

Introducing **Photodynamic Therapy**
for the treatment of Actinic Keratoses (AKs)
and Non-Melanoma Skin Cancers (NMSCs).

metyix[™]
methyl aminolevulinate

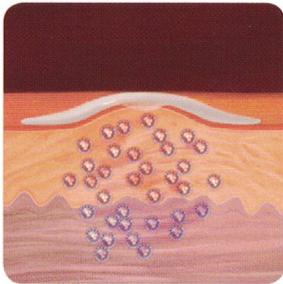
Topical Cream

Your Doctor Has Recommended Metvix

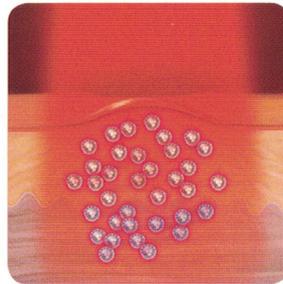
A prescription cream used with photodynamic red light therapy (PDT) to treat the following skin conditions:

- Actinic Keratoses (AKs) – lesions on the face and scalp†
- Non-Melanoma Skin Cancers

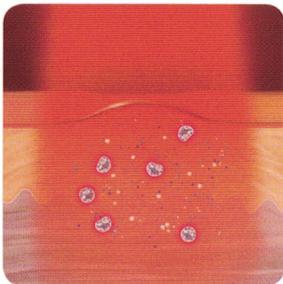
Metvix is a simple, non-invasive treatment that consists of the application of Metvix cream to the skin lesion followed by its exposure to light from a specifically designed Akitlite™ lamp. The cells in the lesion absorb the active ingredient from the Metvix cream. When exposed to light (photodynamic therapy), a chemical reaction is activated, only precancerous and cancerous cells are eliminated.^{1,2}



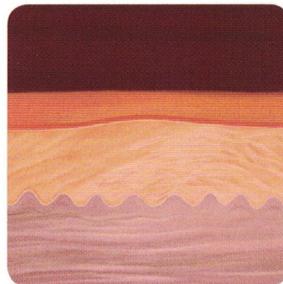
Apply Metvix cream to the skin.



Red light illumination.



Only pre-cancerous or cancerous cells eliminated



Healing occurs.

The Metvix Procedure:

Step 1: Prepare treatment area



Step 2: Apply Metvix cream



Step 3: Cover for up to 3 hours



Step 4: Illuminate with red light



Actinic Keratoses (AKs)

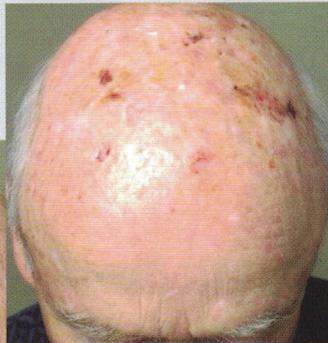
The most common pre-cancerous lesions¹⁻³

- Actinic Keratoses (AKs) are not skin cancers¹
- AKs are caused by overexposure to the sun which disrupts the development of the skin cells in the epidermis, the top layer of the skin¹
- The sun's rays damage the DNA of the skin causing it to grow at an abnormally fast rate¹
- Left untreated, AKs have the potential to develop into squamous cell skin cancers¹

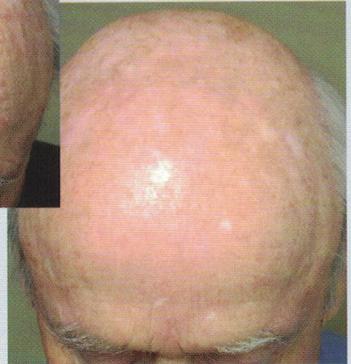
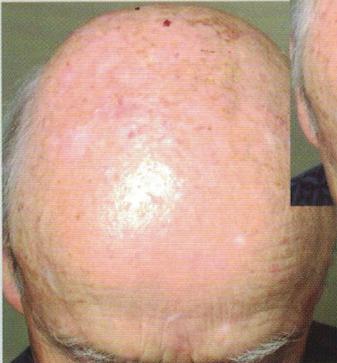


After 1 week

Before



After 6 weeks



Basal Cell Carcinomas (BCCs)

Non-Melanoma Skin Cancer

- Approximately 8 out of 10 skin cancers are basal cell carcinomas (BCCs)²
- Basal cell carcinoma is the most common form of skin cancer in Canada³
- BCC is the least dangerous but it must be treated^{2,3}
- Left untreated BCC will continue to grow, invade and destroy surrounding skin tissue eventually causing disfigurement^{2,3}
- BCCs usually occur on sun-exposed areas of the body^{2,3}



Before

After 8 days



After 15 days

After 3.5 months



What to Expect:

Before

- Prepare skin by removing scales or crusts
- Apply cream
- Cover
- Wait up to 3 hours for cream to penetrate
- Cleanse area

During

- Expose treatment area for 7 – 10 minutes to red light
- Some patients may experience a stinging or burning sensation
- Your healthcare professional may provide a cooling fan or spritz with water

After

- Protect skin from sunlight for 48 hours
- You may experience redness, pain, swelling or crusting
- If these symptoms persist past 1 week contact your physician
- Your healthcare professional will advise on aftercare

Frequently Asked Questions:

Will I experience discomfort during treatment?

Not everyone experiences discomfort; however you may feel a stinging and/or burning sensation during light therapy. If you become too uncomfortable, the illumination can be paused for a short while and then restarted.² If the area being treated is particularly sensitive, your doctor may suggest pain management strategies, such as the use of an ice pack, to reduce short-term discomfort.

Why prompt treatment is important

- Actinic Keratoses (AKs) are the most common precancerous skin lesions, often found on areas of the body that have been exposed to sun. Left untreated, AKs can sometimes develop into squamous cell carcinoma (SCC) – an aggressive type of cancer that can grow invasively into deeper layers of the skin and potentially spread to other organs.³
- Basal cell carcinoma (sBCC) is a common type of skin cancer, which often recurs. Early diagnosis and treatment is essential, since it will continue to grow, invading and destroying surrounding skin tissue.^{3,4}

How long is the treatment?

- The treatment will take approximately 3 ½ hours
- Preparation – 10-15 minutes
- Wait time for absorption of medication – 3 hours
- Activation with red light exposure – 7-10 minutes

Metvix Is An Excellent Choice For Many Patients⁴⁻⁷

Before prescribing Metvix, your doctor considered these advantages...

- Successful treatment results⁴⁻⁷
- Non-invasive procedure⁴⁻⁷
- Excellent cosmetic results⁴⁻⁷
- Large body areas or multiple lesions can be treated during a single session
- No additional home treatment needed
- Simple and discreet procedure means a limited impact on social activities
- The majority of side effects are local, limited reactions⁴⁻⁷

Metvix precision therapy may be an important part of a comprehensive skin health program – as recommended by your physician.

References:

1. Skin Cancer/Canadian Dermatology Association/ActinicKeratoses [cited Nov 30, 2013]. Available at: <http://www.dermatology.ca/skin-hair-nails/skin/skin-cancer/actinic-keratoses/>
2. *What are basal and squamous cell skin cancers?*/American Cancer Society [cited Nov 30, 2013]. Available at: www.cancer.org/Cancer/SkinCancer-BasalandSquamousCell/.../skin-c.
3. Basal Cell Skin Cancer - Canadian Dermatology Association [cited Nov 30, 2013]. Available at: <http://www.dermatology.ca/skin-hair-nails/skin/skin-cancer/basal-cell-skin-cancer/>
4. METVIX Product Monograph. Galderma Canada Inc., February 26, 2009.
5. Freeman M et al. *A comparison of photodynamic therapy using topical methyl aminolevulinate (Metvix) with single cycle cryotherapy in patients with actinic Keratoses: a prospective, randomized study.* J Dermatolog Treat. 2003; 14(2):99-106.
6. Morton C, Campbell S, *Intraindividual, right-left comparison of topical methyl aminolevulinate-photodynamic therapy and cryotherapy in subjects with actinic keratoses: a multicentre, randomized controlled study.* Br J Dermatol. 2006; 155(5):1029-36.
7. Lehmann P. *Methyl aminolevulinate-photodynamic therapy: a review of clinical trials in the treatment of actinic keratoses and nonmelanoma skin cancer.* Br J Dermatol. 2007; 156(5):793-801.