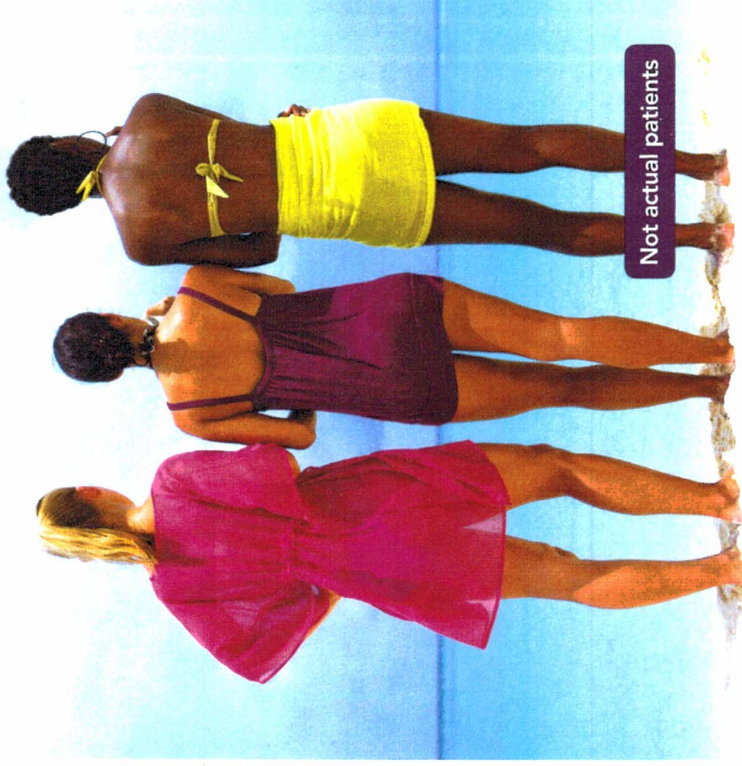


ASCLERA[®] (polidocanol) Injection

ENJOY THE FREEDOM TO SHOW YOUR LEGS

Asclera[®] (polidocanol) Injection is a prescription medicine that is used in a procedure called sclerotherapy to remove uncomplicated veins on your legs. It is administered by a healthcare provider to treat uncomplicated spider veins (very small varicose veins ≤ 1 mm in diameter) and uncomplicated reticular veins (small varicose veins 1 to 3 mm in diameter). Asclera[®] has not been studied in varicose veins more than 3 mm in diameter.

Asclera[®] (polidocanol) Injection is contraindicated for patients with known allergy (anaphylaxis) to polidocanol and patients with acute vein and blood clotting diseases.



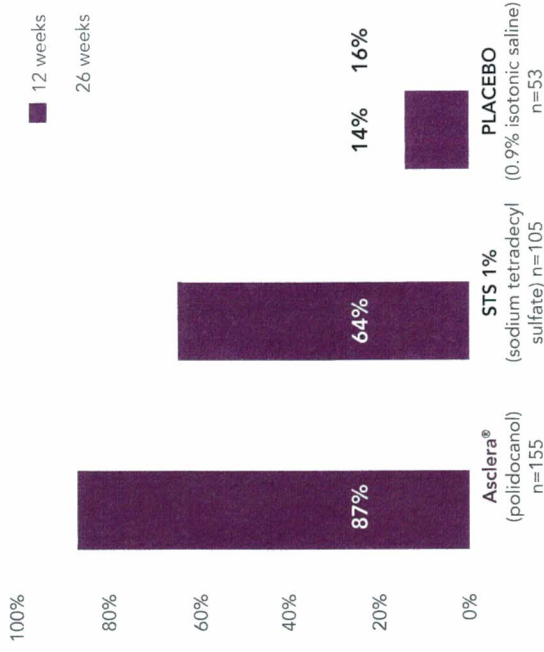
Please see Important Safety Information inside and enclosed Full Prescribing Information.

PATIENT SATISFACTION*

In a clinical trial:

- 87% of patients were satisfied or very satisfied with their Asclera[®] treatment
- Patients were significantly more satisfied with Asclera[®] than with either STS or placebo (p<0.0001).

PERCENTAGE OF PATIENTS VERY SATISFIED/SATISFIED*



*At 12 and 26 weeks after last injection patients received the digital images of their treatment area taken at baseline and were asked to rate their satisfaction with their treatment using a verbal rating scale, where 1 = very unsatisfied, 2 = somewhat unsatisfied, 3 = slightly satisfied, 4 = satisfied, and 5 = very satisfied.

IMPORTANT SAFETY INFORMATION (Continued)

ADVERSE REACTIONS: In clinical studies, the following adverse reactions were observed after using Asclera[®] and were more common with Asclera[®] than placebo: injection site hematoma, injection site irritation, injection site discoloration, injection site pain, injection site itching, injection site warmth, neovascularization, injection site clotting.

You are encouraged to report any suspected adverse events. To report SUSPECTED ADVERSE REACTIONS, contact your Healthcare Provider, Merz Aesthetics at 1-866-862-1211, or FDA at 1-800-FDA-1088 or www.fda.gov/medwatch.

atisfied or very satisfied with it

cantly more satisfied with er STS or placebo (p<0.0001)

S VERY SATISFIED/SATISFIED*



STS 1%
lium tetradecyl (0.9% isotonic saline)
iflate) n=105

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very satisfied.

INFORMATION

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**RESULTS WITH ASCLERA[®]
UNCOMPLICATED SPIDER VEINS TREATMENTS*
(< 1 MM)**



BEFORE

Actual patients

AFTER
Results 26 weeks after last treatment

*Individual results may vary depending on varicose vein severity, disease progression, skin tone, and number of treatments.

**UNCOMPLICATED RETICULAR VEINS TREATMENTS*
(1-3 MM)**



BEFORE

Actual patients

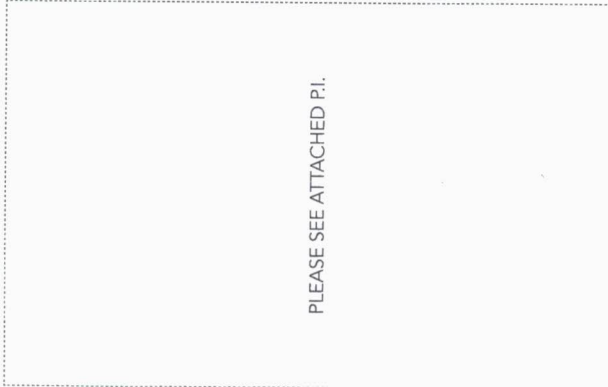
AFTER
Results 26 weeks after last treatment

*Individual results may vary depending on varicose vein severity, disease progression, skin tone, and number of treatments.

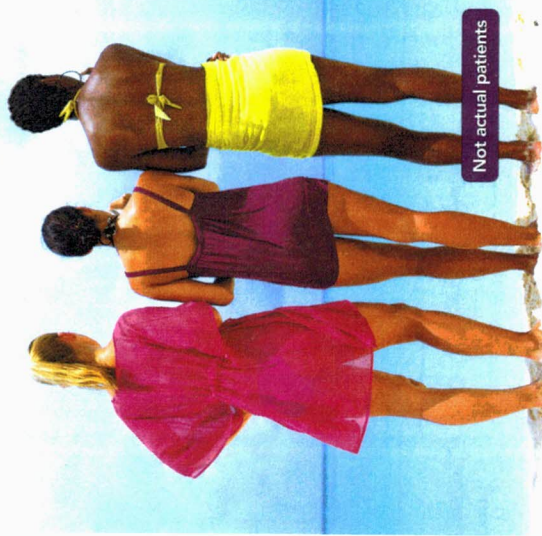
**ENJOY THE FREEDOM
TO SHOW YOUR LEGS**

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Asclera[®] (polidocanol) Injection is contraindicated for patients with known allergy (anaphylaxis) to polidocanol and patients with acute vein and blood clotting diseases.



PLEASE SEE ATTACHED P.I.

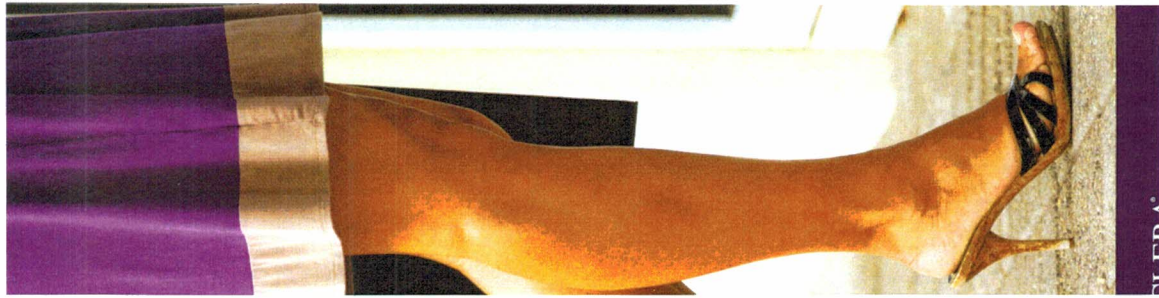


Not actual patients

Please see Important Safety Information inside and enclosed Full Prescribing Information.

MERZ AESTHETICS[™]

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WHAT IS SCLEROTHERAPY?

Sclerotherapy is a minimally invasive procedure done by your healthcare provider to treat uncomplicated spider veins and uncomplicated reticular veins. The treatment involves the injection of a solution into the affected veins.

HOW DOES ASCLERA® WORK?

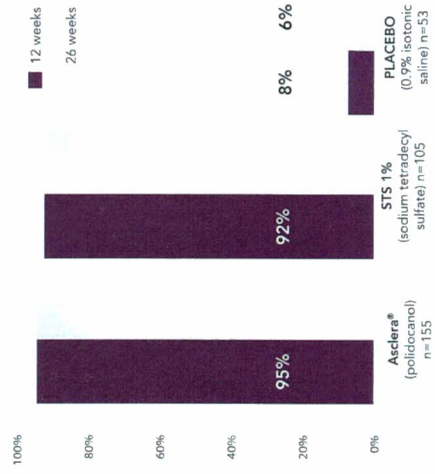
Asclera® is a sclerosing agent that is injected into the vein. It works by damaging the inner wall of the vein, and eventually causing the vein to collapse on itself. Over time, the damaged vein is replaced with tissue. Individual results may vary, and many patients will require multiple injection sessions for complete treatment success.

TREATMENT SUCCESS*

In a clinical trial:

- 95% of patients, predominately females, treated with Asclera® showed good or complete treatment success as rated by physicians
- Asclera® results were statistically significant when compared to placebo ($p < 0.0001$) for the primary efficacy criterion "improvement of veins"

TREATMENT SUCCESS RATES



Treatment success was rated on a 5-point scale (1 = worse than before, 2 = same as before, 3 = moderate improvement, 4 = good

HOW LONG IS EACH ASCLERA® SESSION?

A typical sclerotherapy session lasts 15 to 45 minutes. One injection is usually administered per inch with multiple injections per session.

Following treatment, compression stockings or support hose should be worn continuously for 2-3 days and for 2-3 weeks during the day time. Repeat treatment sessions may be necessary.

WHAT SHOULD I AVOID AFTER RECEIVING ASCLERA®?

For two to three days following the treatment, avoid the following (if you are uncertain, please ask your healthcare provider):



IMPORTANT SAFETY INFORMATION

For intravenous use only.

CONTRAINDICATIONS: Asclera® (polidocanol) Injection is contraindicated for patients with known allergy (anaphylaxis) to polidocanol and patients with acute vein and blood clotting diseases.

WARNINGS AND PRECAUTIONS:

Anaphylaxis: Severe allergic reactions have been reported following polidocanol use, including anaphylactic reactions, some of them fatal. Severe reactions are most frequent with use of larger volumes (> 3 mL). The dose of polidocanol should therefore be minimized. Please notify your healthcare provider if you have a known history of severe allergies or allergy to polidocanol.

Accidental injection into an artery can cause severe necrosis, ischemia or gangrene. If this occurs, consult your healthcare provider or a vascular surgeon immediately.

Unintentional injection of Asclera® outside of the vein can cause pain. If pain is severe, a local anesthetic (without adrenaline) may be injected by your healthcare provider.

Severe adverse local effects, including tissue necrosis, may occur following flow of the product outside of the vein; therefore, the smallest effective volume at each injection site should be used.

After the injection session is completed, apply compression with a stocking or bandage, and walk for 15- 20 minutes. Your healthcare provider will provide monitoring during this period to treat any possible anaphylactic or allergic reactions.

Maintain compression for 2 to 3 days after treatment of spider veins and for 5 to 7 days for reticular veins, or as directed by your Healthcare Provider. For extensive varicosities, longer compression treatment with compression bandages or a gradient compression stocking of a higher compression class is recommended. Post-treatment compression is necessary to reduce the risk of deep vein thrombosis.