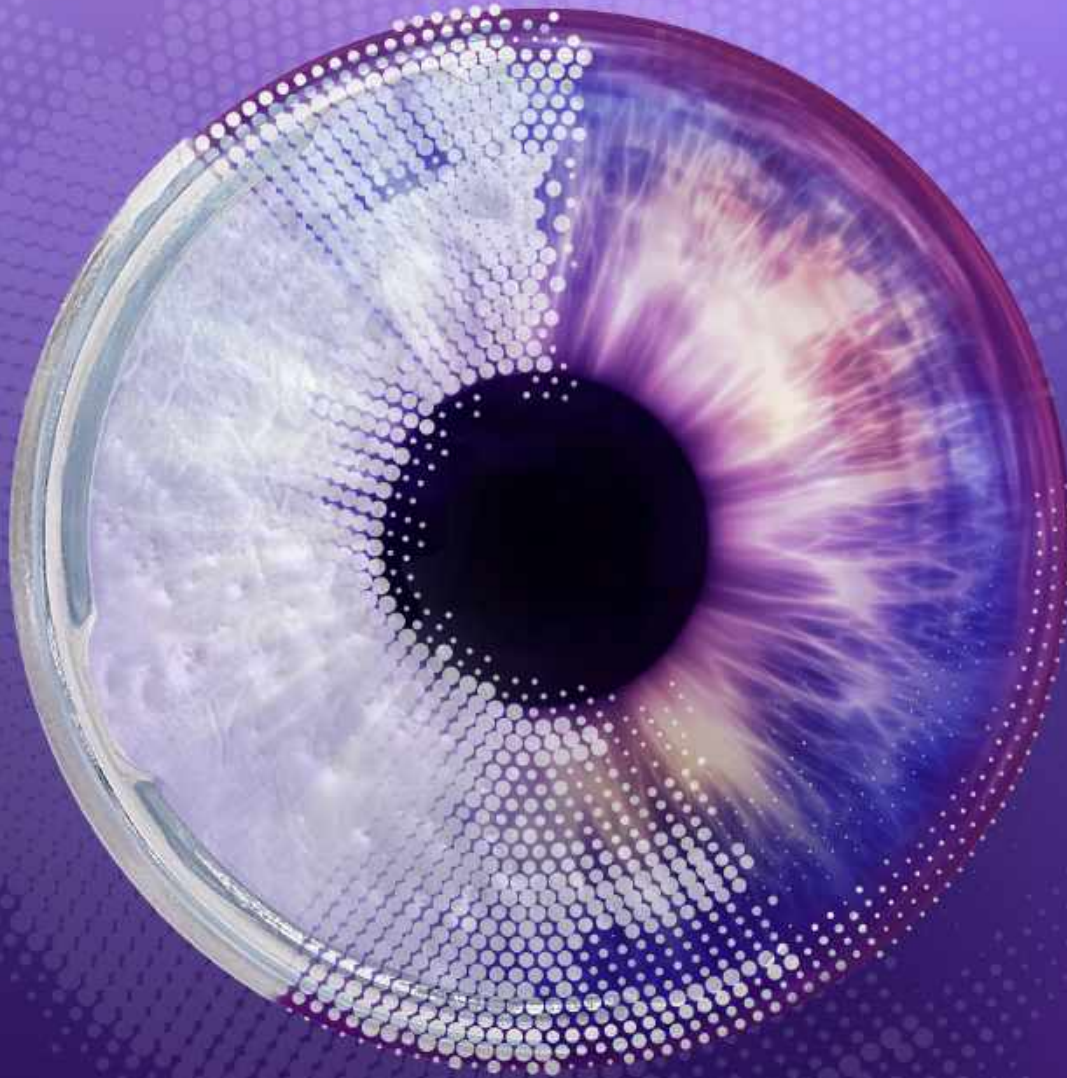


PROKERA®

START EARLY **FINISH STRONG**



Early intervention with PROKERA supports restoration of the cornea's own healing capabilities, reducing inflammation, improving corneal health, and optimizing long-term outcomes.¹⁻⁷

 **biotissue**[®]
A TissueTech Company

For patients with ocular surface disease

CORNEAL HEALING IS CRUCIAL^{1,8}

Impaired corneal healing increases risk of⁸:

- Repeated epithelial defects or erosions
- Chronic inflammation
- Scarring
- Vision loss
- Pain

The Challenge with Conventional Treatments



Corticosteroids

Increased ocular pressure, cataract formation, and infection risk^{1,9}



Eye Drops

Ocular surface changes, inflammation, and fibrosis¹⁰
May rely on a single molecule to address inflammation in multifactorial diseases^{11,12}



Bandage Contact Lenses

No therapeutic benefits, relies on body's ability to heal itself

Prolong re-epithelialization and corneal healing^{1-3,9,10}





PROKERA®

Kick-Start Corneal Healing With PROKERA®¹

PROKERA—the only FDA-cleared cryopreserved amniotic membrane—supports the corneal-healing process without harmful side effects.^{1,4,6}

- Retains Cryopreserved Amniotic Complex™, HC-HA/PTX3: Proprietary CryoTek® preservation method maintains full biologic and structural integrity equivalent to fresh tissue^{13,14}
 - **Alternative amniotic membrane solutions that are dehydrated lack crucial biologic components¹⁴**
- Helps rapidly restore the cornea's own healing capabilities with key Cryopreserved Amniotic Complex, the essential effector complex that orchestrates regenerative healing⁵



FACILITATES

neutrophil apoptosis,
polarizes M2 macrophages,
and suppresses Th1 and Th17
lymphocyte activation
to reduce inflammation⁷



PREVENTS

myofibroblast
differentiation to
prevent scarring⁷



MAINTAINS

stem cell quiescence
to promote
regenerative healing⁷

Meets the highest quality standards:

An AATB accredited tissue bank, Bio-Tissue® is the only ISO† certified manufacturer of amniotic membrane products*



*AATB = The American Association of Tissue Banks.
†ISO = International Organization for Standardization.

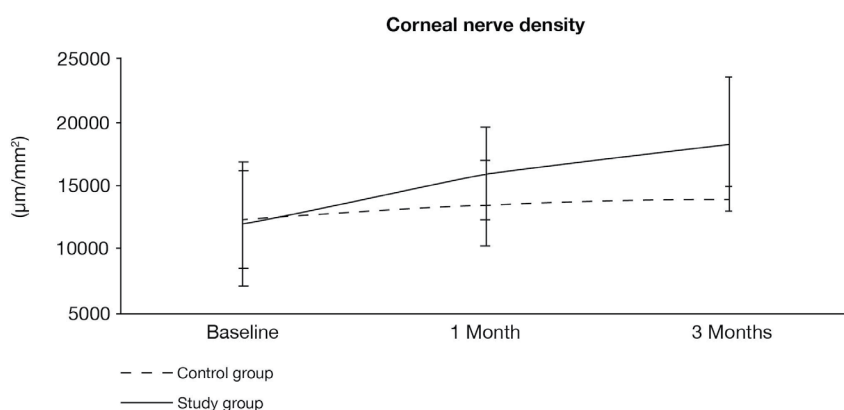
EFFECTIVE EARLY INTERVENTION^{1,2,4,6}

Demonstrated Effectiveness

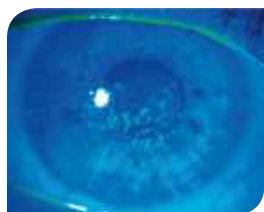
- Reduces harmful inflammation^{1,2}
- Minimizes scarring^{2,4}
- Achieves corneal clarity¹

Supporting Superior Outcomes

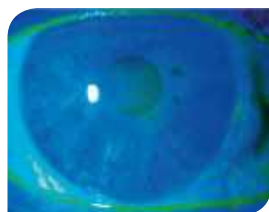
- Recent studies suggest improved corneal nerve regeneration and accelerated ocular-surface health recovery^{2,3,5}
- Same studies demonstrate significantly improved corneal nerve density and sensitivity ($P = 0.015$; $P < 0.001$)^{2,*}
- Halts fibrosis, facilitating faster re-epithelialization^{1,6}
- Superior outcomes vs bandage contact lens (BCL)^{1,†}:
 - 70% of eyes re-epithelialized by day 5 with PROKERA Slim vs only 20% with BCL
 - 90% of eyes achieved absolute corneal clarity by Day 7 with PROKERA Slim vs 0% with BCL



(a)



BEFORE PROKERA*



AFTER PROKERA*

After PROKERA photo taken three months after treatment. Standard treatment window for PROKERA is 3-7 days.






*Supported by over
360 peer-reviewed
publications and 20+ years
of proven clinical
performance.*



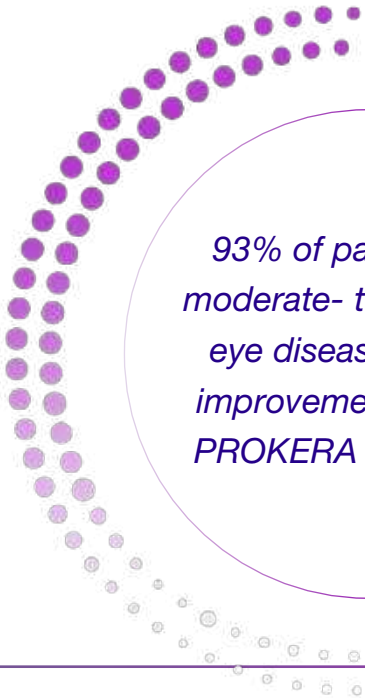
PROKERA®

Across a Range of Applications

Over 300,000 PROKERA applications for moderate-to-severe cases of:

 Delayed Healing	<ul style="list-style-type: none">• Neurotrophic keratoconjunctivitis• Exposure keratoconjunctivitis	<ul style="list-style-type: none">• Punctate keratitis• Filamentary keratitis
 Dystrophy	<ul style="list-style-type: none">• Epithelial corneal dystrophy	<ul style="list-style-type: none">• Recurrent corneal erosions
 Degeneration	<ul style="list-style-type: none">• Band keratopathy	<ul style="list-style-type: none">• Nodular corneal degeneration
 Defects	<ul style="list-style-type: none">• Corneal ulcers• Central corneal ulcer• Corneal ulcer with hypopyon	<ul style="list-style-type: none">• Marginal corneal ulcer• Mycotic corneal ulcer• Dendritic corneal ulcer
 Damage	<ul style="list-style-type: none">• Chemical burn• Thermal burn	<ul style="list-style-type: none">• Acid burn• Steven-Johnson Syndrome

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93% of patients with moderate- to-severe dry eye disease reported improvement after one PROKERA treatment.¹⁵



A family of solutions. To meet your patients' needs.



PROKERA® Slim

ComfortRING™ slim profile contours to the ocular surface for patient comfort



PROKERA®

Ideal for maintaining orbital space when prevention of closure or adhesions is required



PROKERA® Clear

Clear-View™ 6mm aperture is designed for monocular needs and for maintaining some visual clarity during application



PROKERA® PLUS

Doubled cryopreserved amniotic membrane provides an extra layer of tissue for patients needing more intensive therapy

Integration Made Easy

PROKERA can be easily incorporated into any eye care practice to optimize outcomes.



EFFECTIVE, EASY TREATMENT

- Can be easily placed during a regular office visit or used with surgical interventions
- May reduce the need for additional visits for slow-or poor-healing patients



HIGHLY REIMBURSED

- Medical device classification ensures high reimbursement
- Average Medicare reimbursement: \$1,458
- Minimizes a patient's cost-burden of treatment



MINIMAL STORAGE NEEDS

- Minimal packaging
- Conveniently stored in any onsite refrigerator or freezer

PROKERA®

*In a prospective, randomized clinical trial of 20 patients with dry eye disease. Corneal nerve density in the PROKERA Slim group (n=10) increased from $12,241 \pm 5083 \mu\text{m}/\text{mm}^2$ at baseline, to $16,364 \pm 3734 \mu\text{m}/\text{mm}^2$ at 1 month, and to $18,827 \pm 5453 \mu\text{m}/\text{mm}^2$ at 3 months ($P = 0.015$), but was unchanged in the control (n=10). Corneal sensitivity increased from $3.25 \pm 0.6 \text{ cm}$ at baseline, to $5.2 \pm 0.5 \text{ cm}$ at 1 month, and to $5.6 \pm 0.4 \text{ cm}$ at 3 months ($P < 0.001$) with corneal topography only in the PROKERA Slim group.

†In a comparative study of 10 patients post-superficial keratectomy, who had either bilateral recurrent erosion syndrome, epithelial basement membrane disease, or Salzmann nodule degeneration. The eye with more severe disease was treated with PROKERA Slim and the less severe eye was treated with BCL.

For greater patient satisfaction, start with PROKERA today.