An Educational Dinner Program
BROUGHT TO YOU BY
BOEHRINGER INGLEHEIM & WSRC DISTRICT 6:

Advancing the Treatment of Idiopathic Pulmonary Fibrosis (IPF) with Esbriet

Thursday September 21st 2017 at 1800

See flyer below for more information.

YOU'RE INVITED TO ATTEND A SPEAKER PROGRAM

Advancing the Treatment of Idiopathic Pulmonary Fibrosis (IPF) With Esbriet® (pirfenidone)

The following modules will be presented at this program:

- ✓ Understanding IPF
- ✓ Unraveling the IPF Diagnosis
- Managing the IPF Patient
- ✓ Making the Esbriet® (pirfenidone) Choice
- ✓ A Case-Based Approach to the Diagnosis and Treatment of IPF
- An IPF Patient's Perspective: A Short Video

Presented by:

Daniel Dilling, MD

Loyola University Medical Center

Maywood, IL

Location:

The Freight House

107 Vine Street

La Crosse, WI 54601

Date

Thursday September 21, 2017

Time

Arrival Time 6:00 PM

Presentation Time 6:30 PM

Please RSVP to Your Genentech Representative by: 9/18/2017

Rep: Holly Wayne **Cell Number:** 608-852-0739

Or please register at http://genersvp.com **and reference event number** PRF75675

Indication

Esbriet® (pirfenidone) is indicated for the treatment of idiopathic pulmonary fibrosis (IPF).

Select Important Safety Information

Elevated liver enzymes: Increases in ALT and AST >3× ULN have been reported in patients treated with Esbriet. In some cases these have been associated with concomitant elevations in bilirubin. Patients treated with Esbriet had a higher incidence of elevations in ALT or AST than placebo patients (3.7% vs 0.8%, respectively). No cases of liver transplant or death due to liver failure that were related to Esbriet have been reported. However, the combination of transaminase elevations and elevated bilirubin without evidence of obstruction is generally recognized as an important predictor of severe liver injury that could lead to death or the need for liver transplants in some patients. Conduct liver function tests (ALT, AST, and bilirubin) prior to initiating Esbriet, then monthly for the first 6 months and every 3 months thereafter. Dosage modifications or interruption may be necessary.

Please see additional Important Safety Information on the following page, and the full Prescribing Information.