Introducing the SYFOVRE Co-Pack (Vial Kit with Injection Components)¹



Current Packaging (Vial Only)

10-digit NDC: 73606-020-01 11-digit NDC: 73606-0020-01



Apollis | Injection Kit

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Carton with 1 vial

Accompanying Injection Kit with 1 filter needle and 1 injection needle

NDC=National Drug Code.

You should continue using your existing vials in inventory and bill using the NDC listed above.

NEW Packaging (Co-Pack)

10-digit NDC: 73606-020-02 11-digit NDC: 73606-0020-02

Available November 2025



Carton inclusive of:

1 vial

- 1 filter needle
- 1 syringe (new)
- 1 injection needle

We anticipate the Co-Pack will be available to order in November 2025. Use of the Co-Pack should be billed using the new NDC listed above.

INDICATION

SYFOVRE® (pegcetacoplan injection) is indicated for the treatment of geographic atrophy (GA) secondary to age-related macular degeneration (AMD).

IMPORTANT SAFETY INFORMATION CONTRAINDICATIONS

• SYFOVRE is contraindicated in patients with ocular or periocular infections, in patients with active intraocular inflammation, and in patients with hypersensitivity to pegcetacoplan or any of the excipients in SYFOVRE. Systemic hypersensitivity reactions (e.g., anaphylaxis, rash, urticaria) have occurred.

Please see Important Safety Information on the following page and the full Prescribing Information.



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WARNINGS AND PRECAUTIONS

Endophthalmitis and Retinal Detachments

o Intravitreal injections, including those with SYFOVRE, may be associated with endophthalmitis and retinal detachments. Proper aseptic injection technique must always be used when administering SYFOVRE to minimize the risk of endophthalmitis. Patients should be instructed to report any symptoms suggestive of endophthalmitis or retinal detachment without delay and should be managed appropriately.

• Retinal Vasculitis and/or Retinal Vascular Occlusion

 Retinal vasculitis and/or retinal vascular occlusion, typically in the presence of intraocular inflammation, have been reported with the use of SYFOVRE. Cases may occur with the first dose of SYFOVRE and may result in severe vision loss. Discontinue treatment with SYFOVRE in patients who develop these events. Patients should be instructed to report any change in vision without delay.

Neovascular AMD

o In clinical trials, use of SYFOVRE was associated with increased rates of neovascular (wet) AMD or choroidal neovascularization (12% when administered monthly, 7% when administered every other month and 3% in the control group) by Month 24. Patients receiving SYFOVRE should be monitored for signs of neovascular AMD. In case anti-Vascular Endothelial Growth Factor (anti-VEGF) is required, it should be given separately from SYFOVRE administration.

Intraocular Inflammation

• In clinical trials, use of SYFOVRE was associated with episodes of intraocular inflammation including: vitritis, vitreal cells, iridocyclitis, uveitis, anterior chamber cells, iritis, and anterior chamber flare. After inflammation resolves, patients may resume treatment with SYFOVRE.

Increased Intraocular Pressure

• Acute increase in IOP may occur within minutes of any intravitreal injection, including with SYFOVRE. Perfusion of the optic nerve head should be monitored following the injection and managed as needed.

ADVERSE REACTIONS

• Most common adverse reactions (incidence ≥5%) are ocular discomfort, neovascular age-related macular degeneration, vitreous floaters, conjunctival hemorrhage.

Please see full Prescribing Information for more information.

Reference: 1. Syfovre. Package insert. Apellis Pharmaceuticals, Inc; 2025.



