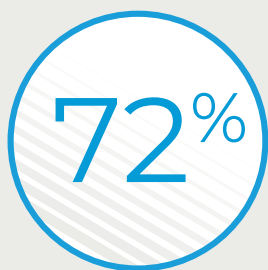# Welcome to the Injection-Free Revolution

CeQur Simplicity™

[Wear The Revolution®]

A 3-day wearable insulin patch, clinically proven to reduce A1C and increase time-in-range (TIR)[1,2]
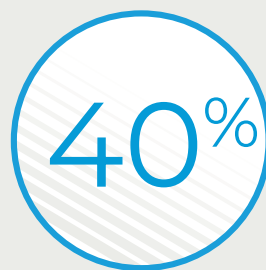
Common challenges for patients taking multiple daily injections:

72%

Will only administer insulin at home[3]

57%

Knowingly miss their insulin injections[4]

40%

Left their insulin at home[5]

People are missing their insulin doses, which can raise A1C and increase risk of diabetes complications.

The solution is CeQur Simplicity™

Convenient
- Easy to apply, wear for up to three days
- Fits into patient's life
- Wearable while showering, sleeping, exercising, and swimming

Discreet
- Wear and dose under clothing
- One click administers two units of insulin
- Thin (<4 stacked quarters), compact (65 x 36 mm), and lightweight (10 gm)

Injection-Free
- Better adherence[1]
- Fewer injections: 1 patch replaces 9 mealtime injections, for ~90 fewer injections per month
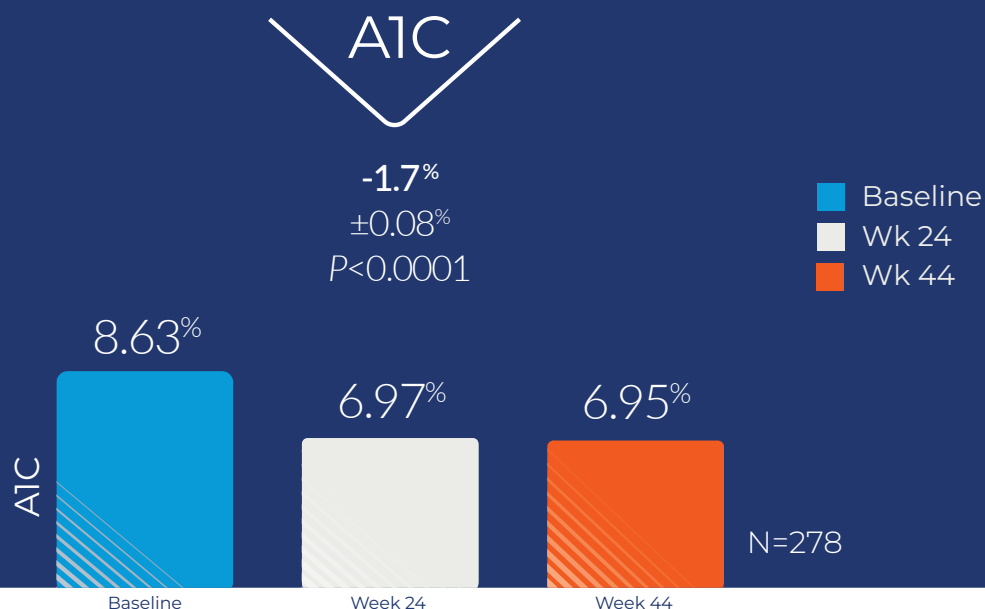- Less pain[1]

9 out of 10
patients said that they follow their insulin regimen better with CeQur Simplicity.[6]

Use of CeQur Simplicity:
Clinically shown to improve glycemic control[1,2]

With use of CeQur Simplicity,
A1C target goals were achieved

Clinical Outcome Study Findings[1]
Mean A1C was reduced to target goal by Week 24

A1C

-1.7%
±0.08%
P<0.0001

Legend:
- Baseline
- Wk 24
- Wk 44

8.63%
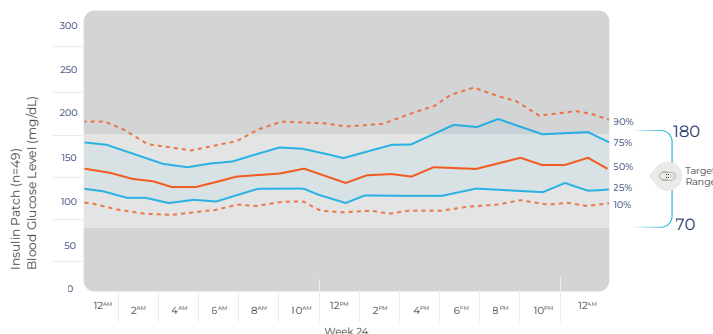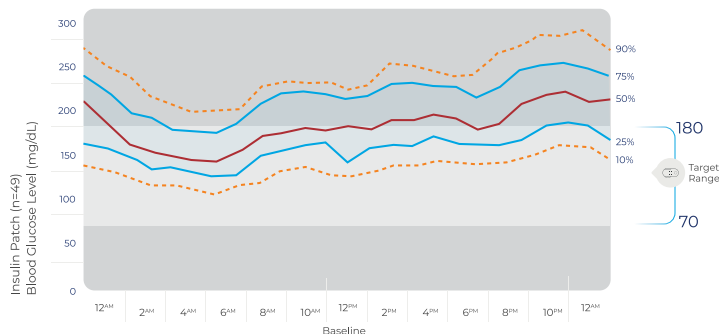6.97%
6.95%

A1C

| Baseline | Week 24 | Week 44 |

N=278

Results were comparable to pens. Consistent A1C <7% supports HEDIS Comprehensive Diabetes Care measure.

After 24 Weeks With CeQur Simplicity,
Patients increased time-in-range (TIR) by 50%[2]

Baseline:
Time-in-range = 48.4%

After 24 Weeks:
Time-in-range = 74.1%

The International consensus on time-in-range defines clinical target for TIR ≥70%, which is evidenced to be equivalent to an A1C of ≤7%.[7]

CeQur Simplicity is designed for safety

2-button safety mechanism ensures that dosing occurs only when intended[8]

Buttons lock when patch is empty or cannula is occluded[8]

Tactile and audible feedback indicates 2-unit delivery[8]

Adhesive designed to keep patch on skin for up to 3 days

Water-resistant to a depth of 1 meter for up to 30 minutes

Patients prefer CeQur Simplicity

95% say CeQur Simplicity is easier than a pen or syringe[6]

90% say mealtime insulin is painless with CeQur Simplicity[1]

93% prefer CeQur Simplicity to pens or syringes*

85% achieve A1C <8.0[9]

*Disclaimer: Data from patient assessments after completing the Insulin Delivery System Rating Questionnaire (IDSRQ) at baseline and after two months. Data on file at CeQur.

CeQur Simplicity
Is revolutionizing insulin delivery

84%

say training
was EASY[6]

Most needed <30
minutes of training[6]

Easy to teach, easy to learn[1]
Confidence comes quickly[6]
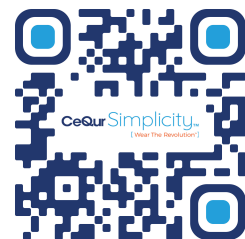
Most patients said that they felt fully comfortable applying the
patch after just 1-3 times[6]

Patient training video available on
myceqursimplicity.com/resources-support

What can you expect with training?
Learn more by viewing the CeQur Simplicity
Quick Start Video and Training Checklist

CeQur Simplicity
[Wear The Revolution]

Scan here to watch our
Quick Start Training Video

Getting patients started with CeQur Simplicity

① Prescribe CeQur Simplicity 2U Patch, 10 Pack

- CeQur Simplicity is covered on most commercial and Medicare Part D insurance plans as a pharmacy benefit

② Prescribe patients an Inserter Kit containing

- Reusable Inserter
- Quick Start Guide

③ Write a vial of rapid-acting insulin

- Labeled for use with Humalog U-100 and Novolog U-100
- Insulin sold separately

Starter Kits are available from your CeQur representative or by calling the CeQur Cares™ team at
1-888-55-CeQur (1-888-552-3787)

Questions?
We're here to help you and your patients

For you and your practice:
- Product and Training Support

For your patients:
- Product Support
- Benefit Verification
- Insurance and Access Support

Call CeQur Cares for support:

1-888-55-CeQur (1-888-552-3787)

cequrcare@cequr.com

Hours of operation:
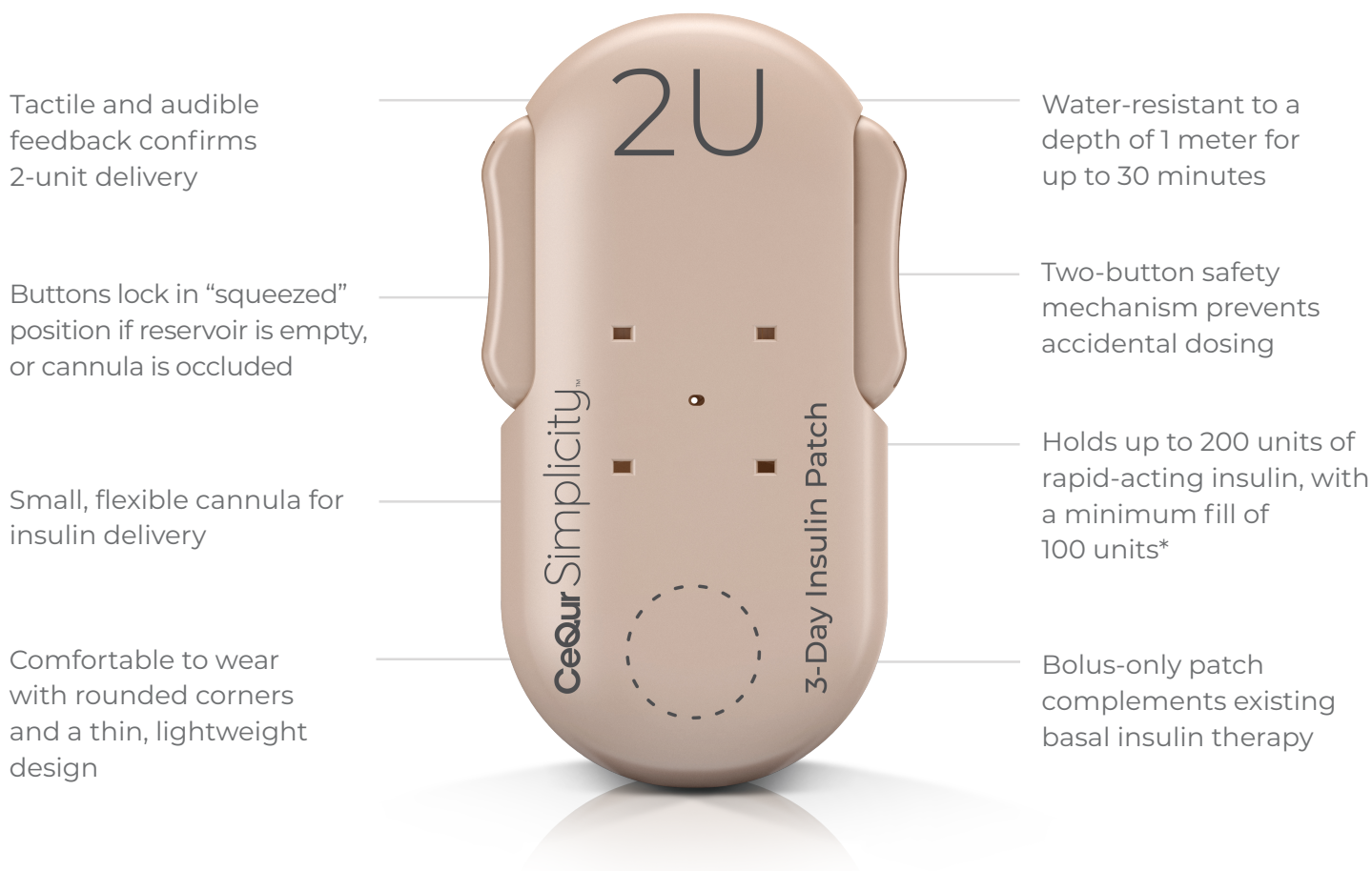Monday–Friday, 9:00 AM–6:00 PM EST

Visit our website:
MyCeQurSimplicity.com

Welcome to **CeQur** Simplicity™

[Wear The Revolution®]

Convenient, Discreet, Injection-Free Dosing

Tactile and audible feedback confirms 2-unit delivery

Buttons lock in "squeezed" position if reservoir is empty, or cannula is occluded

Small, flexible cannula for insulin delivery

Comfortable to wear with rounded corners and a thin, lightweight design

Water-resistant to a depth of 1 meter for up to 30 minutes

Two-button safety mechanism prevents accidental dosing

Holds up to 200 units of rapid-acting insulin, with a minimum fill of 100 units*

Bolus-only patch complements existing basal insulin therapy

*Labeled for use with Humalog® U-100 and NovoLog® U-100. Insulin sold separately.

See previous page for prescribing and ordering information

Visit MyCeQurSimplicity.com | **1-888-55-CeQur** | **Follow us!**

REFERENCES: 1. Bergenstal RM, Peyrot M, Dreon DM, et al. Implementation of basal-bolus therapy in type 2 diabetes: a randomized controlled trial comparing bolus insulin delivery using an insulin patch with an insulin pen. Diabetes Technol Ther. 2019;21(5):273-285. **2.** Bergenstal R., et al Comparing Patch vs Pen Bolus Insulin Delivery in Type 2 Diabetes Using Continuous Glucose Monitoring Metrics and Profiles; Journal of Diabetes Science and Technology 1–7, 2021. **3.** Grabner M, et al. 2013. Using Observational Data to Inform the Design of a Prospective Effectiveness Study for a Novel Insulin Delivery Device, ClinicoEconomics and Outcomes Research. 5:471-479. **4.** Peyrot M, Rubin R, Kruger D, Travis L. 2010. Correlates of Insulin Injection Omission. Diabetes Care. 33(2):240–245. **5.** Randløv J, Poulson J. 2008. How much do forgotten insulin injections matter to hemoglobin a1c in people with diabetes? A simulation study. Journal Diabetes Science and Technology. 2(2):229-35. **6.** Zraick V, Dreon D, Nalk R, Shearer D, Crawford S, Bradford J, Levy B. 2016. Patient User Experience Evaluation of Bolus Patch Insulin Delivery System. Poster presented at the American Diabetes Association's 76th Scientific Sessions. Abstract 995-P. New Orleans, LA, USA. **7.** Battelino, T., et al., Clinical Targets for Continuous Glucose Monitoring Data Interpretation: Recommendations From the International Consensus on Time in Range. Diabetes Care, 2019. 42(8): p. 1593-1603. **8.** Dreon DM, Hannon TM, Cross B, et al. Laboratory and Benchtop Performance of a Mealtime Insulin-Delivery System. Journal of Diabetes Science and Technology. 2018 Jul;12(4):817-827. **9.** Barry, R., D.O.N. Johns, and B. Rees, 2329-PUB: Transitioning T2DM Patients to Basal-Bolus Insulin Leads to Sustainable A1C Improvement. Diabetes, 2019. 68(Supplement 1): p. 2329-PUB. This is a post-hoc analysis done on Bergenstal Trial.

CeQur Simplicity™

[Wear The Revolution®]