

(Cover)

Hylaform[®] (hylan B gel) Explained

Before you begin your Hylaform gel treatments, please review this important information.

Introduction

The way your skin looks is directly related to the way your skin is supported. As we age, the natural support layers in the skin break down resulting in the formation of wrinkles. Hylaform gel, a clear gel containing a purified form of hyaluronic (hī 'ă-lū-ron'ik) acid, adds volume lost during the aging process by temporarily smoothing out facial lines and wrinkles.

Hylaform gel is injected just under the skin's surface in order to temporarily correct wrinkles. Treatment results are immediate. Over time, the gel will gradually break down and be naturally absorbed by your body. After the initial treatment, an additional treatment of Hylaform gel may be necessary to achieve the desired level of correction. The need for an additional treatment may vary from patient to patient. Your physician will work with you to develop a treatment program to meet your individual needs.

The materials provided are intended for educational purposes only. They are not a substitute for actual medical care. Persons requiring diagnosis or treatment, or who have specific questions related to their condition or care, are urged to discuss them with their health care provider.

What is hyaluronic acid?

Hyaluronic acid is a naturally occurring sugar. It is found in the human body in the skin, cartilage, joints and the eye.

In skin tissue, hyaluronic acid fills the space between collagen and elastin fibers. The role of hyaluronic acid in skin is to deliver nutrients, hydrate the skin by holding in water, and to act as a cushioning agent.

What is Hylaform gel?

Hylaform gel is a sterile, clear, colorless dermal (skin) filler gel implant made of chemically modified hyaluronic acid derived from avian (bird) source. Hyaluronic acid is a naturally occurring substance found in the fluids surrounding cells and tissues. It is chemically, physically and biologically similar in the tissues of all species. Hylaform gel is made from highly purified natural hyaluronic acid that is gradually absorbed by your body through natural mechanisms.

What are dermal (skin) fillers?

Dermal fillers are substances that are injected just below the surface of the skin temporarily adding volume, thereby filling lines, wrinkles and folds from the inside out. Dermal fillers can temporarily restore a smoother appearance.

What is Hylaform gel used for?

The gel is injected into skin tissue for correction of moderate to severe facial wrinkles and folds (such as nasolabial folds).

Where does Hylaform gel come from?

The gel is produced from materials of avian (bird) origin and contains extremely small amounts of avian protein. Because of this, you should speak to your physician and you should not use Hylaform gel if you have any known allergies to avian protein.

How does Hylaform gel work?

Hylaform gel is injected just beneath the skin surface temporarily adding volume to the layers of the skin that have deteriorated due to age and other factors. The gel, when injected, is used to raise depressions in the skin, providing temporary correction of wrinkles and folds.

What is involved in Hylaform gel treatment?

In general there are three steps: a consultation with your physician, a series of treatments (injections), and periodic touch-up treatments, as described previously.

Do the injections hurt?

In general, injections may cause some discomfort. Hylaform gel is injected directly into the skin using a fine needle to reduce injection discomfort. Physicians may choose to anesthetize the treatment area to further minimize discomfort. Please consult your physician.

Is the product safe?

Yes for most people. The primary ingredient in Hylaform gel is hyaluronic acid which is a component of skin. The gel has undergone extensive testing including scientific clinical trials to establish safety and effectiveness. The gel has been approved for injection into the skin for correction of moderate to severe facial wrinkles and folds (such as nasolabial folds) by the U.S. Food and Drug Administration (FDA). See "Are there any reasons why I should not receive Hylaform gel?" section below.

Can anyone be treated with Hylaform gel?

Your physician will ask about your medical history, including allergies, to determine if you are an appropriate candidate for treatment.

Were Adverse Events noted during the initial treatment clinical trial?

Based on clinical studies redness, bruising, swelling, pain, bumps, tenderness and itching may occur as a result of the injection with Hylaform gel. Most of these symptoms were mild and went away. As with all procedures that involve an injection through the skin, there is a risk of infection.

Side effects reported during the 12 weeks following treatment were categorized according to reported severity (see Table 1).

Table 1A – Initial Treatment Phase Injection Procedure Related Side Effects by Maximum Severity Occurring in >5% of Patients [Number (%) of Patients]

Primary System Organ Class/Preferred Term			Hylaform N = 133				Zyplast N = 128			
	Hylaform Total	Zyplast Total	None	Mild	Mod*	Severe	No ne	Mild	Mod*	Severe
At least 1 adverse event	111 (84)	109 (85)	22 (17)	105 (79)	6 (5)	0 (0)	19 (15)	105 (82)	2 (2)	2 (2)
General disorders and administration site conditions	111 (84)	109 (85)	22 (17)	105 (79)	6 (5)	0 (0)	19 (15)	105 (82)	2 (2)	2 (2)
Injection site redness	84 (63)	86 (67)	49 (37)	83 (62)	1 (1)	0 (0)	42 (33)	85 (66)	1 (1)	0 (0)
Injection site bruising	54 (41)	39 (30)	79 (59)	52 (39)	2 (2)	0 (0)	89 (70)	37 (29)	2 (2)	0 (0)
Injection site swelling	47 (35)	53 (41)	86 (65)	45 (34)	2 (2)	0 (0)	75 (59)	52 (41)	1 (1)	0 (0)
Injection site pain	42 (32)	29 (23)	91 (68)	40 (30)	2 (2)	0 (0)	99 (77)	26 (20)	1 (1)	2 (2)
Injection site itching	10 (8)	11 (9)	123 (92)	10 (8)	0 (0)	0 (0)	117 (91)	11 (9)	0 (0)	0 (0)
Injection site peeling	3 (2)	7 (6)	130 (98)	3 (2)	0 (0)	0 (0)	121 (95)	7 (6)	0 (0)	0 (0)

Mod = Moderate

**Table 1B – Repeat Treatment Phase
Injection Procedure Related Adverse Events by Maximum Severity Occurring in >5% of
Patients [Number (%) of Patients]**

Primary System Organ Class/Preferred Term			Hylaform N = 96			Hylaform Plus N = 96		
	Hylaform Total	Hylaform Plus Total	Mild	Mod [*]	Severe	Mild	Mod [*]	Severe
At least 1 adverse event	87 (91)	92 (96)	85 (89)	2 (2)	0 (0)	90 (94)	1 (1)	1 (1)
General disorders and administration site conditions	87 (91)	92 (96)	85 (89)	2 (2)	0 (0)	90 (94)	1 (1)	1 (1)
Injection site erythema	73 (76)	71 (74)	72 (75)	1 (1)	0 (0)	70 (73)	1 (1)	0 (0)
Injection site swelling	50 (52)	51 (53)	50 (52)	0 (0)	0 (0)	51 (53)	0 (0)	0 (0)
Injection site pain	46 (48)	51 (53)	45 (47)	1 (1)	0 (0)	50 (52)	1 (1)	0 (0)
Injection site bruising	34 (35)	42 (44)	34 (35)	0 (0)	0 (0)	41 (43)	0 (0)	1 (1)
Injection site nodule (lumps/bumps)	21 (22)	25 (26)	20 (21)	1 (1)	0 (0)	25 (26)	0 (0)	0 (0)
Injection site tenderness	17 (18)	19 (20)	17 (18)	0 (0)	0 (0)	19 (20)	0 (0)	0 (0)
Injection site pruritus	11 (12)	10 (10)	11 (12)	0 (0)	0 (0)	10 (10)	0 (0)	0 (0)
Injection site discoloration	7 (7)	7 (7)	7 (7)	0 (0)	0 (0)	7 (7)	0 (0)	0 (0)

Mod = Moderate

Table 2A: Initial Treatment Phase Duration of Procedure or Device Related Events Occurring in Greater than 5% of Patients

Primary System Organ Class/Preferred Term	Hylaform gel n = 133 n (%)					Zyplast n = 128 n (%)				
	≤ 3 days	4 - 7 days	8 - 14 days	> 14 days	Total	≤ 3 days	4 - 7 days	8 - 14 days	> 14 days	Total
Injection site erythema	53 (40)	16 (12)	13 (10)	2 (2)	84 (63)	59 (46)	11 (9)	5 (4)	11 (9)	86 (67)
Injection site bruising	19 (14)	23 (17)	10 (8)	2 (2)	54 (41)	10 (8)	21 (16)	5 (4)	3 (2)	39 (31)
Injection site swelling	31 (23)	12 (9)	4 (3)	0 (0)	47 (35)	38 (30)	12 (9)	0 (0)	3 (2)	53 (41)
Injection site pain	39 (29)	2 (2)	1 (1)	0 (0)	42 (32)	22 (17)	5 (4)	1 (1)	1 (1)	29 (23)
Injection site pruritus	8 (6)	0 (0)	1 (1)	2 (2)	11 (8)	7 (6)	2 (2)	2 (2)	0 (0)	11 (9)
Injection site desquamation	1 (1)	1 (1)	1 (1)	0 (0)	3 (2)	3 (2)	3 (2)	1 (1)	0 (0)	7 (6)

*Duration refers to number of days irrespective of onset of Adverse Event to the date of the study device implantation

Hylaform related adverse events occurred infrequently in both groups and were primarily of mild intensity; 2 patients (2%) experienced 3 events in the Hylaform group, and 9 patients (7%) experienced 14 events in the Zyplast group. The Hylaform related side effects were redness, hardening and itching.

Clinical trial side effects unrelated to the injection procedure reported in the Hylaform treatment group occurring in greater than 1% of patients (n=133) were inflammation of the nose and throat (5.3%), headache (4.5%), influenza (3.8%), rash (3%), conjunctivitis (1.5%), and sinusitis (1.5%).

**Table 2B – Repeat Treatment Phase
Duration of Procedure or Device Related Events Occurring in > 5% of Patients
[Number (%) of Patients]**

Primary System Organ Class/Preferred Term	Hylaform N = 96					Hylaform Plus N = 96				
	≤3 days	4 - 7 days	8 -<14 days	≥ 14 days	Total	≤3 days	4 - 7 days	8 -< 14 days	≥ 14 days	Total
Injection site erythema	55 (57)	16 (17)	0 (0)	2 (2)	73 (76)	54 (56)	14 (15)	1 (1)	2 (2)	71 (74)
Injection site swelling	44 (46)	6 (6)	0 (0)	0 (0)	50 (52)	42 (44)	8 (8)	1 (1)	0 (0)	51 (53)
Injection site pain	41 (43)	5 (5)	0 (0)	0 (0)	46 (48)	45 (47)	6 (6)	0 (0)	0 (0)	51 (53)
Injection site bruising	17 (18)	14 (15)	3 (3)	0 (0)	34 (35)	20 (21)	16 (17)	5 (5)	1 (1)	42 (44)
Injection site nodule (lumps/bumps)	10 (10)	2 (2)	4 (4)	6 (6)	22 (23)	12 (13)	4 (4)	5 (5)	4 (4)	25 (26)
Injection site tenderness	16 (17)	1 (1)	0 (0)	0 (0)	17 (18)	18 (19)	1 (1)	0 (0)	0 (0)	19 (20)
Injection site pruritus	10 (10)	1 (1)	0 (0)	0 (0)	11 (12)	9 (9)	1 (1)	0 (0)	0 (0)	10 (10)
Injection site discoloration	5 (5)	1 (1)	1 (1)	0 (0)	7 (7)	6 (6)	1 (1)	0 (0)	0 (0)	7 (7)

*Duration refers to number of days irrespective of onset of Adverse Event to the date of the study device implantation

Device-related adverse events occurred infrequently in both groups (a total of 5 events) and all were of mild intensity. One patient (1%) on the Hylaform Plus side experienced involuntary muscle contractions; 1 patient (1%) on the Hylaform side experienced an injection site nodule; 1 patient (1%) experienced a sterile abscess on both the Hylaform Plus side and the Hylaform side (two events), and one patient (1%) experienced dizziness (non-NLF).

Clinical trial adverse events unrelated to either the device or the injection procedure and occurring in greater than 1% of patients (n=96) were contusion 3 (3.1%), back pain 2 (2.1%), dermatitis not otherwise specified 2 (2.1%), excoriation 2 (2.1%), herpes simplex 2 (2.1%), influenza 2 (2.1%), lip blister 2 (2.1%), and postoperative bruise 2 (2.1%).

Are there any reasons why I should not receive Hylaform?

- Hylaform gel must not be injected into blood vessels; doing so could cause the blood to stop flowing in that area. A blocked vessel could result in temporary discoloration of the treated area or in tissue death leading to a scab and/or scar formation.
- Hylaform gel must not be injected into areas where any infection or skin eruptions such as cysts, pimples, rashes, or hives, are present.
- The majority of reactions to the injection are redness, bruising, swelling, and pain that begin early after the injection and last less than 7 days.

What else should I know about Hylaform?

- Hylaform gel is indicated for injection into the skin for correction of moderate to severe facial wrinkles and folds (such as nasolabial folds, the lines that run from the nose to the corner of the mouth).
- The safety and effectiveness of Hylaform gel use longer than one year has not been evaluated in clinical trials.

- As with all injections into the skin, the injection of Hylaform gel has a risk of infection.
- The safety of Hylaform gel for use during pregnancy, in breastfeeding females or in patients under 18 years has not been studied.
- Hylaform gel should not be used in patients with a known potential for keloid formation or hypertrophic scarring (heavy scarring) or pigmentation disorders.
- Hylaform gel should be used with caution in patients on immunosuppressive therapy.
- Patients who are using substances that can prolong bleeding, such as aspirin, non-steroidal anti-inflammatory drugs and warfarin may, as with any injection, have increased bruising or bleeding at injection sites.
- After receiving injections of Hylaform minimize exposure of the treated areas to excessive sun, UV lamp exposure, and extreme cold weather, until any swelling and redness have disappeared.
- If laser treatment, chemical peeling or similar procedure is considered before or after treatment with Hylaform gel, there is a possible risk of an inflammatory reaction (such as redness, swelling) at the Hylaform injection site.

What are the potential concerns when using Hylaform?

It is possible for the needle to be accidentally placed through a blood vessel during injection, which could result in a temporary change in color or in tissue death in the treated area leading to a scab and/or scar formation.

How will my skin look and feel immediately after treatment?

Most people feel comfortable in resuming their normal activities following treatment. Temporary puffiness of the treated areas, however, should be expected.

As with any injection, you may also notice temporary redness, slight bruising, and tenderness around the treatment sites. Like the puffiness, these are normal occurrences and all should clear up within a few days. Although the injected material is generally not visible through the skin, some people have reported that they were initially able to feel the outline of the injected material.

When should I notify my physician?

Any redness and/or visible swelling that lasts for more than a few days may indicate a reaction to the material. Be sure to report any symptoms to your physician.

What concerns should I have after treatment?

Your physician will review with you what to expect following treatment with Hylaform gel. If there is swelling or redness after the injection you should minimize your exposure to sun and UV lamp. Within the first 24 hours, patients should avoid strenuous exercise, extensive sun or heat exposure and alcoholic beverages as exposure to these may cause temporary redness and swelling at injection sites. Make-up may be applied a few hours after treatment if no complications are present (e.g., open wounds, bleeding and infection).

When may I apply make-up?

Make-up may be applied a few hours after treatment if no complications are present such as open wounds, bleeding and infection.

Does the correction last forever?

No. Correction is temporary, therefore, touch-up injections as well as repeat injections are usually needed to maintain optimal correction. The need for touch-ups will be influenced by ongoing

mechanical forces (such as smiling or other muscle activity) and biological changes (such as aging) that caused the original skin depressions.

A controlled clinical study was designed to evaluate the effectiveness of Hylaform gel at 12 weeks. Hylaform gel was found to be equivalent to the control material (Zyplast implant) in the correction of nasolabial folds at the end of the study using the independent review of photographs of patients who received treatment. The correction looked the best during the first 2 weeks after treatment. Photographic assessment showed that, on average, wrinkles had returned to normal at 12 weeks. However, visual assessment of correction by the investigators and masked patients during the controlled clinical study support the effectiveness of Hylaform and Zyplast at 12 weeks.

How often will I require treatment?

Everyone's skin is different. That is why the timing of any additional treatment varies from person to person. Over time Hylaform gel will be absorbed by your body; this is why you may want ongoing treatments. If you choose not to continue with your treatment, any remaining gel is simply absorbed by your body over time and your skin gradually returns to its natural shape.

Without touch-up injections, how will my skin look?

Correction will reduce gradually until your skin looks like it did before treatment with Hylaform gel. Touch-up injections will help you maintain correction of the skin surface.

For more information write or call:

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INAMED Aesthetics
Attn: Customer Care
5540 Ekwil Street
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800.766.0171

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[NOTE: Sign, remove, and file in patient record]

Record of Consultation

I have read the brochure titled "Hylaform[®] gel Explained" in its entirety and have discussed the risks and benefits of treatment with my physician or his/her representative. I understand the information provided.

Patient's Signature

Date

I have discussed the risks and benefits of Hylaform gel treatment with this patient, have answered his/her questions, and find him/her an appropriate candidate for treatment with Hylaform gel.

Physician's Signature or
Physician's Representative

Date

(Back Cover)

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