



If you're an adult with **primary IgA nephropathy**

IT'S TIME TO SEE YOUR POSSIBILITIES

Upgrade to FILSPARI®, proven to powerfully lower proteinuria and preserve kidney function by working directly in the kidneys



Not an actual patient.

WHAT IS FILSPARI® (sparsentan)?

FILSPARI is a prescription medicine used to slow kidney function decline in adults with a kidney disease called primary IgA nephropathy (IgAN), who are at risk for their disease getting worse. It is not known if FILSPARI is safe and effective in children.

IMPORTANT SAFETY INFORMATION

What is the most important information I should know about FILSPARI?

FILSPARI is only available through the FILSPARI Risk Evaluation and Mitigation Strategy (REMS) Program because of the **serious risk of liver problems and serious birth defects**. Before you begin treatment with FILSPARI, you must read and agree to all the instructions in the FILSPARI REMS Program.

Please see full Important Safety Information, including serious side effects, on page 10 of this brochure, and the [Medication Guide](#).

DISCOVER FILSPARI

RESULTS THAT MATTER

STARTING FILSPARI

If you have IgA nephropathy (IgAN), Proteinuria may be causing more damage than you realize

Although a rare disease, IgAN is a leading cause of kidney failure. Even if you don't have symptoms, IgAN **should not be ignored**. Loss of kidney function is permanent and may result in dialysis or transplant.



Proteinuria is a sign of worsening kidney damage

(Pro-teen-yur-ee-ah)

The kidneys' filters are damaged by IgAN, letting increased amounts of protein spill from your blood into the urine. This is called proteinuria.

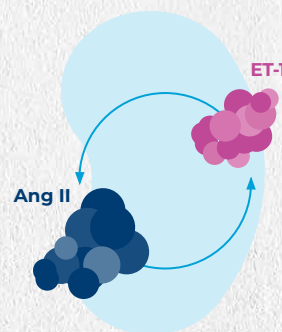
Higher levels of proteinuria are considered a major risk factor for disease worsening and loss of kidney function. It is important to monitor and treat proteinuria to preserve kidney function.

If you have consistently elevated proteinuria, your doctor may recommend a medication—typically a blood pressure medicine known as an angiotensin-converting enzyme (ACE) inhibitor or angiotensin II receptor blocker (ARB)—as your foundational treatment for managing IgAN.

Blood pressure medicines may not be enough to reduce your proteinuria and keep urine protein levels low

How does proteinuria damage your kidneys?

In IgAN, immunoglobulin A (IgA), an antibody in the blood that helps fight infections, builds up in the kidneys and disrupts their ability to filter waste from the blood. A number of undesirable processes involving **endothelin-1 (ET-1)** and **angiotensin II (Ang II)** take place in the kidneys, weakening the kidneys' filters.



ET-1 and Ang II play a key role in 2 pathways in the kidneys that are known to create a harmful cycle with proteinuria:

- They increase each other's activity, resulting in more proteinuria
- More proteinuria may lead to more ET-1 and Ang II, resulting in further kidney damage



It's best to get proteinuria below 0.3 grams per day (g/d).

IgAN treatment guidelines suggest that keeping proteinuria below 1 g/d will lower the risk of disease progression. But that may not be enough.

To help protect your kidneys, **it's vital to lower proteinuria below 0.3 g/d.**

Proteinuria below 0.3 g/d is considered complete proteinuria remission. It occurs when you have little to no protein detected in your urine.

Discover why FILSPARI® is the treatment upgrade



FILSPARI is an innovative IgAN treatment for adults proven to powerfully lower proteinuria and preserve kidney function by working at the site of damage in the kidneys.

FILSPARI is not a steroid

It is an FDA-approved once-daily pill **that does not suppress your immune system.**

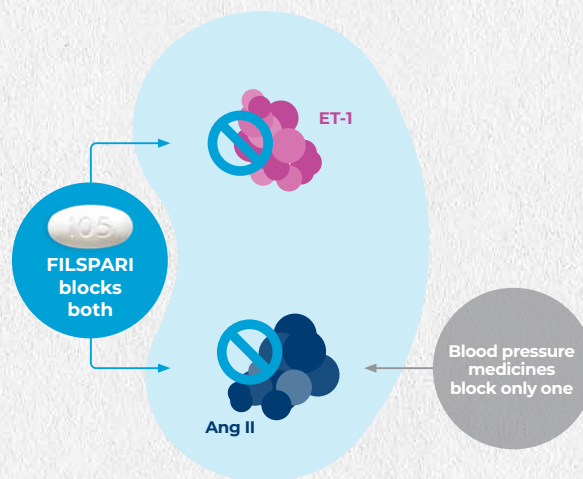


Not actual patients.

The single pill that works in 2 ways

FILSPARI takes a different approach than blood pressure medicines in treating IgAN by targeting both **ET-1** and **Ang II** in the kidneys. Blood pressure medicines that are used to treat IgAN only target Ang II.

(See [page 2](#) for more about ET-1 and Ang II.)



IMPORTANT SAFETY INFORMATION (cont'd)

FILSPARI can cause changes in liver tests. Liver failure was not observed in people treated with FILSPARI in clinical studies, but some medicines that are like FILSPARI can cause liver failure. Your healthcare provider will do blood tests to check your liver before starting FILSPARI, monthly for the first 12 months, then every three months during treatment. Your healthcare provider may temporarily stop or permanently stop treatment with FILSPARI if you have changes in your liver tests.

Stop taking FILSPARI right away if you develop any of the following signs of liver problems during treatment with FILSPARI: nausea or vomiting, pain on the upper right side of your stomach area, tiredness, loss of appetite, yellowing of the skin or the whites of your eyes (jaundice), dark “tea-colored” urine, fever, or itching.

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 **FILSPARI®**
(sparsentan) tablets
200 mg/400 mg

Powerfully lower proteinuria

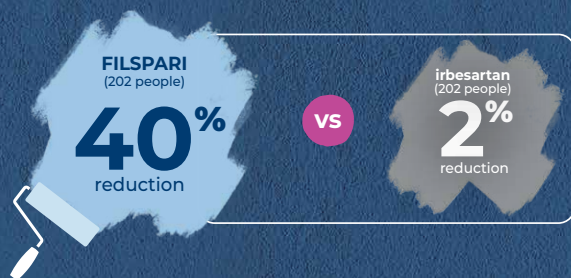
A clinical study of 404 patients compared FILSPARI® with irbesartan, a type of blood pressure medicine often used to treat IgAN. Here's what was learned from that study:

On average, **FILSPARI cut proteinuria in half** by 9 months

People taking FILSPARI and irbesartan started the study with proteinuria levels at 1.2 grams per gram (g/g). At 36 weeks, in 281 people, FILSPARI reduced proteinuria by 45% to 0.7 g/g. Irbesartan reduced proteinuria by 15% to 1.0 g/g.

And **FILSPARI kept it low for longer**

FILSPARI sustained significantly lower proteinuria through 2 years: **40% less proteinuria** (0.7 g/g) compared to only 2% (1.2 g/g) with irbesartan.



IMPORTANT SAFETY INFORMATION (cont'd)

FILSPARI can cause serious birth defects if taken during pregnancy. Patients must not be pregnant when they start taking FILSPARI, become pregnant during treatment, or for one month after stopping treatment. Patients who can become pregnant must have a negative pregnancy test before starting FILSPARI, monthly during treatment, and for one month after stopping FILSPARI.

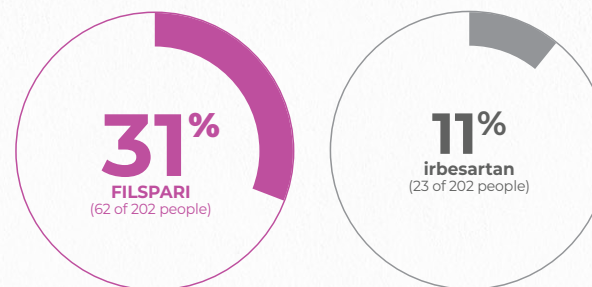
Patients who can become pregnant must use effective birth control before starting treatment with FILSPARI, during treatment with FILSPARI, and for one month after stopping FILSPARI because the medicine may still be in your body.

If you have had a tubal sterilization or have an IUD (intrauterine device) or progesterone implant, these methods may be used alone, and no other form of birth control is needed.

Proteinuria remission is possible

Complete proteinuria remission in IgAN occurs when you have little to no protein detected in your urine. During the clinical study, **more people taking FILSPARI reached complete proteinuria remission compared to people taking irbesartan.**

People reaching complete proteinuria remission (less than 0.3 g/d)



of people taking FILSPARI were able to reach **complete proteinuria remission** at any point on FILSPARI

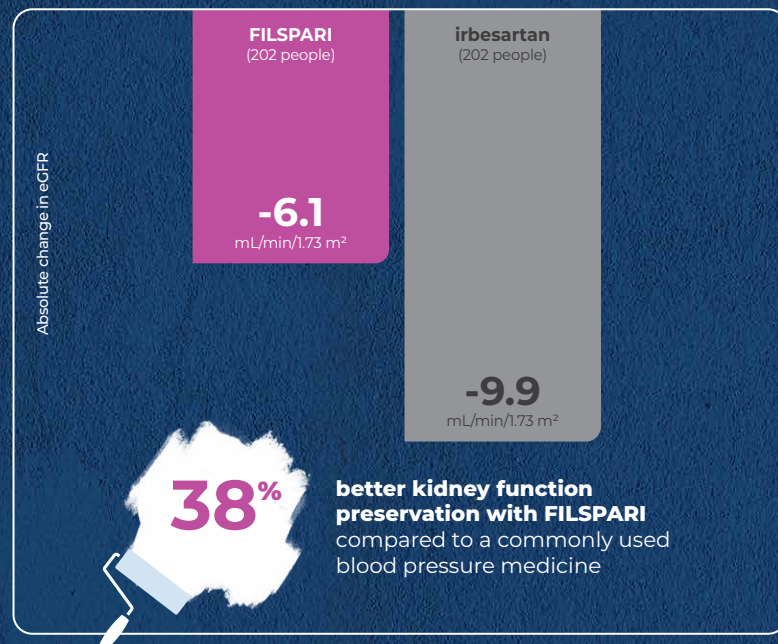
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Preserve kidney function for longer

Your estimated glomerular filtration rate (eGFR) measures how well your kidneys are functioning. The less your kidney function declines each year, the better.

FILSPARI® provided better kidney function preservation over 2 years



At the beginning of the 2-year study, eGFR was 57 mL/min/1.73 m² for people taking FILSPARI and irbesartan. As the study progressed, the benefit of FILSPARI over irbesartan improved from Year 1 (+1.9) to Year 2 (+3.8).

FILSPARI significantly slowed the loss in kidney function

Through the 2 years of the clinical study, the average decrease in kidney function was only -3.0 mL/min/1.73 m² per year with FILSPARI compared to -4.2 mL/min/1.73 m² per year with irbesartan.



Most did not need to add a steroid

97% of people taking FILSPARI **did not need to add a steroid** over the 2-year clinical study

During the study, steroids were added on to treatment only if needed. People needed steroids less frequently with FILSPARI than with irbesartan.

Of the 202 people taking irbesartan, 9% added a steroid, while only 3% of the 202 people taking FILSPARI did.

IMPORTANT SAFETY INFORMATION (cont'd)

- Talk with your healthcare provider or gynecologist (a healthcare provider who specializes in reproduction) to find out about options for effective forms of birth control that you may use to prevent pregnancy during treatment with FILSPARI.
- If you decide that you want to change the form of birth control that you use, talk with your healthcare provider or gynecologist to be sure that you choose another effective form of birth control.
- **Do not have unprotected sex.** Talk to your healthcare provider or pharmacist right away if you have unprotected sex or if you think your birth control has failed. Your healthcare provider may talk with you about using emergency birth control.

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The FILSPARI® REMS Program

A Risk Evaluation and Mitigation Strategy (REMS) is a program designed to help keep you safe. REMS programs are required by the FDA for certain medicines to manage the risk of serious side effects.

FILSPARI is only available through the FILSPARI REMS Program. The purpose of the program is to reduce risk, monitor for serious side effects, and educate patients about FILSPARI—and to make sure the benefits of FILSPARI outweigh the risks.

The REMS program allows you and your doctor to regularly monitor your liver function and check for pregnancy among those who can become pregnant, so that you can feel confident in your new treatment choice.

Possible serious side effects

Monitoring for liver problems: FILSPARI can cause changes in liver tests. Liver failure was not observed in people treated with FILSPARI in the clinical study, but some medicines that are like FILSPARI can cause liver failure.

Blood tests will be done:

- Before you start treatment with FILSPARI
- Monthly for the first 12 months
- Every 3 months after that while taking FILSPARI

Your doctor may temporarily stop or permanently stop treatment with FILSPARI if you have changes in your liver tests.

Stop taking FILSPARI and get medical help right away if you develop any of the following signs: nausea or vomiting, pain on the upper right side of your stomach area, tiredness, loss of appetite, yellowing of your skin or the white part of your eyes (jaundice), dark “tea-colored” urine, fever, or itching.

IMPORTANT SAFETY INFORMATION (cont’d)

- **Tell your healthcare provider right away if you miss a menstrual period or think you may be pregnant.**

Do not take FILSPARI if you:

- **are pregnant, plan to become pregnant, or become pregnant during treatment with FILSPARI.** FILSPARI can cause serious birth defects.
- **are taking any of these medicines:** an angiotensin receptor blocker, an endothelin receptor antagonist, or aliskiren. Ask your healthcare provider or pharmacist if you are not sure if you take one of these medicines.



With the FILSPARI REMS Program, you’re not alone. Your care team can help guide you every step of the way. Discuss questions with your doctor and visit [FILSPARI-REMS.com](https://www.filspari-rems.com) or call 1-833-513-1325 for more information.

Possible serious side effects (cont’d)

Birth defects: Do not take FILSPARI if you are pregnant, plan to become pregnant, or become pregnant during treatment. Patients who can become pregnant must use effective birth control before starting treatment with FILSPARI, during treatment with FILSPARI, and for 1 month after stopping FILSPARI because the medicine may still be in your body.

Patients who can become pregnant must have a negative pregnancy test:

- Before starting FILSPARI
- Every month during treatment
- 1 month after stopping FILSPARI

Review the list of options for acceptable birth control on page 23 of the Medication Guide, “Effective Birth Control Options,” and discuss with your doctor or gynecologist which options work best for you.



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Potential side effects of FILSPARI®

Tell your doctor if you have any side effect that bothers you or that does not go away.

Other possible serious side effects



Low blood pressure: Low blood pressure is common during treatment with FILSPARI and can also be serious. Tell your doctor if you feel dizzy, light-headed, or faint. Stay hydrated while taking FILSPARI.



Worsening of kidney function: Your doctor will check your kidney function during treatment with FILSPARI.



Increased potassium in your blood: This is common during treatment with FILSPARI and can also be serious. Your doctor will check your potassium blood level during treatment with FILSPARI.



Fluid retention: FILSPARI can cause your body to hold too much water. Tell your doctor right away if you have any unusual weight gain or swelling of your ankles or legs.

IMPORTANT SAFETY INFORMATION (cont'd)

Before taking FILSPARI, tell your healthcare provider about all of your medical conditions, including if you have liver problems, are pregnant or plan to become pregnant during FILSPARI treatment, or are breastfeeding or plan to breastfeed as it is not known if FILSPARI passes into your breast milk. Talk to your healthcare provider about the best way to feed your baby during FILSPARI treatment.

Most common side effects

The most common side effects seen in the FILSPARI clinical study are shown in the table below.*

These are not all the possible side effects of FILSPARI.

	FILSPARI (202 people)	Irbesartan (202 people)
Increased potassium levels	17%	13%
Low blood pressure	16%	6%
Swelling of hands, legs, ankles, and feet	16%	14%
Dizziness	16%	7%
Low red blood cells (anemia)	8%	4%
Worsening kidney function	6%	2%
Changes in liver tests (ALT/AST)	3.5%	4.0%

*These side effects were experienced by at least 2% of those taking FILSPARI. Side effects were recorded over a median time of 110 weeks on treatment.

ALT=alanine aminotransferase; AST=aspartate aminotransferase.

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Making the switch to FILSPARI®

Things to consider and discuss with your doctor:

FILSPARI will be sent directly to you by a Specialty Pharmacy enrolled in the FILSPARI REMS Program. Your doctor will give you complete details.



Tell your doctor about all your medical conditions, including high blood pressure, heart problems, or liver problems. Discuss all the medications you take, including prescription and over-the-counter medicines, vitamins, herbal supplements, grapefruit, and antacids or acid reducers.

Be sure to tell your doctor if you take:

- nonsteroidal anti-inflammatory drugs (NSAIDs)
- potassium-containing medicines, supplements, or salt substitutes
- blood pressure medicines
- H2 receptor blocker medicine or proton pump inhibitor (PPI) medicine

Ask your healthcare provider or pharmacist if you are not sure if you take one of these medicines.



Learn about the potential risks of FILSPARI. Read about possible side effects in the Medication Guide, and go over all your questions together with your doctor.



Understand the FILSPARI REMS Program requirements for liver and pregnancy monitoring and contraception. You must have a liver function test (and a negative pregnancy test if you can become pregnant) before taking or continuing FILSPARI.

Before taking FILSPARI, you should stop taking any ACE inhibitors, ARBs, endothelin receptor antagonists (ERAs), or aliskiren.



Be sure to always follow your doctor's direction when transitioning to FILSPARI. In the clinical study, patients started FILSPARI the day after they stopped taking their ARBs or ACE inhibitors (blood pressure medications). No waiting period was required.

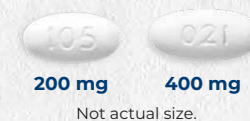


For more details, scan to [view the onboarding video](#)

Here's how you take FILSPARI:

FILSPARI comes in 2 dosage strengths.

Store FILSPARI at room temperature in its original container. Do not refrigerate.



It is recommended that you begin FILSPARI as follows:



*If tolerated.

For the first 14 days (Weeks 1 & 2), take 200 mg once daily

After 14 days (Week 3 onward), your doctor may increase your dose to 400 mg once daily, depending on how well you tolerate FILSPARI

95% of people (192 of 202) in the clinical study reached the 400 mg dose of FILSPARI.

Take FILSPARI exactly as your doctor tells you to take it.



Take FILSPARI whole with water before your morning or evening meal.

Whichever meal you choose to dose prior to, maintain that pattern. It's important to make taking FILSPARI something you do consistently, every day.

If you miss a dose, take the next dose at the regularly scheduled time. Do not take 2 doses at the same time or take extra doses.

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Support and resources to guide the way

Traverse TotalCare® Nurse Educators support your personal journey on FILSPARI®.

Your Nurse Educator can:

- ✓ Help you start and stay on track with your FILSPARI treatment plan
- ✓ Connect you with financial support
- ✓ Guide you through the process of starting FILSPARI and receiving monthly refills
- ✓ Provide updates via text, email, or phone in a variety of languages, including Spanish and Mandarin



Scan to visit TraversTotalCare.com or call **1-833-FILSPARI** (1-833-345-7727) Monday-Friday • 8 AM-8 PM ET



Financial assistance is available

Eligible, commercially insured patients may **pay as little as \$0 per month***

Patients taking FILSPARI can take advantage of REMS lab testing at home through Traverse TotalCare®. Eligibility required.

*Copay Terms and Conditions:

- Program only valid for patients with commercial or private insurance
- Must be a US resident
- Not valid for patients insured by a federal or state government-funded health plan, including Medicare, Medicare Advantage, Medicaid, and TRICARE
- Void where the program is prohibited by law
- Not valid for uninsured patients
- Program does not replace prescription drug coverage or insurance and is not intended to substitute for coverage

Traverse Therapeutics® reserves the right to terminate or modify this program at any time without notice.

IMPORTANT SAFETY INFORMATION (cont'd)

What are the possible side effects of FILSPARI?

FILSPARI can cause serious side effects, including:

- **Liver problems. See Medication Guide – What is the most important information I should know about FILSPARI?**
- **Serious birth defects. See Medication Guide – What is the most important information I should know about FILSPARI?**
- **Low blood pressure.** This is common during treatment with FILSPARI and can also be serious. Tell your healthcare provider if you feel dizzy, light-headed, or faint. Stay hydrated during treatment with FILSPARI.
- **Worsening of kidney function.** Your healthcare provider will check your kidney function during treatment with FILSPARI.
- **Increased potassium in your blood.** This is common during treatment with FILSPARI and can also be serious. Your healthcare provider will check your potassium blood level during treatment with FILSPARI.
- **Fluid retention.** FILSPARI can cause your body to hold too much water. Tell your healthcare provider right away if you have any unusual weight gain or swelling of your ankles or legs.

Please see full Important Safety Information, including serious side effects, on page 10 of this brochure, and the [Medication Guide](#).

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Not an actual patient.

Important Safety Information

What is the most important information I should know about FILSPARI?

FILSPARI is only available through the FILSPARI Risk Evaluation and Mitigation Strategy (REMS) Program because of the **serious risk of liver problems and serious birth defects**. Before you begin treatment with FILSPARI, you must read and agree to all the instructions in the FILSPARI REMS Program.

FILSPARI can cause changes in liver tests. Liver failure was not observed in people treated with FILSPARI in clinical studies, but some medicines that are like FILSPARI can cause liver failure. Your healthcare provider will do blood tests to check your liver before starting FILSPARI, monthly for the first 12 months, then every three months during treatment. Your healthcare provider may temporarily stop or permanently stop treatment with FILSPARI if you have changes in your liver tests.

Stop taking FILSPARI right away if you develop any of the following signs of liver problems during treatment with FILSPARI: nausea or vomiting, pain on the upper right side of your stomach area, tiredness, loss of appetite, yellowing of the skin or the whites of your eyes (jaundice), dark “tea-colored” urine, fever, or itching.

FILSPARI can cause serious birth defects if taken during pregnancy. Patients must not be pregnant when they start taking FILSPARI, become pregnant during treatment, or for one month after stopping treatment. Patients who can become pregnant must have a negative pregnancy test before starting FILSPARI, monthly during treatment, and for one month after stopping FILSPARI.

Patients who can become pregnant must use effective birth control before starting treatment with FILSPARI, during treatment with FILSPARI, and for one month after stopping FILSPARI because the medicine may still be in your body.

- If you have had a tubal sterilization or have an IUD (intrauterine device) or progesterone implant, these methods may be used alone, and no other form of birth control is needed.
- Talk with your healthcare provider or gynecologist (a healthcare provider who specializes in reproduction) to find out about options for effective forms of birth control that you may use to prevent pregnancy during treatment with FILSPARI.
- If you decide that you want to change the form of birth control that you use, talk with your healthcare provider or gynecologist to be sure that you choose another effective form of birth control.
- **Do not have unprotected sex.** Talk to your healthcare provider or pharmacist right away if you have unprotected sex or if you think your birth control has failed. Your healthcare provider may talk with you about using emergency birth control.
- **Tell your healthcare provider right away if you miss a menstrual period or think you may be pregnant.**

Do not take FILSPARI if you:

- **are pregnant, plan to become pregnant, or become pregnant during treatment with FILSPARI. FILSPARI can cause serious birth defects.**
- **are taking any of these medicines:** an angiotensin receptor blocker, an endothelin receptor antagonist, or aliskiren. Ask your healthcare provider or pharmacist if you are not sure if you take one of these medicines.

Before taking FILSPARI, tell your healthcare provider about all of your medical conditions, including if you have liver problems, are pregnant or plan to become pregnant during FILSPARI treatment, or are breastfeeding or plan to breastfeed as it is not known if FILSPARI passes into your breast milk. Talk to your healthcare provider about the best way to feed your baby during FILSPARI treatment.

Tell your healthcare provider about all the medicines you take, including prescription and over-the-counter medicines, vitamins, herbal supplements, grapefruit, and antacid medicines. FILSPARI and other medicines may affect how each other works and cause side effects. Do not start any new medicine until you check with your healthcare provider.

Especially tell your healthcare provider if you take:

- nonsteroidal anti-inflammatory drugs (NSAIDs)
- potassium-containing medicines, potassium supplements or salt substitutes containing potassium
- blood pressure medicines
- H2 receptor blocker medicine or proton pump inhibitor (PPI) medicine

Ask your healthcare provider or pharmacist if you are not sure if you take one of these medicines.

What are the possible side effects of FILSPARI?

FILSPARI can cause serious side effects, including:

- **Liver problems. See Medication Guide – What is the most important information I should know about FILSPARI?**
- **Serious birth defects. See Medication Guide – What is the most important information I should know about FILSPARI?**
- **Low blood pressure.** This is common during treatment with FILSPARI and can also be serious. Tell your healthcare provider if you feel dizzy, light-headed, or faint. Stay hydrated during treatment with FILSPARI.
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- **Increased potassium in your blood.** This is common during treatment with FILSPARI and can also be serious. Your healthcare provider will check your potassium blood level during treatment with FILSPARI.
- **Fluid retention.** FILSPARI can cause your body to hold too much water. Tell your healthcare provider right away if you have any unusual weight gain or swelling of your ankles or legs.

The most common side effects of FILSPARI include: swelling of the hands, legs, ankles, and feet (peripheral edema), dizziness, and low red blood cells (anemia). These are not all the possible side effects of FILSPARI. Call your doctor for medical advice about side effects.

You may report side effects to FDA at 1-800-FDA-1088. You may also report side effects to Travele Therapeutics at 1-877-659-5518.

For additional Important Safety Information, including serious side effects, please see the [Medication Guide](#).

 **FILSPARI**[®]
(sparsentan) tablets
200 mg/400 mg



Discover your possibilities when you upgrade your IgAN treatment to FILSPARI®.



Powerful proteinuria reduction: In a clinical study, at 2 years, people taking FILSPARI had 40% lower proteinuria compared to 2% for people taking irbesartan, a blood pressure medicine commonly used to treat IgAN.



Preservation of kidney function: In the same study at 2 years, FILSPARI provided better kidney function preservation than irbesartan, and significantly slowed the loss in kidney function.



Single pill that works in the kidneys to target both ET-1 and Ang II, which play a key role in 2 pathways that cause kidney damage.



Proven long-term IgAN treatment that does not suppress the immune system. FILSPARI has been studied for over 2 years.



Still have questions? Get answers to **FAQs about FILSPARI**

Visit www.FILSPARI.com for more information.

FILSPARI can cause liver problems and serious birth defects. Patients can only receive FILSPARI through a required monitoring program called the FILSPARI REMS Program.

The most common side effects include:

- Swelling of hands, legs, ankles, and feet
- Dizziness
- Low red blood cells

These are not all the possible side effects of FILSPARI. Call your doctor for medical advice about side effects.

Please see full Important Safety Information, including serious side effects, on page 10 of this brochure, and the [Medication Guide](#).

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