

Does your current treatment option for chronic rhinosinusitis with nasal polyps (CRSwNP) only **scratch the surface**?

SINUVA™ (mometasone furoate) sinus implant is the **first and only FDA-approved stent** for the **treatment of CRS with nasal polyps** in adult patients who have already had an ethmoid sinus surgery. SINUVA™ expands in the ethmoid sinus and delivers anti-inflammatory medication that reduces sinus polyp inflammation directly where it's needed.

SINUVA™ is **NOT** another:

- ✗ Saline rinse
- ✗ Steroid spray
- ✗ Oral steroid
- ✗ Surgery

Why SINUVA™?

Avoid another surgery

In-office, non-surgical alternative for nasal polyps.

24/7 medication for 90 days

Does not have to be taken daily.

Breathe easier

Continuous symptom relief for up to 90 days.



DISCOVER Relief THE SINUVA™ WAY

SINUVA™ works for you



Proven to shrink nasal polyps and **reduce symptoms** of nasal obstruction and congestion for up to 90 days.



Reduced ethmoid sinus obstruction and **improved impaired sense of smell** compared to patients treated with daily steroid nasal spray† alone.



Resulted in fewer patients still needing repeat sinus surgery compared to patients that were treated with daily steroid nasal spray† alone.

†Mometasone furoate nasal spray.

IMPORTANT SAFETY INFORMATION

Who should not use SINUVA?

Do not use SINUVA if you are allergic to mometasone furoate or any ingredients of the implant.

What should I tell my doctor before receiving SINUVA?

Before you receive SINUVA, tell your doctor about all medical conditions you have including nasal/sinus problems (such as nasal ulcers or trauma), eye problems (such as glaucoma or cataracts), or any untreated fungal, bacterial, or viral infections.

Please see additional Important Safety Information on reverse side.

SINUVA®
(mometasone furoate) sinus implant

US-ENT-2303136

What Should I Expect With SINUVA™?

- SINUVA™ is not a surgery; it is a stent which is inserted into the ethmoid sinus cavity through the nasal opening during a routine office visit using local anesthesia
- SINUVA™ is designed to self-expand and soften over time and usually cannot be felt once it is in place. As the stent softens and polyps decrease, it may be ejected out of your nose on its own or when you sneeze or blow your nose
- SINUVA™ remains in your sinus, delivering anti-inflammatory medication directly to the area of the nasal polyps and will be removed 90 days after placement or earlier by your doctor

NOTES:



Learn more at [SINUVA.com](https://www.sinuva.com)

SINUVA®
(mometasone furoate) sinus implant

INDICATION

SINUVA Sinus Implant is a prescription steroid-releasing implant indicated for the treatment of chronic rhinosinusitis with nasal polyps in adult patients 18 years or older who have had ethmoid sinus surgery.

IMPORTANT SAFETY INFORMATION

Who should not use SINUVA?

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What should I tell my doctor before receiving SINUVA?

Before you receive SINUVA, tell your doctor about all medical conditions you have including nasal/sinus problems (such as nasal ulcers or trauma), eye problems (such as glaucoma or cataracts), or any untreated fungal, bacterial, or viral infections.

What are the possible side effects of SINUVA?

Serious side effects of SINUVA can include:

- **Local nasal adverse reactions** including nosebleed and injury to nerves or blood vessels in the nose/sinus.
- **Serious allergic reactions** have happened in patients using mometasone furoate including rash, itching or swelling of the lips, face, tongue, and throat, and breathing problems. Call your doctor right away if you have any of these reactions.
- **Weakened immune system** that may increase your risk of infections. Avoid contact with people who have contagious diseases such as chickenpox or measles. Call your doctor right away if you have been near someone with chickenpox or measles.
- **Adrenal insufficiency** is a condition in which the adrenal glands do not make enough steroid hormones and can cause tiredness, weakness, nausea and vomiting and low blood pressure. Talk to your doctor if steroid effects such as Cushing Syndrome and adrenal suppression appear.

The most common side effects of SINUVA in clinical studies were bronchitis, cold symptoms, middle ear infections, headache, light-headedness or dizziness, asthma, and nosebleeds. The following side effects have been identified during post-approval use of the SINUVA sinus implant. These events include implant migration, lack of efficacy, nasal pain, headache, and nosebleeds. Tell your doctor if you have any side effects that bother you or don't go away.

Risks related with the insertion and removal of SINUVA are similar to other endoscopic sinus procedures.

SINUVA is made from materials designed to soften over time and may fall out of the nose on its own as polyps decrease or if you sneeze or blow your nose forcefully. The implant will be removed 90 days after placement or earlier at your doctor's discretion.

Contact your doctor immediately if you have any changes in vision, excessive nasal bleeding, symptoms of infection or symptoms suggesting that the implant has moved, such as irritation or a choking sensation in the back of the throat.

You are encouraged to report negative side effects of prescription drugs to the FDA. Visit www.fda.gov/medwatch, or call 1-800-FDA-1088.

For important risk and use information, please see Full Prescribing Information for SINUVA.