Exploring an Advancement in Hemophilia Care With HYMPAVZI™

Learn about the design and development of HYMPAVZI, a monoclonal anti-TFPI antibody, and how it may offer an innovative treatment approach for appropriate patients living with hemophilia. Explore clinical data and real-life scenarios that showcase the efficacy and safety of HYMPAVZI. Discover the potential ease of use of a fixed-dose pen for subcutaneous injection and its real-world application in managing hemophilia.

SUNDAY

June 22, 1:45-2:30 PM EST

ISTH 2025, Washington, DC Product Theater 3, Room 206



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Loma Linda University

California, USA

AGENDA

Time	Title	Speaker
5 min	The design and development of HYMPAVZI	Dr William Somers
5 min	The innovative HYMPAVZI mechanism of action	Dr Margareth Ozelo
15 min	The efficacy and safety of HYMPAVZI: results from the BASIS trial	Dr Margareth Ozelo
10 min	Clinical experience with HYMPAVZI in real-world settings	Dr Akshat Jain
10 min	Audience Q&A	

INDICATION

HYMPAVZI is indicated for routine prophylaxis to prevent or reduce the frequency of bleeding episodes in adult and pediatric patients 12 years of age and older with:

- hemophilia A (congenital factor VIII deficiency) without factor VIII inhibitors, or
- hemophilia B (congenital factor IX deficiency) without factor IX inhibitors.

IMPORTANT SAFETY INFORMATION

HYMPAVZI is a tissue factor pathway inhibitor (TFPI) antagonist and may increase the risk of thromboembolic complications. Interrupt HYMPAVZI prophylaxis if diagnostic findings consistent with thromboembolism occur and manage as clinically indicated. If factor VIII or factor IX products are indicated in a patient receiving HYMPAVZI prophylaxis, the minimum effective dose of factor VIII or factor IX according to the product label is recommended.

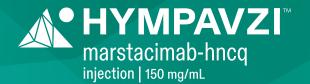
TFPI: tissue factor pathway inhibitor

Please see Important Safety Information continued on next page and full Prescribing Information, and Medication Guide, <u>here</u>.









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HYMPAVZI may cause hypersensitivity reactions (including, but not limited to, urticaria and pruritus). If HYMPAVZI-treated patients develop a severe hypersensitivity reaction, advise patients to discontinue HYMPAVZI and seek immediate emergency treatment.

Based on its mechanism of action, **HYMPAVZI** may cause fetal harm when administered to a pregnant woman. Verify that females of reproductive potential are not pregnant prior to initiating HYMPAVZI. Advise pregnant women of the potential risk to the fetus. Advise females of reproductive potential to use effective contraception during treatment with HYMPAVZI and for 2 months after the last dose.

A serious adverse reaction of peripheral swelling occurred in one patient. Adverse reactions reported in ≥3% of patients treated with HYMPAVZI in clinical trials included injection site reaction (9% of patients); headache (7% of patients); pruritus (3% of patients).

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