Alphanate[®]

antihemophilic factor/von Willebrand factor complex (human)

Calculate your savings for VWD patients

1. Calculate the percentage to apply

With ALPHANATE, the average ratio of VWF:FVIII is 1.3:1. To calculate the percentage, the formula is:

2. Multiply the price per unit of ALPHANATE based on the percentage determined in step 1

Using the percentage and list price, calculate the price per unit with ALPHANATE.

3. Then calculate your cost savings with ALPHANATE.

To estimate your annual savings with ALPHANATE:

- Select your most frequently used VWD treatment option
- Determine how many VWF units were purchased
- Then insert the number of purchased VWF units in step 3 above

Please see Imporant Safety Information for ALPHANATE on reverse and visit www.ALPHANATE.com for full Prescribing Information.

GRIFOLS

Alphanate®

antihemophilic factor/von Willebrand factor complex (human)

ALPHANATE® (antihemophilic factor/von Willebrand factor complex [human])

ALPHANATE is indicated for:

- Control and prevention of bleeding episodes and perioperative management in adult and pediatric patients with factor VIII (FVIII) deficiency due to hemophilia A
- Surgical and/or invasive procedures in adult and pediatric patients with von Willebrand disease (VWD) in whom desmopressin (DDAVP) is either ineffective or contraindicated. It is not indicated for patients with severe VWD (type 3) undergoing major surgery

Important Safety Information

ALPHANATE is contraindicated in patients who have manifested life-threatening immediate hypersensitivity reactions, including anaphylaxis, to the product or its components.

Anaphylaxis and severe hypersensitivity reactions are possible with ALPHANATE. Discontinue use of ALPHANATE if hypersensitivity symptoms occur, and initiate appropriate treatment.

Development of procoagulant activity-neutralizing antibodies (inhibitors) has been detected in patients receiving FVIII-containing products. Carefully monitor patients treated with AHF products for the development of FVIII inhibitors by appropriate clinical observations and laboratory tests.

Thromboembolic events have been reported with AHF/VWF complex (human) in VWD patients, especially in the setting of known risk factors.

Intravascular hemolysis may occur with infusion of large doses of AHF/VWF complex (human).

Rapid administration of a FVIII concentrate may result in vasomotor reactions.

Because ALPHANATE is made from human plasma, it may carry a risk of transmitting infectious agents, eg, viruses, the variant Creutzfeldt-Jakob disease (vCJD) agent, and, theoretically, the Creutzfeldt-Jakob disease (CJD) agent, despite steps designed to reduce this risk.

Monitor for development of FVIII and VWF inhibitors. Perform appropriate assays to determine if FVIII and/or VWF inhibitor(s) are present if bleeding is not controlled with expected dose of ALPHANATE.

The most frequent adverse drug reactions reported with ALPHANATE in >1% of infusions were pruritus, headache, back pain, paresthesia, respiratory distress, facial edema, pain, rash, and chills.

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