect opportunity to approach your local media.

See the [Media Relations Basics](#) section of this Toolkit for tips and resources.

Educating Patients

Create educated patients that will seek out your facility for their care

In your communication efforts directed to patients, you can include information about the BLC with Cysview procedure. It will be important for current and potential patients to understand how it works and its benefits. It will also be worthwhile to continue to remind them that your facility is the one providing this valuable option for their care.

See [tips and available resources for educating patients](#)

3. For Marketing Depts – Tips & Overview of Available Resources

Available resources for educating local healthcare professionals

You can copy and paste the content from the template onto your own letterhead and personalize the content for your facility; or use it as a guide to create something original on your own. Fact Sheets are designed to be distributed as-is or feel free to replicate them with your own branding.

- Introduction Letter Template
 - Can be emailed or mailed
 - Introduces Blue Light Cystoscopy with Cysview
 - Explains how Cysview works
 - Encourages HCPs to refer appropriate patients to undergo the procedure at your institution
 - Invites them to visit your facility to see it in action

Select a version:

- [Introducing the availability of BLC with Cysview](#)
 - [Promoting the availability of BLC with Cysview](#)
- [Bladder Cancer Fact Sheet](#)
 - [Blue Light Cystoscopy with Cysview Fact Sheet](#)

Tips and available resources for building community awareness

Reaching the community

Common ways to spread the news are:

- Paid advertisements – print, digital, outdoor, transit
- Internal promotion using posters and other signage in your facility
- Community events
 - At local health fairs or community events of your own:
 - Discuss the risk factors associated with bladder cancer
 - Feature your expert urology HCPs talking about medical advances, in particular, Blue Light Cystoscopy with Cysview

Available resources

You can copy and paste the content from the template onto your own email template and personalize the content for your facility; or use it as a guide to create something original on your own. Fact Sheets are designed to be distributed as-is or feel free to replicate them with your own branding.

- Examples of [paid advertisement concepts](#)

- ["BLC with Cysview Available Here" Poster](#)
 - Available in wall size and tabletop size
 - Intended to be displayed where everyone will see it
 - Reinforces your commitment to this patient population and the latest technology
 - Creates general awareness so everyone who sees the poster can help spread the word
 - Printed copies can be requested. See our [Contact Information](#).

 - Event Email Templates
 - Intended to be emailed
 - Introduces Blue Light Cystoscopy with Cysview
 - Explains how Cysview works
 - Encourages HCPs to refer appropriate patients to undergo the procedure at your institution
 - Invites them to visit your facility to see it in action
- Select a version:
- [Introducing the availability of BLC with Cysview](#)
 - [Promoting the availability of BLC with Cysview](#)
- [Bladder Cancer Fact Sheet](#)

 - [Blue Light Cystoscopy with Cysview Fact Sheet](#)

Tips and available resources for educating patients

In addition to using the available resources below, these are other ways you can incorporate promotion of BLC with Cysview into your patient (and community) marketing programs:

- Include one or more patient stories on your website and/or in your patient newsletter; see what's available at [Cysview.com](#)
- Include a story about BLC with Cysview in any external publications you share with patients and/or your community
- Partner with your local chapter of the Bladder Cancer Advocacy Network to develop awareness programs and campaigns ([www.BCAN.org](#))

Consider implementing or facilitating a patient follow-up program that helps you gather patient stories and gives you an opportunity to ask patients to help spread the word about BLC with Cysview at your facility to other bladder cancer patients.

Available resources

You can copy and paste the content from these documents onto your own templates and personalize the content for your facility; or use them as guides to create something original on your own. The brochure and poster are designed to be used as-is. You can reach out to us to request printed copies. See our [Contact Information](#).

- Patient Email Template
 - Intended to be emailed
 - Introduces Blue Light Cystoscopy with Cysview
 - Encourages patients to make an appointment and learn more
- Select a version:
 - [Introducing the availability of BLC with Cysview](#)
 - [Promoting the availability of BLC with Cysview](#)
- [Copy for Patient Newsletters](#)
 - Provided as content to be used in its entirety or in parts
 - Discusses Blue Light Cystoscopy with Cysview
 - Includes a quote that can be attributed to one of your urologists
 - Summarizes the value to patients
- [Bladder Cancer Fact Sheet](#)
- [Blue Light Cystoscopy with Cysview Fact Sheet](#)
- [Patient-focused Slide Presentation](#)
 - Entitled, “What You Need to Know About Bladder Cancer”
 - Intended to aid in patient education discussions where a slide deck could be helpful
 - Available for download from [Cysview.com](#)
- [Patient Brochure](#)
 - Entitled, “Understanding Blue Light Cystoscopy with Cysview for Detection of Bladder Cancer: A Patient Guide”
 - Explains the BLC with Cysview procedure and what to expect
 - Includes side-by-side white light and blue light images
 - Printed copies can be requested. See our [Contact Information](#).
- [Website Content](#)
 - Provided as content to be used on your facility’s website in its entirety or in parts
 - [SEO keywords](#) are also provided in this Toolkit
- Social media posts and shares
 - Incorporate this topic into your social media content plan
 - Feature patient stories and remarkable case images (with patient permission)
 - Share blinded anecdotes and urologist quotes
 - Report on the number of cases each week or month
 - Create an awareness/education campaign for Bladder Cancer Awareness Month in May; feel free to use these [educational social media posts](#)
 - Follow social media accounts and share posts that are relevant for your audiences:
 - Cysview: [Facebook](#), [Twitter](#)
 - Bladder Cancer Advocacy Network (BCAN):
 - <https://www.facebook.com/BladderCancer/>
 - [@BladderCancerUS](#)

Media Relations Basics

Share your story with the folks whose job it is to keep your community informed

You have an exciting story to tell -- and, in most cases, you are one of very few (if any) facilities in your community to offer Blue Light Cystoscopy with Cysview! News of the availability of this technology at your location is a terrific opportunity for both you and reporters in your area.

Whether you already have contacts at your local media outlets or not, the action steps are essentially the same. The only difference is that if you don't know your local reporters, you need to identify them in order to disseminate your news.

Core story elements

Before you reach out to any reporters, first develop the core media materials to support your efforts. This Toolkit offers these effective tools:

- Press release
 - Select a version:
 - [Introducing the availability of BLC with Cysview](#)
 - [Promoting the availability of BLC with Cysview](#)
 - [Promoting the addition of flexible technology for BLC with Cysview](#)
 - [Bladder Cancer](#) and [Cysview](#) Fact Sheets
 - [Key talking points \(FAQs\)](#)

In addition, identify story angles that could make your story personal or timely for reporters. Ideas include:

- A patient's firsthand account of the BLC with Cysview experience (be sure to secure the proper written patient consent first)
- A community awareness event, such as offering a free lecture on bladder cancer or doing something for National Bladder Cancer Awareness Month in May.

Your contact list

Ideally, you'll want to target health and medical editors and reporters at both print and online media outlets that cover news in your geographic area. Identify how each one prefers to receive news-related information – by phone, email, or fax – and be sure to share your information based on recipient preference. If you do not hear anything based on your initial phone call, email, or fax, definitely reach out by phone as a follow-up to increase your chances of generating attention to your message. Begin your outreach as soon as you can because reporters often work on stories several weeks before a deadline.

For events, share the details with Community Calendar and Event News pages well in advance. Also, if you would like journalists to attend, reach out to your contacts in the week leading up to the event; preferably after having already sent them a press release earlier and having followed up by phone.

Your spokespeople

The best way to gain media interest in your story is to make it locally relevant. These are the people who should be prepared to speak with the media about Blue Light Cystoscopy with Cysview at your facility.

- At least one of your facility's urologists who is using BLC with Cysview
- A patient who has undergone the BLC with Cysview procedure at your facility
- A facility executive or manager who can speak on the topic: CEO, medical director, department head, or another administrator

You should prepare the spokespeople in advance of any media interviews. Training areas include:

- Helping them anticipate what questions they might be asked so they can prepare and practice articulate responses
- Reminding them to use common terminology rather than medical jargon
- Coaching on how to handle themselves physically if the interview is being video recorded (e.g., where to look, what to do with their hands, how to sit or stand, etc.)

Distributing Materials and Media Relations

When your core media materials are complete – on your institution's letterhead and approved by all the appropriate people at your facility – you're ready to reach out to the media. Send out the press release, ideally with a photograph to increase the chances for the story to be picked up.

Photocure provides various photos that you are permitted to use. If you decide to take your own photos be sure to have proper written consent that authorizes your use of the photos for promotional purposes.

As part of your press release and follow-up efforts, you should consider offering reporters a first-hand look at how Blue Light Cystoscopy with Cysview works by inviting them to your facility. If they accept, you probably will want to include your physician expert in the guided tour.

It is always gratifying when a media outlet reports on your story. After the story appears, send the editor/producer and reporter a thank-you note. This will help you develop an ongoing relationship that will be helpful for future news announcements coming from your facility.

4. For individual HCPs Promoting the availability of BLC® with Cysview®

If you would like to promote your personal use of Blue Light Cystoscopy with Cysview, this section is for you. Here are some basic activities you can implement with or without help from the Cysview Marketing Team.

Your Website

Add copy to your website to show that your practice offers this important technology. Most likely it would be appropriate in your Services section.

For bladder cancer patients, we offer Blue Light Cystoscopy with Cysview. This state-of-the-art technology makes bladder tumors glow bright pink in blue light. As a result, your urologist can see them better and more accurately remove, identify and manage any cancer.

Or create an entire page dedicated to the care and treatment of bladder cancer, featuring Cysview information. See the [Web Page Template](#) in the appendix.

Staff Bios Page

If your website includes bios of different healthcare professionals in your practice, include mention of whether someone performs or supports Blue Light Cystoscopy with Cysview.

Depending on the amount of emphasis you want to place on this service, you could include quotes from different doctors and staff members explaining why they find this procedure and the technology so valuable.

Words from Patients

Patient stories and testimonials make a large difference in making new patients feel more comfortable. Consider adding a tab on your website if you don't have one already.

- These patient contributions can be videos, interview-style articles, or simple quotes.
- To identify potential participants, provide a patient questionnaire that collects: name, age, diagnosis, and quick quote on how the Blue Light Cystoscopy with Cysview process at your practice made them feel.
- Be sure to capture permission to use their comments on your website and in other promotional efforts of your choosing.

Other Ideas

Recognize outstanding doctors (or employees) of the month, share this on the website with a feature story. Be sure to include the use of Blue Light Cystoscopy with Cysview whenever relevant to the recognition.

Social Media

Here are some basic activities you can implement on your business Social Media accounts.

Sharing Existing Content

From Your Website

Social media platforms (Twitter, Facebook, LinkedIn) are great vehicles for sharing short pieces of information with links to more content. Use pre-existing content from your website and create a social media post that shares a snippet of information and offers the link to the full copy on your site.

Here are some examples:

We are proud to offer Blue Light Cystoscopy with Cysview at our office for our bladder cancer patients. [Learn more.](#) [Link to your practice website where you explain the procedure.]

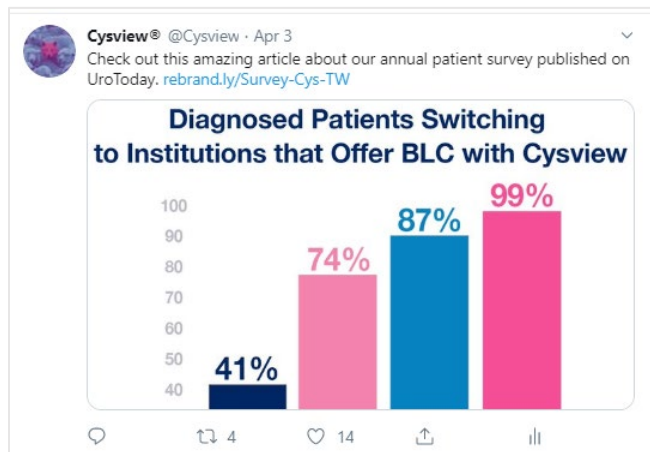
Congratulations to Dr. Smith who has been named our Physician of the Month. Among his outstanding achievements last month was his completion of the most Blue Light Cystoscopy with Cysview procedures. He helped 25 bladder cancer patients by using this state-of-the-art technology we offer. [Learn more.](#) [Link to your practice website where you provide more explanation about Dr. Smith's accomplishments leading to this honor.]

We truly appreciate our wonderful patients and we're proud to share the positive comments they send to us. Kathy from Worchester wrote, "Everyone at the office is so friendly and knowledgeable. I especially appreciate that they offer Blue Light Cystoscopy with Cysview for my bladder cancer management. This procedure gives me even greater confidence in their treatment plan." [Read more patient comments.](#) [Link to patient comments section on your practice website.]

From Third Parties

If you or your practice receives any media coverage, be sure to post about the story on your social media pages. Often media outlets will post their stories on their own social media platforms, so look for those posts and share them on your pages.

Cysview has Facebook, YouTube, Twitter, and LinkedIn accounts that offer information that can be valuable to patients. Feel free to use any of these posts on your own social pages in the context of reminding readers that your practice performs Blue Light Cystoscopy with Cysview.



Blue Light Cystoscopy with Cysview
 Published by Hootsuite [?] · March 19 ·

We are excited to announce the launch of our new website!
 Please check out all it has to offer -- general brand info, info for patients, and info for HCPs.
<https://rebrand.ly/cys-fb-Cysview-newsite>

CYSVIEW®
 Hexaminolevulinate HCl

Confidence at First Sight
 Blue Light Cystoscopy with Cysview® for Bladder Cancer

Cysview is a pharmaceutical product that makes non-muscle invasive bladder cancer tumors glow bright pink under blue light during a cystoscopy. Because the cancer is more visible, urologists can remove it more completely than if they weren't using Cysview.

367 People Reached 79 Engagements **Boost Post**

12 1 Share

Like Comment Share

Comment as Blue Light Cystoscopy with Cysview

Blue Light Cystoscopy with Cysview
 Published by Jo Elynn Gangemi Cook [?] · December 14, 2018 ·

The amazing story about Bladder Cancer Survivor Mary Beth Ballard Murray was featured this morning on NewsChannel 5, the CBS-affiliate in Nashville, TN. Her experience includes having had a Blue Light Cystoscopy with Cysview, and she's coming up on her five years survivorship.
 She's not what you'd expect!
 Watch her story on the station website <http://bit.ly/2UMEobV>

NEWSCHANNEL5.COM
Blue Light technology helps 28-year-old beat bladder cancer
 Vanderbilt Urology's Blue Light Cystoscopy with Cysview helped a 28-year...

172 People Reached 29 Engagements **Boost Post**

10 3 Shares

Creating Original Content

Visual media attracts the most views on social media so, when talking about offering Blue Light Cystoscopy with Cysview at your practice, try to include an image or video of the equipment or the visual difference the procedure reveals when used. [Clinical comparison images](#) are available from Photocure Marketing for your use.

Consider spotlighting staff who participate in the Blue Light Cystoscopy with Cysview process at your practice. You can post an image of a staff member and include a quote from him/her about how Cysview helps patients and his/her own role in that process.

Create a series of question-and-answer interviews about the procedure and the benefits of this technology. Interview staff, HCPs, and patients. Post short video clips on your social media pages.



General Tips

- Images and videos attract viewers' attention much better than a text-only post does.
- Hashtags such as #BladderCancer, #BLCSM, and #bladdercanceraware are popular in the bladder cancer community but be sure to include other relevant hashtags as well when posting.
- Websites such as Canva make it much easier to create posts with visual interest.
- Management platforms such as Hootsuite can make it easier to schedule posts on various social media pages, so you don't have to post manually every day.

5. Help and Support from Cysview U.S. Marketing Team

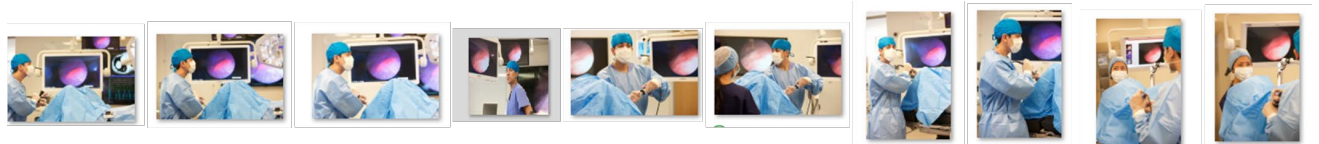
For high-resolution art and source files for the image and video materials below, please contact Photocure Marketing at Marketing@Photocure.com.

Cysview Logos

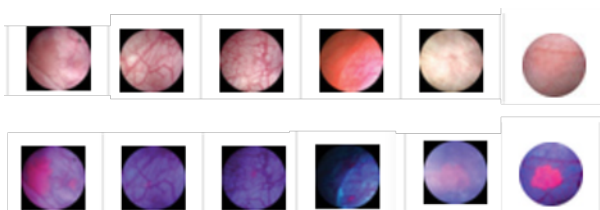
CYSVIEW®
Hexaminolevulinate HCl

CYSVIEW®
Hexaminolevulinate HCl

Cysview Brand Images



BLC with Cysview Clinical Images



Patient Journey Videos

Cysview Patient Journey



Patient Journey PSA



Search Engine Optimization (SEO) Keywords

If you are interested in understanding the terminology most used by people who are researching information about bladder cancer diagnosis and care, please review the [SEO Keywords List](#) in the Appendix. It shows the popularity of different search words on this topic used on Google.

To use this information to optimize your website pages about Blue Light Cystoscopy with Cysview, use the more popular keywords in your page title, meta description, and alt-tags. Also repeat them in a natural way within the page copy.

Social Media Pages

Social media accounts related to Bladder Cancer and Cysview

- Cysview: [Facebook](#), [Twitter](#)
- Bladder Cancer Advocacy Network (BCAN): [Facebook](#), [Twitter](#)

6. Appendix: Additional Resources

Introduction Letter Templates

Please copy and paste onto your own letterhead, then personalize for your facility.

Version: Announcing the availability of BLC with Cysview

{Salutation,}

Bladder cancer is a growing concern in our community, our nation, and the world. We know you care about your patients as much as we do. That's why we wanted to let you know this important information for our community.

{Facility} now offers Blue Light Cystoscopy with Cysview® for improved detection and management of non-muscle invasive bladder cancer.

You may not know about this procedure, so we've included some key facts about it below. We hope you will think of {Facility} when you have patients who may need bladder cancer diagnosis, treatment or care. If you would like to come visit our facility and see a Blue Light Cystoscopy with Cysview first-hand, please contact {contact info}.

Bladder cancer statistics

- More than 700,000 people living with bladder cancer in the U.S.¹
- Approximately 80,000 people are diagnosed each year²
- It's the 3rd most common cancer in U.S. men²
- It's the 10th most common cancer in U.S. women²

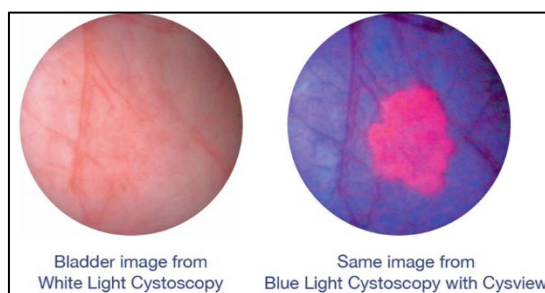
About Blue Light Cystoscopy (BLC®) with Cysview

During a standard cystoscopy procedure, a healthcare professional looks into the bladder using regular white light. During a Blue Light Cystoscopy, the HCP uses both white and blue light. However, the blue light is only effective if Cysview has been instilled in the patient's bladder at least one hour before the procedure.

Cysview makes tumor cells glow bright pink in blue light, but it is not a dye. It is a hexyl-ester of aminolevulinic acid that results in increased volume of porphyrins in cells. Unhealthy cells do not process out the porphyrins as quickly as healthy cells; the resulting accumulation creates a pink glow in blue light.

Cysview is an FDA-approved optical imaging agent indicated for use in the cystoscopic detection of non-muscle invasive bladder cancer including carcinoma in situ (CIS) among patients suspected or known to have lesion(s) on the basis of a prior cystoscopy. Cysview is used with the KARL STORZ Photodynamic Diagnostic (PDD) system to perform BLC as an adjunct to White Light Cystoscopy.³

The 2016 AUA/SUO NMIBC Guideline (amended 2020) states: "In a patient with non-muscle invasive bladder cancer (NMIBC), a clinician should offer blue light cystoscopy at the time of TURBT, if available, to increase detection and decrease recurrence. (Moderate Recommendation; Evidence Strength: Grade B)⁴



[Optional: For more information, see accompanying Fact Sheet]

References: 1. National Cancer Institute. SEER Stat Facts: Bladder Cancer 2022. <https://seer.cancer.gov/statfacts/html/urinb.html>. Accessed February 15, 2023. 2. Globocan. Incidence/mortality by population. Available at: <https://gco.iarc.fr/today/>. 3. Cysview [prescribing information]. 2019:1-4. 4. Chang SS, Boorjian SA, Chou R, et al. Diagnosis and Treatment of Non-Muscle Invasive Bladder Cancer: AUA/SUO Guideline. *J Urol*. 2016;196(4):1021-1029.

Important Risk & Safety Information for Cysview (hexaminolevulinate HCl)

Cysview® (hexaminolevulinate HCl) is an optical imaging agent used to detect non-muscle invasive bladder cancer in patients suspected or known to have lesion(s) on the basis of a prior cystoscopy, or in patients undergoing surveillance cystoscopy for bladder cancer. Cysview is not a replacement for random bladder biopsies or other procedures used in the detection of bladder cancer.

Anaphylactoid shock, hypersensitivity reactions, bladder pain, bladder inflammation (cystitis), and abnormal urine tests have been reported after administration of Cysview. The most common adverse reactions seen in clinical trials were bladder spasm, trouble urinating, discomfort when urinating, frequent urination, blood in the urine, and bladder pain.

Cysview should not be used in patients with large amounts of blood in their urine, any known allergy to Cysview or any derivative of aminolevulinic acid, or porphyria, a condition that means you already have high levels of porphyrins in your body. No specific drug interaction studies have been performed.

Introduction Letter Templates

Please copy and paste onto your own letterhead, then personalize for your facility.

Version: Promoting the availability of BLC with Cysview

{Salutation,}

Bladder cancer is a growing concern in our community, our nation, and the world. We know you care about your patients as much as we do. That's why we wanted to remind you about this important information for our community.

Please remember that {Facility} offers Blue Light Cystoscopy with Cysview® for improved detection and management of non-muscle invasive bladder cancer.

As a reminder of its use and value, we've included some key facts about it below. We hope you will think of {Facility} when you have patients who may need bladder cancer diagnosis, treatment or care. If you would like to come visit our facility and see a Blue Light Cystoscopy with Cysview first-hand, please contact {contact info}.

Bladder cancer statistics

- More than 700,000 people living with bladder cancer in the U.S.¹
- Approximately 80,000 people are diagnosed each year²
- It's the 3rd most common cancer in U.S. men²
- It's the 10th most common cancer in U.S. women²

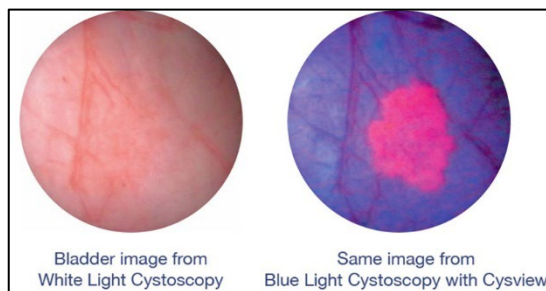
About Blue Light Cystoscopy (BLC®) with Cysview

During a standard cystoscopy procedure, a healthcare professional looks into the bladder using regular white light. During a Blue Light Cystoscopy, the HCP uses both white and blue light. However, the blue light is only effective if Cysview has been instilled in the patient's bladder at least one hour before the procedure.

Cysview makes tumor cells glow bright pink in blue light, but it is not a dye. It is a hexyl-ester of aminolevulinic acid that results in increased volume of porphyrins in cells. Unhealthy cells do not process out the porphyrins as quickly as healthy cells; the resulting accumulation creates a pink glow in blue light.

Cysview is an FDA-approved optical imaging agent indicated for use in the cystoscopic detection of non-muscle invasive bladder cancer including carcinoma in situ (CIS) among patients suspected or known to have lesion(s) on the basis of a prior cystoscopy. Cysview is used with the KARL STORZ Photodynamic Diagnostic (PDD) system to perform BLC as an adjunct to White Light Cystoscopy.³

The 2016 AUA/SUO NMIBC Guideline (amended 2020) states: "In a patient with non-muscle invasive bladder cancer (NMIBC), a clinician should offer blue light cystoscopy at the time of TURBT, if available, to increase detection and decrease recurrence. (Moderate Recommendation; Evidence Strength: Grade B)⁴



[Optional: For more information, see accompanying Fact Sheet]

References: 1. National Cancer Institute. SEER Stat Facts: Bladder Cancer 2022. <https://seer.cancer.gov/statfacts/html/urinb.html>. Accessed February 15, 2023. 2. Globocan. Incidence/mortality by population. Available at: <https://gco.iarc.fr/today/>. 3. Cysview [prescribing information]. 2019:1-4. 4. Chang SS, Boorjian SA, Chou R, et al. Diagnosis and Treatment of Non-Muscle Invasive Bladder Cancer: AUA/SUO Guideline. *J Urol*. 2016;196(4):1021-1029.

Important Risk & Safety Information for Cysview (hexaminolevulinate HCl)

Cysview® (hexaminolevulinate HCl) is an optical imaging agent used to detect non-muscle invasive bladder cancer in patients suspected or known to have lesion(s) on the basis of a prior cystoscopy, or in patients undergoing surveillance cystoscopy for bladder cancer. Cysview is not a replacement for random bladder biopsies or other procedures used in the detection of bladder cancer.

Anaphylactoid shock, hypersensitivity reactions, bladder pain, bladder inflammation (cystitis), and abnormal urine tests have been reported after administration of Cysview. The most common adverse reactions seen in clinical trials were bladder spasm, trouble urinating, discomfort when urinating, frequent urination, blood in the urine, and bladder pain.

Cysview should not be used in patients with large amounts of blood in their urine, any known allergy to Cysview or any derivative of aminolevulinic acid, or porphyria, a condition that means you already have high levels of porphyrins in your body. No specific drug interaction studies have been performed.

Bladder Cancer Fact Sheet

<https://rebrand.ly/Kit-BCAN-Fact-Sheet>

This year alone, over 81,000
will be diagnosed with *bladder cancer*

When caught at an early stage, the 5-year survival rate is 70%.

Do you know what to look for?

<p>Signs</p> <ul style="list-style-type: none"> Blood in the urine** Painful urination Urgent need to urinate Feeling the need (but not being able) to pass urine 	<p>Symptoms*</p> <ul style="list-style-type: none"> Abdominal pain Fatigue Lower back pain Appetite or weight loss
--	---

6th most common cancer

Men are 3-4 times more likely to be diagnosed than women

Risk Factors:


- Smoking
- Chemical exposure
- Race, gender and age
- Medical history of cancer
- Chronic bladder inflammation

Women are more likely to have advanced forms

*It is important to note that these signs can also indicate other conditions such as urinary tract infections or bladder stones. If you experience any of these symptoms, even once, consult your physician immediately. Early detection is the key to a better prognosis.

**If you see blood in your urine make sure your doctor rules out bladder cancer as the cause. Don't assume it's an infection to be treated with antibiotics.

For more information, please visit: www.BCAN.org



BCAN
 Bladder Cancer Advocacy Network
Leading the way to awareness and a cure

4915 St. Elmo Ave. Suite 202 | Bethesda, MD 20814 | 888-901-BCAN | info@bcan.org


Blue Light Cystoscopy Fact Sheet

<https://rebrand.ly/Kit-BLC-Fact-Sheet>


Cystoscopy Fact Sheet

Blue Light Cystoscopy (BLC®) with Cysview® for non-muscle invasive bladder cancer


The evolution of bladder cancer detection
Cystoscopy is the gold standard diagnostic tool for bladder cancer detection. This procedure allows a urology HCP to closely examine the lining of a patient's bladder.




Historically, cystoscopy has been performed using only white light to shine in the bladder for the exam.



Historically, bladder cancer has had a high risk of recurrence and progression.¹








In actuality, some cancer may have recurred, but some cancer may have escaped detection under white light alone.²



?


How Cysview works³
Cysview makes tumor cells glow bright pink in blue light, but it is not a dye. It drives increased production of a natural compound inside cells. Unhealthy cells do not process out the compound as quickly as healthy cells; the resulting accumulation creates a pink glow in blue light. Sufficient accumulation takes about one hour to occur, so patients need to arrive early for a BLC procedure.


Patients must arrive at least one hour before their procedure. → After the usual patient intake process, → a urology HCP reconstitutes Cysview powder into a liquid... → and uses a catheter to place the resulting small amount of liquid into the patient's bladder. → After one hour, the patient's procedure can begin.

Blue Light Cystoscopy with Cysview detects more non-muscle invasive bladder cancer (NMIBC) than White Light Cystoscopy alone³
This state-of-the-art procedure – Blue Light Cystoscopy with Cysview – helps make cancer more visible.


Cysview may not detect all bladder tumors and is not a replacement for random bladder biopsies. False-positive fluorescence may occur due to inflammation, cystoscopic trauma, scar tissue, previous bladder biopsy, recent BCG immunotherapy or intravesical chemotherapy.




Bladder image from White Light Cystoscopy




Same image from Blue Light Cystoscopy with Cysview




White light and blue light work together
A BLC with Cysview consists of a cystoscopic examination using both white and blue light to explore the bladder lining for tumors. It begins with the installation of the optical imaging agent Cysview into the patient's bladder to make the abnormal cells glow bright pink in blue light.




Examine in white light



View pink lesion in blue light



Perform procedure/ resection in white light



Re-examine margins in blue light

Supported by industry guidelines
The clinical value of BLC with Cysview has been recognized by leading urology and cancer care organizations. Categorized as an enhanced cystoscopy technique, BLC is included in the following recommendations.

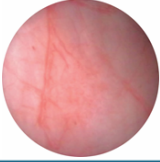
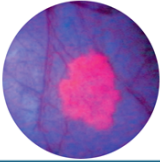
Diagnosis and Treatment of Non-Muscle Invasive Bladder Cancer: AUA/SUO Joint Guideline (2016; Amended 2020)⁴
Enhanced Cystoscopy
In a patient with NMIBC, a clinician should offer Blue Light Cystoscopy at the time of TURBT, if available, to increase detection and decrease recurrence. (Moderate Recommendation; Evidence Strength: Grade B)

NCCN Clinical Practice Guidelines in Oncology (NCCN Guidelines⁵) for Bladder Cancer (2021; Amended 2023)^{5a}
Enhanced cystoscopy may be helpful in identifying lesions not visible using white light cystoscopy. Consider enhanced cystoscopy (if available) for initial evaluation or when positive urine cytology.

Please see Important Risk & Safety information on the back and accompanying Full Prescribing Information.

CYSVIEW®
Hexaminolevulinate HCl

Paid Advertisements – print, digital, outdoor, transit

<p>For non-muscle invasive bladder cancer Blue Light Cystoscopy with Cysview</p>		<p>Same bladder image in white light and blue light with Cysview</p>		<p>Available at Facility Name 123 Main Street, East Hanover, NJ 1-800-222-3434</p>
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Blue Light Cystoscopy with Cysview
 Available at
Facility Name

123 Main Street
East Hanover, NJ

1-800-222-3434



Bladder image from White Light Cystoscopy



Same image from Blue Light Cystoscopy with Cysview

For improved detection and management of non-muscle invasive bladder cancer

"BLC with Cysview Available Here" Poster or Tabletop Sign

<https://rebrand.ly/Kit-Wall-Poster>

<https://rebrand.ly/Kit-Tabletop-Sign>

Available Here

BLUE LIGHT CYSTOSCOPY WITH CYSVIEW®



For Increased Detection of Bladder Cancer*

ASK YOUR DOCTOR

Cysview is not a replacement for random bladder biopsies or other procedures used in the detection of bladder cancer. See Full Prescribing Information on reverse.

CYSVIEW®
Hexaminolevulinate HCl

PHOTOCURE® THE BLADDER CANCER COMPANY™

CYSVIEW®
Hexaminolevulinate HCl

INDICATIONS AND USAGE

CONTRAINDICATIONS

WARNINGS AND PRECAUTIONS

ADVERSE REACTIONS

DRUG INTERACTIONS

HOW SUPPLIED

STORAGE AND STABILITY

HOW TO USE

PHARMACOLOGY

CLINICAL STUDIES


REFERENCES

FOR MORE INFORMATION

CONTACT INFORMATION

Available Here

Blue Light Cystoscopy with Cysview®



For Increased Detection of Bladder Cancer*

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1. Cysview Prescribing Information, 2018-1-A.

CYSVIEW®
Hexaminolevulinate HCl

PHOTOCURE® THE BLADDER CANCER COMPANY™

Event Email Templates

Please copy and paste into your email template, then personalize for your facility.

Version: Announcing the availability of BLC with Cysview

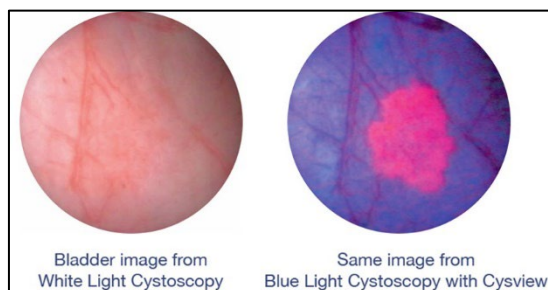
Subject: Bladder cancer detection breakthrough to be featured at {event name}

{Facility} now offers a breakthrough procedure for the improved detection and management of non-muscle invasive bladder cancer.

If you or someone you know has or is at risk for bladder cancer, you need to check this out!

Join us to learn about the latest healthcare trends and breakthroughs, including a state-of-the-art technology that improves detection and management of non-muscle invasive bladder cancer.

{event name}
 {event date}
 {times}
 {event location}



We are pleased to now offer Blue Light Cystoscopy with Cysview at {facility} and are eager to speak with you about it at this event. Cysview (hexaminolevulinate HCl) makes bladder tumors glow bright pink in blue light so your urologist can see and remove more cancer.

Come learn more! Don't miss out!

Important Risk & Safety Information for Cysview® (hexaminolevulinate HCl)

Cysview is an optical imaging agent used to detect non-muscle invasive bladder cancer in patients suspected or known to have lesion(s) on the basis of a prior cystoscopy, or in patients undergoing surveillance cystoscopy for bladder cancer. Cysview is not a replacement for random bladder biopsies or other procedures used in the detection of bladder cancer.

Anaphylactoid shock, hypersensitivity reactions, bladder pain, bladder inflammation (cystitis), and abnormal urine tests have been reported after administration of Cysview. The most common adverse reactions seen in clinical trials were bladder spasm, trouble urinating, discomfort when urinating, frequent urination, blood in the urine, and bladder pain.

Cysview should not be used in patients with large amounts of blood in their urine, any known allergy to Cysview or any derivative of aminolevulinic acid, or porphyria, a condition that means you already have high levels of porphyrins in your body. No specific drug interaction studies have been performed.

Event Email Templates

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Version: Promoting the availability of BLC with Cysview

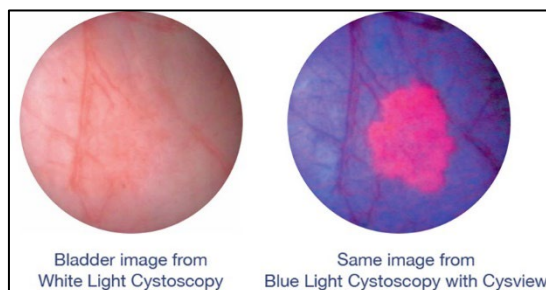
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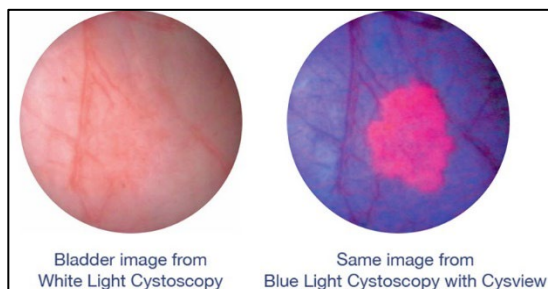
Subject: Breakthrough bladder cancer procedure now available at {event name}

{Facility} is pleased to announce that we now offer a breakthrough bladder cancer procedure called **Blue Light Cystoscopy (BLC®) with Cysview®**.

Cysview is proven to significantly increase the detection of non-muscle invasive bladder cancer (NMIBC) by making tumor cells glow bright pink in blue light. When urologists can more clearly see the tumor, they are better able to remove it completely. Cysview also allows for better disease management and improved visibility during ongoing surveillance. You can learn more at www.cysview.com.

If you are living with NMIBC, we encourage you make an appointment with us here at {Facility} to discuss BLC with Cysview with our urology experts. If you know someone who is living with this disease, please pass this information along to them.

Contact us at {Facility contact information}



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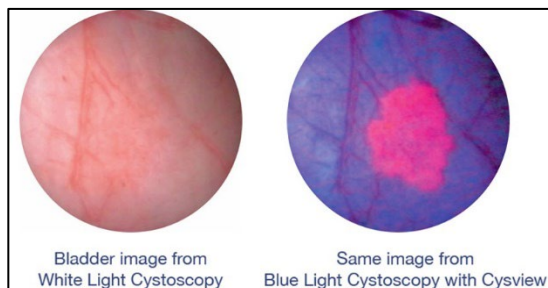
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Copy for Patient Newsletters

Please copy and paste into your publication format, then personalize for your facility.

State-of-the-Art Procedure Improves Detection of Bladder Cancer

{Facility} is proud to be one of the limited number of institutions throughout the country that offers Blue Light Cystoscopy (BLC®) with Cysview®. This ground-breaking procedure significantly improves detection of non-muscle invasive bladder cancer (NMIBC) over the traditional White Light Cystoscopy method alone. When used together, tumors can be seen more completely, and flat lesions (called CIS) become visible.

In {month year, physician name} started using BLC with Cysview. “As a urologist specializing in treating patients with cancer, I always want to be able to tell my patients – with confidence – that I was able to remove as much cancer as possible. I felt reassured from the moment I switched on the blue light; I could see additional lesions I couldn’t see in white light. Patients appreciate this technology, and I know it is making a difference in patient care.”

How BLC with Cysview Works

During a standard cystoscopy procedure, a urologist examines the interior wall of a patient’s bladder using regular white light. During a Blue Light Cystoscopy, the urologist uses both white and blue light. However, the blue light is only effective if Cysview has been instilled in the patient’s bladder at least one hour before the procedure.

Cysview makes tumor cells glow bright pink in blue light, but it is not a dye. It drives increased production of a natural compound inside cells. Unhealthy cells do not process out the compound as quickly as healthy cells; the resulting accumulation creates a pink glow in blue light.

Value to Our Patients

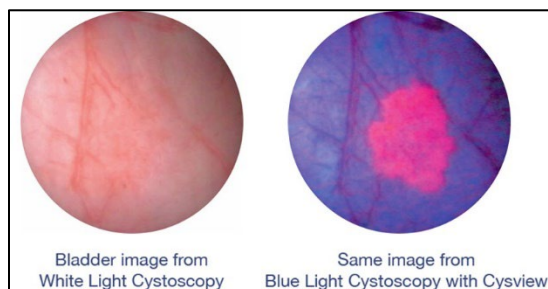
Cysview is FDA approved for use during TURBT surgery and follow-up cystoscopies. For appropriate bladder cancer patients, it can significantly improve disease management. The improved tumor visibility leads to more complete TURBTs and better surveillance.

With more than 700,000 people living with bladder cancer in the U.S.,¹ and around 80,000 more being diagnosed with it each year², it’s become imperative that we here at {Facility} offer this revolutionary procedure to our community. We are so pleased to be able to provide this advanced level of care to our patients.

For more information about BLC with Cysview at {Facility}, visit {website page URL} or reach out directly to: {contact information}

For additional information about Cysview, visit Cysview.com.

For more about bladder cancer, visit BCAN.org.



References: 1. National Cancer Institute. SEER Stat Facts: Bladder Cancer 2022. <https://seer.cancer.gov/statfacts/html/urinb.html>. Accessed February 15, 2023. 2. Globocan. Incidence/mortality by population. Available at: <https://gco.iarc.fr/today/>. 3. Cysview [prescribing information]. 2019:1-4.

Important Risk & Safety Information for Cysview® (hexaminolevulinate HCl)

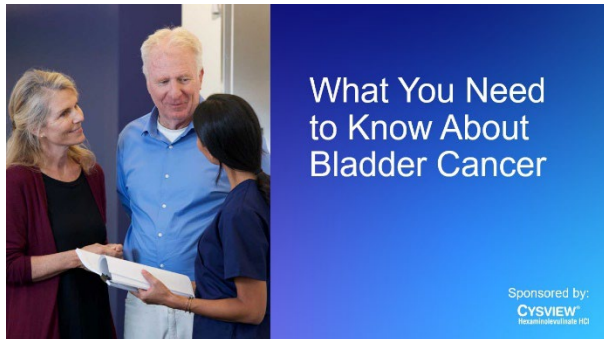
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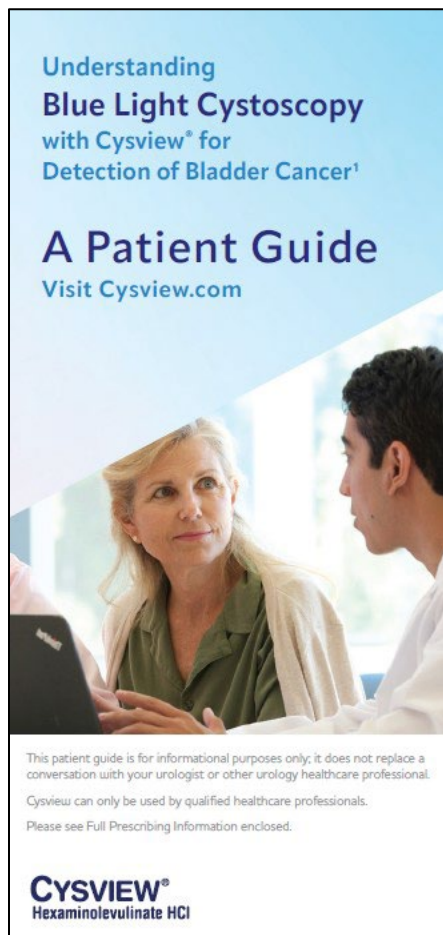
Patient-focused Slide Presentation

<https://rebrand.ly/Kit-Patient-Deck>



Patient Brochure

<https://rebrand.ly/Kit-Patient-Brochure>



SEO Keywords for Blue Light Cystoscopy with Cysview

Keywords	Avg. Monthly Searches
Physician/Location Terms	
advanced urology	12,100
urologic oncology	1,600
urology center	1,000
bladder doctor	1,000
bladder specialist	390
uro oncologist	210
bladder cancer specialist	170
urology hospital	110
bladder cancer doctor	70
bladder cancer clinic	10
Treatment Terms	
bladder cancer treatment	9,900
alternative cancer treatments	1,000
bladder medication	1,900
how is bladder cancer treated	590
bladder cancer treatment options	590
treatment for bladder cancer in elderly	480
what is the treatment for bladder cancer	260
bladder treatments	210
bladder cancer medications	170
bladder therapy	140
new treatments for bladder cancer	140
stage 4 bladder cancer treatment	140
bladder cancer drugs	110
metastatic bladder cancer treatment	110
treatment for bladder cancer in males	110
bladder tumor treatment	90
cures for bladder cancer	50
natural cures for bladder cancer	50
alternative treatment for bladder cancer	40
new drug for bladder cancer	40
management of bladder cancer	20
urinary bladder cancer treatment	20
Surgery Terms	
bladder surgery	2,900
bladder cancer surgery	880
bladder tumor removal	720
bladder cancer removal	260
bladder tumor resection	140
bladder tumor surgery	110
bladder cancer biopsy	70
bladder cancer operation	20
urinary bladder surgery	20

Keywords	Avg. Monthly Searches
TURBT/Cystoscopy Terms	
cystoscopy	90,500
transurethral resection	22,200
TURBT	8,100
cystoscopy procedure	6,600
cystoscopy male	2,900
TURBT procedure	2,900
cystoscopy female	2,400
bladder cystoscopy	1,300
bladder scope	1,300
cystoscopy procedure male	1,300
transurethral resection of bladder tumor	1,300
cystoscopy for men	1,000
cystoscopy procedure female	1,000
bladder cancer cystoscopy	880
cystoscopy preparation	720
flexible cystoscopy	720
TURBT surgery	720
rigid cystoscopy	390
TURBT bladder cancer	390
cystoscopy surgery	260
urology cystoscopy	260
cystoscopic examination	170
cystoscopy test	140
TURBT in urology	140
bladder scope female	110
cystoscopic exam	90
Pain after TURBT surgery	90
flexible cystoscopy female	50
Other Treatment Terms	
BCG treatment	5,400
BCG treatment for bladder cancer	2,900
BCG bladder cancer	2,400
immunotherapy for bladder cancer	880
BCG cancer treatment	480
bladder cancer chemotherapy	390
chemo for bladder cancer	390
BCG bladder	260
BCG cancer	170
radiation for bladder cancer	170
tb treatment for bladder cancer	170
BCG therapy for bladder cancer	90
BCG and bladder cancer	70
BCG treatment for bladder cancer success rate	70

Keywords	Avg. Monthly Searches
Symptoms Terms	
bladder cancer symptoms	74,000
signs of bladder cancer	18,100
bladder cancer symptoms in women	4,400
bladder cancer symptoms female	3,600
bladder cancer symptoms in men	2,400
early symptoms of bladder cancer	2,400
bladder tumor symptoms	1,300
signs of bladder cancer in females	1,300
advanced bladder cancer symptoms	1,300
early signs of bladder cancer	1,300
signs and symptoms of bladder cancer	1,000
signs of bladder cancer in women	1,000
what are the signs of bladder cancer	1,000
bladder cancer symptoms male	480
urinary bladder cancer symptoms	390
early warning signs of bladder cancer	320
signs of bladder cancer in men	320
first signs of bladder cancer	260
early signs of bladder cancer symptoms	260
bladder cancer blood in urine	210
warning signs of bladder cancer	170
aggressive bladder cancer symptoms	170
bladder mass symptoms	140
bladder cancer and back pain	140
bladder cancer causes and symptoms	110
metastatic bladder cancer symptoms	110
kidney and bladder cancer symptoms	110
bladder cancer hematuria	110
Test/Diagnosis Terms	
bladder cancer diagnosis	4,400
test for bladder cancer	1,300
blood test for bladder cancer	320
Prognosis Terms	
bladder cancer prognosis	6,600
bladder cancer survival	1,000
high grade bladder cancer prognosis	390
bladder cancer metastasis to bone prognosis	140
bladder cancer prognosis no treatment	110
bladder cancer prognosis in elderly	110
bladder cancer prognosis	6,600
bladder cancer survival	1,000
high grade bladder cancer prognosis	390
bladder cancer metastasis to bone prognosis	140
Staging Terms	
bladder cancer staging	2,900
bladder carcinoma staging	10
Recurrence Terms	
bladder cancer recurrence	320

Keywords	Avg. Monthly Searches
Tumor Terms	
bladder tumor	3,600
bladder mass	1,900
bladder polyps	1,600
bladder cancer tumor	260
growth in bladder	260
urinary bladder tumor	50
tumor in bladder male	30
Types Terms (sub-grouped by similar terms)	
stage 1 bladder cancer	480
early stage bladder cancer	110
stage 2 bladder cancer	590
stage 3 bladder cancer	720
stage 4 bladder cancer	1,300
stage 4 bladder cancer prognosis	110
stage 4 bladder cancer symptoms	90
aggressive bladder cancer	260
aggressive bladder cancer types	70
carcinoma in situ bladder	210
cis bladder cancer	110
bladder cancer in situ	70
types of bladder cancer	1,000
malignant bladder tumor	90
bladder tumour types	70
malignant neoplasm of bladder	590
muscle invasive bladder cancer	480
invasive bladder cancer	170
non invasive bladder cancer	170
superficial bladder cancer	170
bladder cancer in the muscle	140
bladder wall cancer	90
superficial bladder tumor	40
papillary tumor bladder	260
papillary bladder cancer	210
papillary carcinoma bladder	110
bladder cancer lymph nodes	70
secondary bladder cancer	20
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Social Media Educational Posts

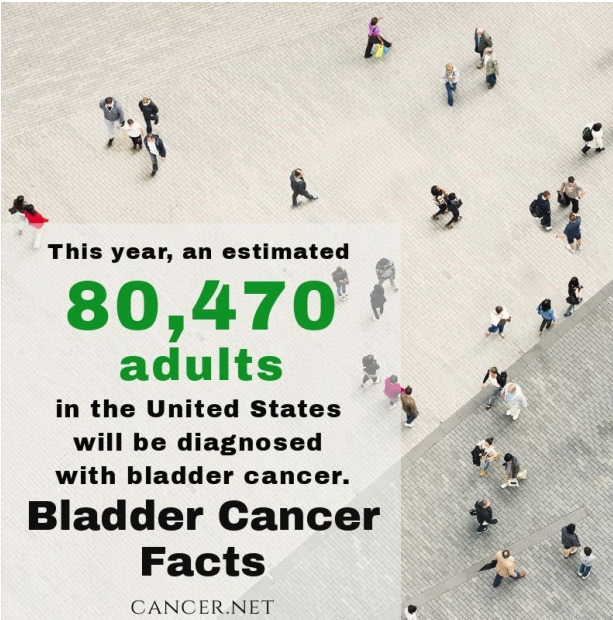


AMERICAN CANCER SOCIETY
BLADDER CANCER FACT:

**BLADDER
CANCER IS THE
FOURTH MOST
COMMON
CANCER IN MEN.**

IT'S LESS COMMON IN WOMEN

Don't Ignore
blood
in your
URINE
get tested
FOR
bladder cancer



This year, an estimated
80,470
adults
in the United States
will be diagnosed
with bladder cancer.
**Bladder Cancer
Facts**
CANCER.NET



FACT:
**Bladder cancer
can be treated**
If you see blood in your urine or experience
changes in your urination patterns, see a urologist.

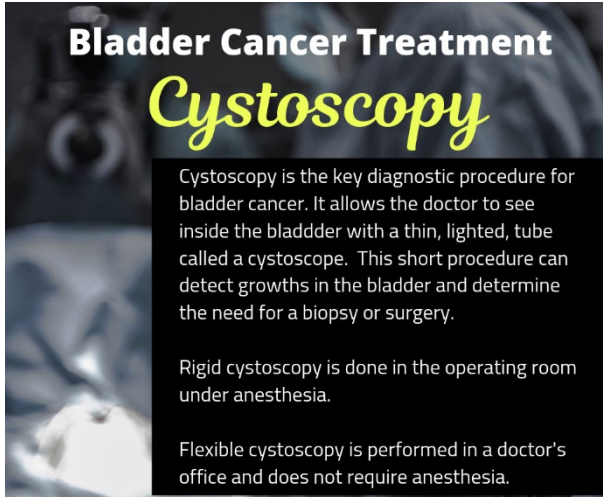


BLADDER CANCER

OVERALL, THE CHANCE MEN WILL
DEVELOP THIS CANCER DURING
THEIR LIFE IS ABOUT **1 IN 27.**

**FOR WOMEN,
THE CHANCE IS ABOUT
1 IN 89.**

American Cancer Society

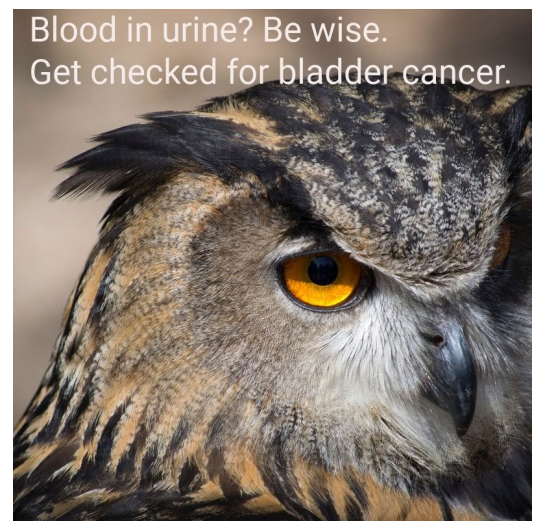
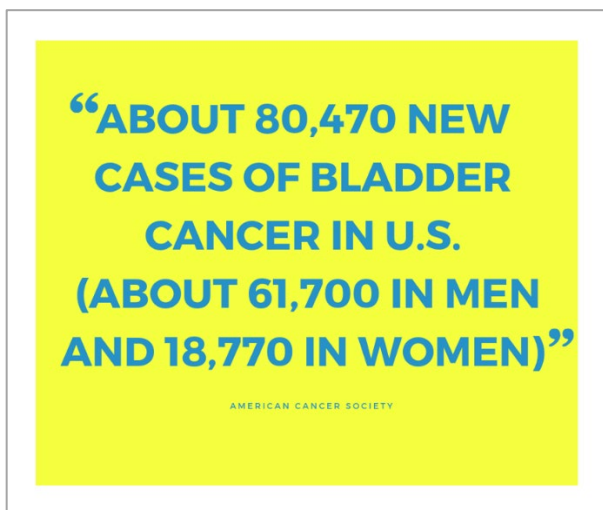
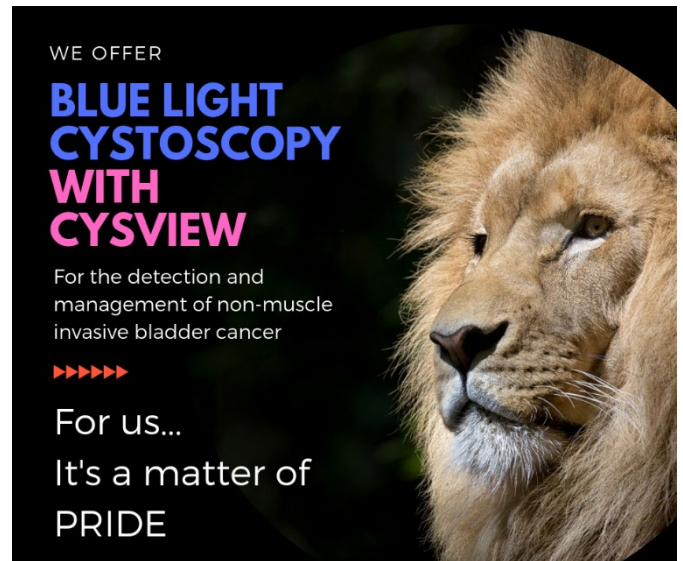
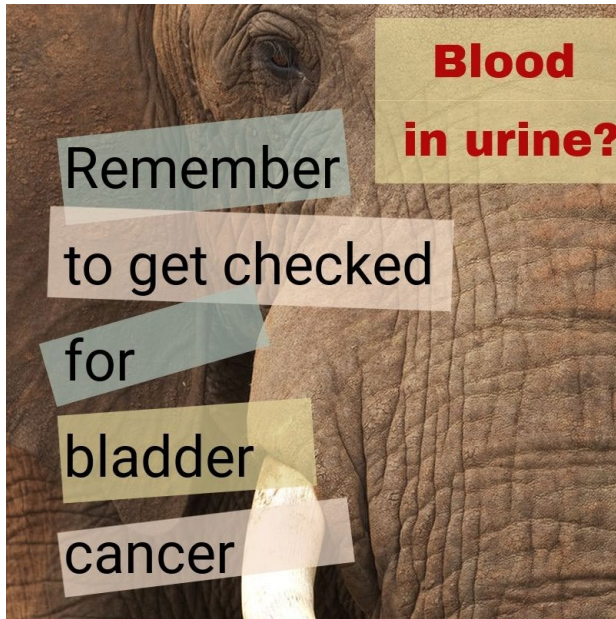


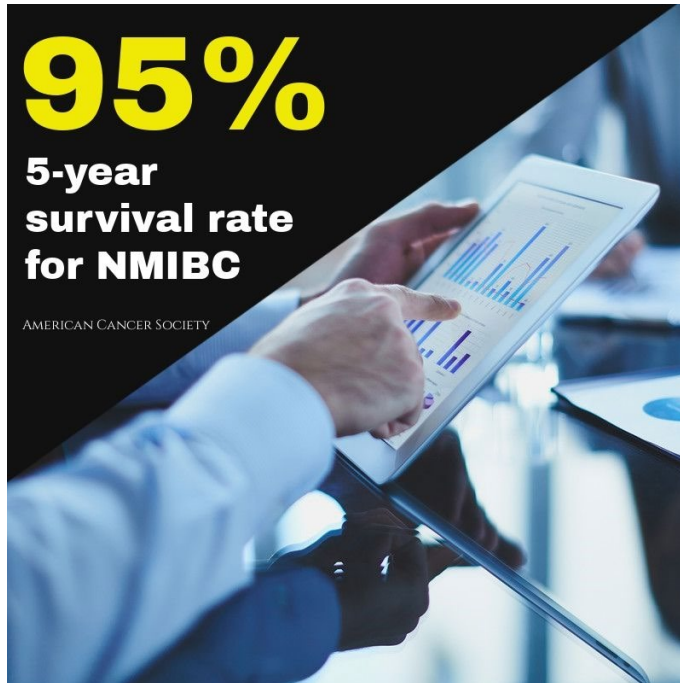
Bladder Cancer Treatment
Cystoscopy

Cystoscopy is the key diagnostic procedure for bladder cancer. It allows the doctor to see inside the bladder with a thin, lighted, tube called a cystoscope. This short procedure can detect growths in the bladder and determine the need for a biopsy or surgery.

Rigid cystoscopy is done in the operating room under anesthesia.

Flexible cystoscopy is performed in a doctor's office and does not require anesthesia.





BLADDER CANCER SYMPTOMS

- Blood in urine
- Having to urinate more often
- Pain or burning during urination
- Feeling as if you need to go right away, even when your bladder isn't full
- Having trouble urinating or having a weak urine stream
- Having to get up to urinate many times during the night

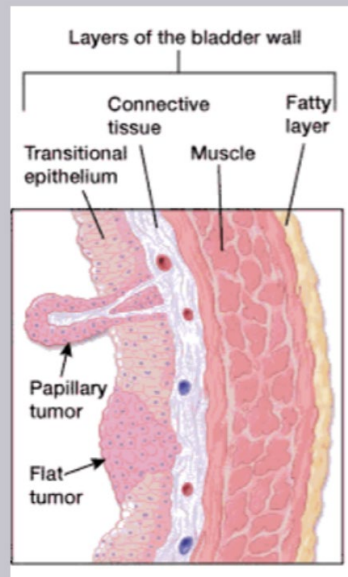
GET TESTED

BLADDER CANCER TUMOR TYPES

Papillary tumors grow in slender, finger-like projections from the inner surface of the bladder toward the hollow center. Papillary tumors often grow toward the center of the bladder without growing into the deeper bladder layers. These tumors are called non-invasive papillary cancers.

Flat carcinomas do not grow toward the hollow part of the bladder at all. If a flat tumor is only in the inner layer of bladder cells, it's known as a non-invasive flat carcinoma or a flat carcinoma in situ (CIS).

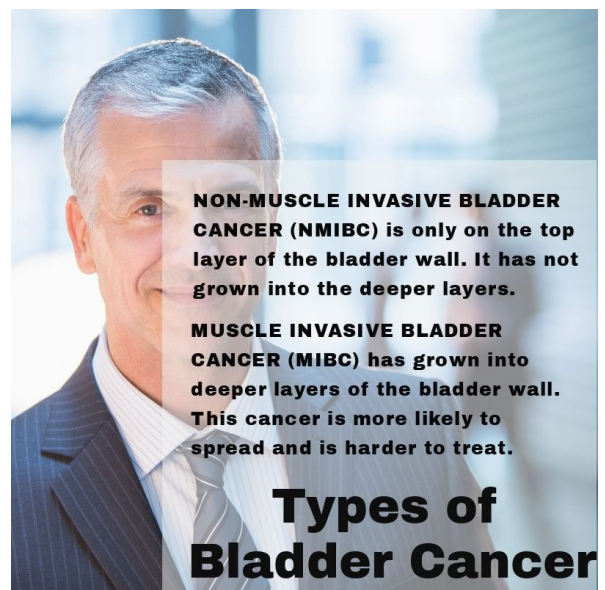
AMERICAN CANCER SOCIETY



Bladder Cancer Treatment

TURBT

If abnormal tissue in the bladder is found during a cystoscopy, the urologist will do a biopsy. A biopsy is the removal of a small amount of tissue for examination under a microscope. This surgical procedure is called a transurethral resection of a bladder tumor or TURBT.



NON-MUSCLE INVASIVE BLADDER CANCER (NMIBC) is only on the top layer of the bladder wall. It has not grown into the deeper layers.

MUSCLE INVASIVE BLADDER CANCER (MIBC) has grown into deeper layers of the bladder wall. This cancer is more likely to spread and is harder to treat.

Types of Bladder Cancer

Press Release Templates

Please copy and paste into your press release template, then personalize for your facility.

Version: Announcing the availability of BLC with Cysview

{Facility} Adopts Innovative Imaging Agent to Improve Detection of Certain Bladder Cancers

Blue Light Cystoscopy with Cysview® Detects More Non-Muscle Invasive Bladder Cancer Tumors Than Use of Standard Diagnostic Technology¹

{Location, Date} – {Facility} is now one of a limited number of medical centers nationwide that offer Blue Light Cystoscopy with Cysview® (hexaminolevulinate hydrochloride). Cysview is an FDA-approved, optical imaging agent that makes non-muscle invasive bladder cancer glow bright pink in blue light so urologists can see tumors better.¹

[Sample Quote:]

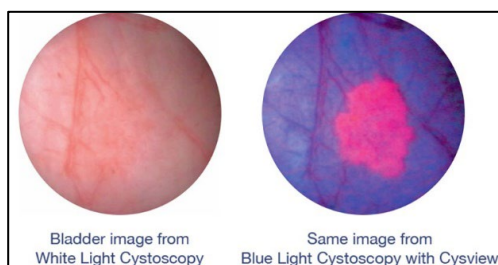
“Bladder cancer is difficult to detect and has a high rate of recurrence. Incomplete tumor removal and an inaccurate diagnosis can result in incomplete treatment. In addition, patients may experience serious complications and a lower chance of survival if they have aggressive tumors that get missed,” noted {Physician Spokesperson, Title}. “Blue Light Cystoscopy with Cysview represents an important advancement in diagnostic technology, enabling more accurate diagnosis of non-muscle invasive bladder cancer compared to the standard technique.”

Cysview is indicated for use in the cystoscopic detection of non-muscle invasive bladder cancer (NMIBC), including carcinoma in situ (CIS), among patients suspected or known to have lesion(s) on the basis of a prior cystoscopy.¹

Bladder cancer is the sixth most common cancer in the United States.² Estimates state that more than 80,000 new cases of bladder cancer were diagnosed in the U.S. in 2020.³ {insert state or other local statistic, if available}. Up to 50% of NMIBC patients will have their bladder cancer recur -- that’s the highest recurrence rate of any form of cancer.⁴

White light cystoscopy has long been the gold standard for detecting suspicious lesions during transurethral resection of bladder tumor (TURBT) procedures.⁵ Often bladder cancer lesions are hard to see and can be missed. Now, since being included in the 2016 AUA/SUO Guideline for NMIBC,⁵ Blue Light Cystoscopy (BLC®) with Cysview is becoming the gold standard.

For BLC, about an hour prior to the procedure, Cysview is placed into the bladder using a catheter. During the procedure, the urologist first looks inside the bladder using white light, then switches to blue light mode. In blue light, Cysview makes the cancer cells glow bright pink allowing the urologist to more easily identify and remove tumors.¹



[Sample Quote:]

“The availability of Blue Light Cystoscopy with Cysview is in keeping with our commitment to advancing patient care,” said {Facility Spokesperson}.

“At {Facility}, patients with known or suspected bladder cancer undergo diagnostic procedures performed by physicians who have been specially trained in the use of this innovative technology.”

For an appointment, call {Facility Phone} or visit our website {Facility Website}.

References: 1. National Cancer Institute. SEER Stat Facts: Bladder Cancer 2022. <https://seer.cancer.gov/statfacts/html/urinb.html>. Accessed February 15, 2023. 2. Globocan. Prevalence by population 2020. Available at: <http://gco.iarc.fr/today/>. Accessed February 15, 2023. 3. Globocan. New cases by population 2020. Available at: <http://gco.iarc.fr/today/>. Accessed February 15, 2023. 4. Efstathiou J, Zietman FAL, Coen JJ, et al. Bladder Cancer. In: *Clinical Radiation Oncology*. 3rd ed; 2012:1099-1123. Available at <https://www.sciencedirect.com/science/article/pii/B9781437716375000523>. Accessed February 18, 2022. 5. Cysview [prescribing information]. 2019:1-4. 5. Chang SS, Boorjian SA, Chou R, et al. Diagnosis and Treatment of Non-Muscle Invasive Bladder Cancer: AUA/SUO Guideline. *J Urol*. 2016;196(4):1021-1029.

Important Risk & Safety Information for Cysview (hexaminolevulinate HCl)

Cysview is an optical imaging agent used to detect non-muscle invasive bladder cancer in patients suspected or known to have lesion(s) on the basis of a prior cystoscopy, or in patients undergoing surveillance cystoscopy for bladder cancer. Cysview is not a replacement for random bladder biopsies or other procedures used in the detection of bladder cancer.

Anaphylactoid shock, hypersensitivity reactions, bladder pain, bladder inflammation (cystitis), and abnormal urine tests have been reported after administration of Cysview. The most common adverse reactions seen in clinical trials were bladder spasm, trouble urinating, discomfort when urinating, frequent urination, blood in the urine, and bladder pain.

Cysview should not be used in patients with large amounts of blood in their urine, any known allergy to Cysview or any derivative of aminolevulinic acid, or porphyria, a condition that means you already have high levels of porphyrins in your body. No specific drug interaction studies have been performed.

Press Release Templates

Please copy and paste into your press release template, then personalize for your facility.

Version: Promoting the availability of BLC with Cysview

{Facility} Offers Innovative Imaging Agent to Improve Detection of Certain Bladder Cancers

Blue Light Cystoscopy with Cysview® Detects More Non-Muscle Invasive Bladder Cancer Tumors Than Use of Standard Diagnostic Technology¹

{Location, Date} – {Facility} is one of a limited number of medical centers nationwide that offer Blue Light Cystoscopy with Cysview® (hexaminolevulinate hydrochloride). Cysview is an FDA-approved, optical imaging agent that makes non-muscle invasive bladder cancer glow bright pink in blue light so urologists can see tumors better.¹

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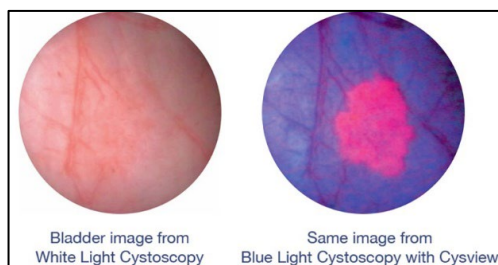
“Bladder cancer is difficult to detect and has a high rate of recurrence. Incomplete tumor removal and an inaccurate diagnosis can result in incomplete treatment. In addition, patients may experience serious complications and a lower chance of survival if they have aggressive tumors that get missed,” noted {Physician Spokesperson, Title}. “Blue Light Cystoscopy with Cysview represents an important advancement in diagnostic technology, enabling more accurate diagnosis of non-muscle invasive bladder cancer compared to the standard technique.”

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[Sample Quote:]

“The availability of Blue Light Cystoscopy with Cysview is in keeping with our commitment to advancing patient care,” said {Facility Spokesperson}.

“At {Facility}, patients with known or suspected bladder cancer undergo diagnostic procedures performed by physicians who have been specially trained in the use of this innovative technology.”

For an appointment, call {Facility Phone} or visit our website {Facility Website}.

References: 1. National Cancer Institute. SEER Stat Facts: Bladder Cancer 2022. <https://seer.cancer.gov/statfacts/html/urinb.html>. Accessed February 15, 2023. 2. Globocan. Prevalence by population 2020. Available at: <http://gco.iarc.fr/today/>. Accessed February 15, 2023. 3. Globocan. New cases by population 2020. Available at: <http://gco.iarc.fr/today/>. Accessed February 15, 2023. 4. Efsthathiou J, Zietman FAL, Coen JJ, et al. Bladder Cancer. In: *Clinical Radiation Oncology*. 3rd ed; 2012:1099-1123. Available at <https://www.sciencedirect.com/science/article/pii/B9781437716375000523>. Accessed February 15, 2023. 5. Cysview [prescribing information]. 2019:1-4. 5. Chang SS, Boorjian SA, Chou R, et al. Diagnosis and Treatment of Non-Muscle Invasive Bladder Cancer: AUA/SUO Guideline. *J Urol*. 2016;196(4):1021-1029.

Important Risk & Safety Information for Cysview (hexaminolevulinate HCl)

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Press Release Templates

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Version: Promoting the addition of flexible technology for BLC with Cysview

{Facility} Adds New Technology to Expand Its State-of-the-Art Bladder Cancer Care Blue Light Cystoscopy with Cysview® Detects More Non-Muscle Invasive Bladder Cancer Tumors Than Use of Standard Diagnostic Technology¹

{Location, Date} – {Facility} is excited to announce that we now offer the Blue Light Cystoscopy (BLC®) procedure for bladder cancer detection and surveillance in both our clinic and operating room settings. With the acquisition of new flexible procedure technology, {Facility} is one of only XX locations in the country able to offer the full continuum of care using Blue Light Cystoscopy with Cysview® (hexaminolevulinate hydrochloride).

Cysview is an FDA-approved, optical imaging agent that makes non-muscle invasive bladder cancer (NMIBC) glow bright pink in blue light so urologists can see tumors better.¹ {Facility} is one of a limited number of medical facilities nationwide that offer Blue Light Cystoscopy with Cysview at all.

[Sample Quote:]

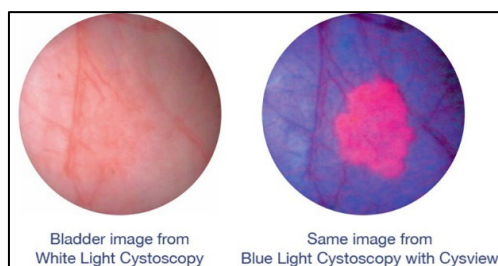
“Bladder cancer is difficult to detect and has a high rate of recurrence. Incomplete tumor removal and an inaccurate diagnosis can result in incomplete treatment. In addition, patients may experience serious complications and a lower chance of survival if they have aggressive tumors that get missed,” noted {Physician Spokesperson, Title}. “Blue Light Cystoscopy with Cysview represents an important advancement in diagnostic technology, enabling more accurate diagnosis of non-muscle invasive bladder cancer compared to the standard technique. By making it available in clinic as well as in the OR, we are creating a more convenient experience for our patients while offering the same excellent quality of care.”

Cysview is indicated for use in the cystoscopic detection of non-muscle invasive bladder cancer, including carcinoma in situ (CIS), among patients suspected or known to have lesion(s) on the basis of a prior cystoscopy.¹

Bladder cancer is the sixth most common cancer in the United States.² Estimates state that more than 80,000 new cases of bladder cancer were diagnosed in the U.S. in 2020.³ {insert state or other local statistic, if available}. Up to 50% of NMIBC patients will have their bladder cancer recur – that’s the highest recurrence rate of any form of cancer.⁴

White light cystoscopy has long been the gold standard for detecting suspicious lesions during transurethral resection of bladder tumor (TURBT) procedures.⁵ Often bladder cancer lesions are hard to see and can be missed. Now, since being included in the 2016 AUA/SUO Guideline for NMIBC (amended 2020),⁵ Blue Light Cystoscopy with Cysview is becoming the gold standard.

For BLC, about an hour prior to the procedure, Cysview is placed into the bladder using a catheter. During the procedure, the urologist first looks inside the bladder using white light, then switches to blue light mode. In blue light, Cysview makes the cancer cells glow bright pink allowing the urologist to more easily identify and remove tumors.¹



[Sample Quote:]

“The availability of Blue Light Cystoscopy with Cysview is in keeping with our commitment to advancing patient care,” said {Facility Spokesperson}. “At {Facility}, patients with known or suspected bladder cancer undergo diagnostic procedures performed by physicians who have been specially trained in the use of this innovative technology.”

For an appointment, call {Facility Phone} or visit our website {Facility Website}.

References: 1. National Cancer Institute. SEER Stat Facts: Bladder Cancer 2022. <https://seer.cancer.gov/statfacts/html/urinb.html>. Accessed February 15, 2023. 2. Globocan. Prevalence by population 2020. Available at: <http://gco.iarc.fr/today/>. Accessed February 15, 2023. 3. Globocan. New cases by population 2020. Available at: <http://gco.iarc.fr/today/>. Accessed February 15, 2023. 4. Efsthathiou J, Zietman FAL, Coen JJ, et al. Bladder Cancer. In: *Clinical Radiation Oncology*. 3rd ed; 2012:1099-1123. Available at <https://www.sciencedirect.com/science/article/pii/B9781437716375000523>. Accessed February 18, 2022. 5. Cysview [prescribing information]. 2019:1-14. 5. Chang SS, Boorjian SA, Chou R, et al. Diagnosis and Treatment of Non-Muscle Invasive Bladder Cancer: AUA/SUO Guideline. *J Urol*. 2016;196(4):1021-1029.

Important Risk & Safety Information for Cysview (hexaminolevulinate HCl)

Cysview is an optical imaging agent used to detect non-muscle invasive bladder cancer in patients suspected or known to have lesion(s) on the basis of a prior cystoscopy, or in patients undergoing surveillance cystoscopy for bladder cancer. Cysview is not a replacement for random bladder biopsies or other procedures used in the detection of bladder cancer.

Anaphylactoid shock, hypersensitivity reactions, bladder pain, bladder inflammation (cystitis), and abnormal urine tests have been reported after administration of Cysview. The most common adverse reactions seen in clinical trials were bladder spasm, trouble urinating, discomfort when urinating, frequent urination, blood in the urine, and bladder pain.

Cysview should not be used in patients with large amounts of blood in their urine, any known allergy to Cysview or any derivative of aminolevulinic acid, or porphyria, a condition that means you already have high levels of porphyrins in your body. No specific drug interaction studies have been performed.

Key Talking Points (FAQs)

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Frequently Asked Questions about Blue Light Cystoscopy (BLC®) with Cysview® (hexaminolevulinate HCl)

Patients with bladder cancer have many choices for where to go for their care. There are more diagnostic tools and treatments now than ever before. Today, patients have an additional option when undergoing a biopsy or surgical removal of a suspected or known bladder cancer and for their follow-up, check-up cystoscopies. BLC with Cysview is an important tool that can aid in the diagnosis and management of bladder cancer.¹⁻⁴

Finding a facility that offers this option can make a huge difference in bladder cancer care. The urologists at {Facility} use BLC with Cysview to better detect and manage patients' bladder cancer.

Following are the answers to some common questions about BLC with Cysview.

Q: What is Blue Light Cystoscopy (BLC) with Cysview?

A: BLC with Cysview is a state-of-the-art drug/device technology that helps urologists better see non-muscle invasive bladder cancer (NMIBC) tumors when they look into the bladder.

During a standard cystoscopy, urologists visually inspect the inside of the bladder using a cystoscope, which is a long, thin tube that includes a video camera on the end. In the past, there was only one type of cystoscopy available – one that uses regular white light to illuminate inside the bladder. But white light does not always easily show all tumors or cancerous lesions.

BLC with Cysview uses a cystoscope equipped with both white and blue light. Before the procedure, a small amount (less than 2 oz.) of the prescription imaging agent Cysview is placed into the bladder using a catheter. Cysview makes the bladder cancer tumors glow pink in blue light, thus allowing urologists to detect significantly more bladder cancer in more patients.⁵

Q: What is Cysview's indication?

A: Cysview is an optical imaging agent indicated for use in the cystoscopic detection of carcinoma of the bladder, including carcinoma in situ (CIS), among patients suspected or known to have lesion(s) on the basis of a prior cystoscopy, or in patients undergoing surveillance cystoscopy for carcinoma of the bladder. Cysview is used with the KARL STORZ D-Light C Photodynamic Diagnostic (PDD) system to perform Blue Light Cystoscopy (BLC®) as an adjunct to white light cystoscopy.

Q: How is Cysview administered and how does it work?

A: At least one hour before the BLC procedure Cysview is instilled into the bladder through a catheter. Cysview makes tumor cells glow bright pink in blue light, but it is not a dye. It drives increased production of a natural compound inside cells. Unhealthy cells do not process out the compound as quickly as healthy cells; the resulting accumulation creates a pink glow in blue light. Studies have found that, with Cysview, there is a significant increase in the detection of non-muscle invasive bladder cancer.⁵

Q: How many patients have had BLC with Cysview?

A: BLC with Cysview has been used in more than 500,000 patients worldwide.⁶ It was approved in the US in 2010 and was included in the 2016 American Urological Association (AUA) and Society of Urologic Oncology (SUO) Guideline for Non-Muscle Invasive Bladder Cancer (amended 2020). Nearly 240 facilities in the US use BLC with Cysview. We at {Facility} have been using it since {Year}, {add if participated in clinical studies or have published}.

Q: Does BLC with Cysview work better than white light? What are the benefits of using Cysview?

A: BLC with Cysview does work better than white light alone. A Blue Light Cystoscopy uses both white and blue light for the procedure. Because Cysview causes bladder cancer cells to glow bright pink in blue light, urologists are better able to see smaller tumors and flat lesions that may not be seen with white light. The urologist can immediately remove diseased tissue, ideally leaving a clean margin of healthy tissue around the resection site. Cysview gives urologists the ability to better evaluate, identify, and remove hard-to-see tumors more accurately.¹⁻⁴

In addition, by detecting and testing more lesions, the stage and grade of a patient's cancer can be more accurately determined and appropriate management and treatment offered.

Q: Can Cysview be used as a diagnostic tool for all types of bladder cancer?

A: No. It is not suitable for muscle-invasive bladder cancer or low-risk non-muscle invasive bladder cancer (NMIBC). It is recommended for use in intermediate and high-risk NMIBC.

Bladder cancer falls into two general categories:

- Non-muscle invasive bladder cancer: About 75% of all bladder cancer is in this category, in which a tumor (also called a *lesion*) is still in the inner layer of cells of the bladder's inside wall. Subtypes include Ta, carcinoma in situ (CIS) and T1 lesions.⁷
- Muscle invasive bladder cancer (MIBC): This disease, which is less common than non-muscle invasive, occurs when the cancer has grown into deeper layers of the bladder wall. This disease is more likely to spread to other organs and is more difficult to treat. These cancers include the subtypes T2, T3, and T4.⁸

Cysview detects the first type – NMIBC – which may otherwise be hard to distinguish from healthy tissue. Due to their more advanced nature, MIBC tumors are detected through white light cystoscopy, biopsies, a manual exam, imaging and other diagnostic tests.¹

Q: What are the limitations of BLC with Cysview?

A: Cysview is not a replacement for random biopsies, which still need to be done to check whether there is any disease that has not been detected during the cystoscopic examination under white or blue light. Cysview is not used for the detection of muscle-invasive bladder cancer.

Q: Who is eligible for Cysview?

A: Anyone who is suspected of having or is known (from a previous cystoscopy) to have bladder cancer can have BLC with Cysview. As with all medical situations, the physician will work with each patient to determine if Cysview is right for his/her particular situation.

Q: Is Blue Light Cystoscopy with Cysview safe?

A: Clinical studies have shown that BLC with Cysview is safe and well-tolerated. However, no surgical procedure is free of any risk, so patients should consult their doctors regarding the risks and benefits of this procedure for their individual circumstances.

Most people are ready to go home shortly after a routine procedure. The doctor will advise each patient on how much rest and care will be needed afterward.

Q: What are the side effects associated with Blue Light Cystoscopy with Cysview?

A: Side effects of both blue light and white light cystoscopies are generally the same.

They may include:⁵

- Bladder spasms
- Discomfort while urinating
- Blood in urine
- Bladder pain
- Frequent urination

A rare side effect of Cysview use may be hypersensitivity reactions to the medication itself.

Patients must consult a physician if they are concerned about any effects they may experience after the procedure.

Q: Do physicians need to special training in this procedure?

A: Yes, urologists require special training to use Cysview and the cystoscope that has both white and blue light.

Q: Is BLC with Cysview covered by insurance?

A: Many insurance plans do cover BLC with Cysview, but coverage can vary widely. Some insurance plans do not cover it at all. Medicare covers it in certain circumstances.

We at {Facility} can help determine your coverage for the procedure. For questions or comments, please contact us at {contact info}.

References: 1. Stenzl A, Burger M, Fradet Y, et al. Hexaminolevulinate Guided Fluorescence Cystoscopy Reduces Recurrence in Patients with Nonmuscle Invasive Bladder Cancer. *J Urol*. 2010;184(5):1907-1914. 2. Grossman HB, Stenzl A, Fradet Y, et al. Long-Term Decrease in Bladder Cancer Recurrence with Hexaminolevulinate Enabled Fluorescence Cystoscopy. *J Urol*. 2012;188(1):58-62. 3. Daneshmand S, Patel S, Lotan Y, et al. Efficacy and Safety of Blue Light Flexible Cystoscopy with Hexaminolevulinate in the Surveillance of Bladder Cancer: A Phase III, Comparative, Multicenter Study. *J Urol*. 2018;199(5):1158-1165. 4. Daneshmand S, Bazargani ST, Bivalacqua TJ, et al. Blue Light Cystoscopy for the Diagnosis of Bladder Cancer: Results from the US Prospective Multicenter Registry. *Urol. Oncol*. 2018;36(8):361.e1-361.e6. 5. Cysview [prescribing information]. 2019:1-4. 6. Data on file. Photocure ASA. 7. Sexton WJ, Wiegand LR, Correa JJ, Politis C, Dickinson SI, Kang LC. Bladder cancer: a review of non-muscle invasive disease. *Cancer Control*. 2010;17(4):256-268. 8. Pulver D, Schoenberg M, Pulver F. Bladder Cancer: A Patient-Friendly Guide to Understanding Your Diagnosis and Treatment Options. Patient-Friendly Publishing; 2017.

Important Risk & Safety Information for Cysview (hexaminolevulinate HCl)

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Bladder Cancer

Bladder Cancer is a commonly diagnosed cancer that typically requires long-term care and disease management. Our experts here at {Facility} are experts in diagnosing, treating, and managing bladder cancer.

Bladder Cancer Statistics United States

- More than 700,000 men and women have bladder cancer¹
- Third most common cancer for men²

Inside the Bladder

- Bladder cancer occurs in one of the layers of the bladder lining.³
- The deeper the layer, the more difficult the cancer is to treat.³
- Bladder cancer limited to the uppermost layers is categorized as superficial or non-muscle invasive.⁴
- Cancer that has grown in deeper layers of the bladder wall are muscle invasive.⁴

Beyond the Bladder⁵

- Bladder cancer can spread beyond the bladder.
- In men, the prostate and seminal vesicles are at risk.
- For women, the risk is to their cervix, uterus, and vagina.
- Can go beyond the pelvic area to lymph nodes around the heart.
- Other organs most commonly at risk are the lung, liver, and bones.

Common Risk Factors⁶

- **Smoking:** Smokers have double the chances of getting bladder cancer than those who don't smoke.
- **Chemical exposure:** Some have been directly linked to bladder cancer, while others are merely suspected.
- **Race:** Caucasians are at greater risk than African Americans; and Asians have the lowest incidence.
- **Age:** Risk increases with age, but bladder cancer can occur at any age.
- **Gender:** Men are at greater risk than women.
- **Chronic bladder inflammation:** While urinary tract infections, kidney stones and bladder stones don't cause bladder cancer, they have been linked to it.

Common Signs⁶

- **Blood in the urine** – even if painless, light, infrequent, or invisible to the naked eye
- **Urination irregularities** – irritation, urgency, frequency, and/or a constant need to urinate
- A simple **urine test or culture** can determine whether the signs are serious or not

Means of Diagnosis

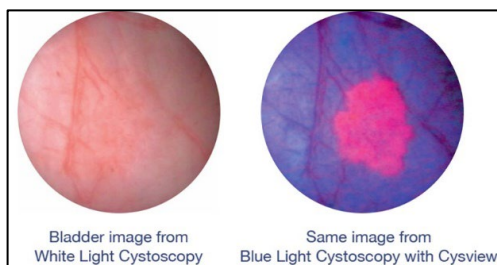
- A urine cytology, where a doctor uses a microscope to look for cancer cells in the urine
- An internal bladder exam called a *cystoscopy*
- A biopsy on suspicious tissue or tumors removed from the bladder

The Cystoscopy

- A standard procedure for evaluating the bladder and urethra⁷
- Conducted using a long, thin camera (a *cystoscope*) inserted through the urethra into the bladder⁷
- Done in the operating room under general anesthesia or in a medical office with moderate sedation or pain management
- A standard cystoscopy uses everyday white light to help the doctor visually assess the general health of the bladder and find irregularities to be further investigated

Blue Light Cystoscopy with Cysview® (hexaminolevulinate HCl)⁸

- Here at {Facility} our urologists have the option to enhance a cystoscopy procedure with the latest technology – blue light equipment and an optical imaging agent called Cysview.
- Cysview makes bladder cancer glow bright pink under blue light.
- The addition of blue light and Cysview can significantly improve detection of non-muscle-invasive bladder cancer compared to white light alone.
- With enhanced visibility, more cancer can be removed.



Staging and Grading

Staging identifies location of a bladder cancer tumor in relation to the bladder's inner lining. Knowing the stage helps the doctor can plan the best treatment.

- Is the cancer limited to the bladder lining?
- Has the cancer invaded the bladder wall?
- Has the cancer spread beyond the bladder?
- Where else has the cancer spread?

These are the different stages of bladder cancer:⁹

- T0: No tumor
- Ta: Papillary tumor that has not invaded the bladder wall
- TIS (CIS): Carcinoma in situ, which is a non-invasive, flat, high-grade (G3) cancer
- T1: Tumor that has invaded the connective tissue under the surface lining of the bladder
- T2: Tumor has invaded the muscle layer
- T3: Tumor has penetrated the bladder wall and invaded the fat layer
- T4: Tumor has invaded other organs

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Important Risk & Safety Information for Cysview (hexaminolevulinate HCl)

Cysview is an optical imaging agent used to detect non-muscle invasive bladder cancer in patients suspected or known to have lesion(s) on the basis of a prior cystoscopy, or in patients undergoing surveillance cystoscopy for bladder cancer. Cysview is not a replacement for random bladder biopsies or other procedures used in the detection of bladder cancer.

Anaphylactoid shock, hypersensitivity reactions, bladder pain, bladder inflammation (cystitis), and abnormal urine tests have been reported after administration of Cysview. The most common adverse reactions seen in clinical trials were bladder spasm, trouble urinating, discomfort when urinating, frequent urination, blood in the urine, and bladder pain.

Cysview should not be used in patients with large amounts of blood in their urine, any known allergy to Cysview or any derivative of aminolevulinic acid, or porphyria, a condition that means you already have high levels of porphyrins in your body. No specific drug interaction studies have been performed.