Mealtime insulin **is always within reach**

Introducing

CeQur Simplicity™

The convenient, discreet, 3-day, wearable insulin Patch for injection-free dosing

- Use is clinically shown to reduce A1C and increase time-in-range[1,2]
- Easy to teach, learn, and use[1,3]
- Preferred by patients and professionals[1]

Simplify mealtime insulin
with a click

CeQur Simplicity™ removes known barriers to mealtime dosing,[4] such as inconvenience, embarrassment, and injection pain.
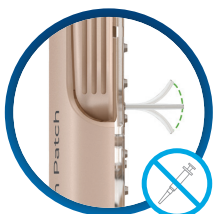
Convenient

- Fits into patient's life: Wearable while showering, sleeping, exercising, and swimming[5]
- Easy to use

Discreet

- Worn and dosed under clothing
- Compact design: small (65x36 mm), lightweight (10 gm), and thin (<4-quarters thick)
- Less embarrassment while dosing can lead to better adherence[1]

Injection-free dosing

- 3-day Patch holds up to 200 units of rapid-acting insulin administered in 2-unit increments
- Fewer injections: 1 Patch replaces 9 mealtime injections, for ~90 fewer injections per month
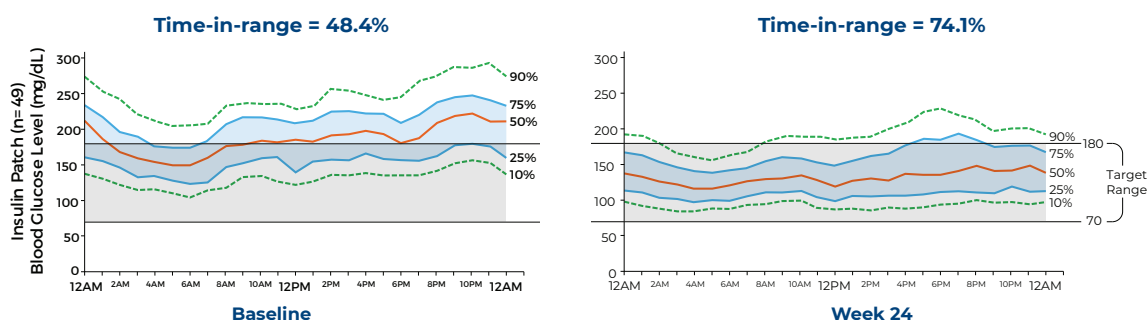- Less pain: 90% of patients reported painless mealtime dosing with the Patch[1]

88% of patients said **that they follow their insulin regimen better with CeQur Simplicity**[3]

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

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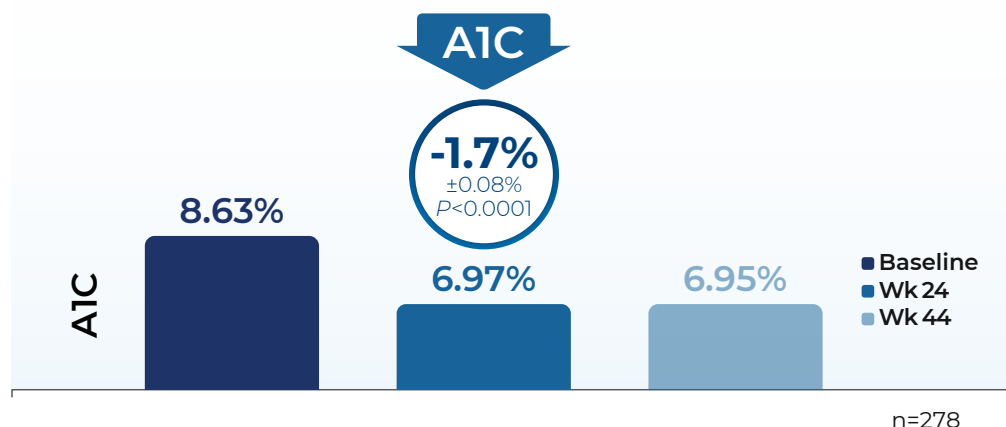## Patients increased time-in-range (TIR) by 50%[2]

Time-in-range = 48.4%

Insulin Patch (n=49)
Blood Glucose Level (mg/dL)

300 — 90%
250 — 75%
200 — 50%
150 — 25%
100 — 10%
50
0
12AM 2AM 4AM 6AM 8AM 10AM 12PM 2PM 4PM 6PM 8PM 10PM 12AM

Baseline

Time-in-range = 74.1%

300
250
200 — 90% — 180
150 — 75%
100 — 50% — Target Range
50 — 25%
0 — 10% — 70
12AM 2AM 4AM 6AM 8AM 10AM 12PM 2PM 4PM 6PM 8PM 10PM 12AM

Week 24

The International consensus on time-in-range defines clinical target for TIR ≥70%, which is evidenced to be equivalent to an A1C of ≤7%.[6]

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

8.63%

A1C

6.97%

6.95%

■ Baseline
■ Wk 24
■ Wk 44

n=278

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

CeQur Simplicity™ is **designed for safety**

2-button safety mechanism ensures that dosing occurs only when intended—designed to prevent accidental dosing[5]

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

Buttons lock to notify: stay in "squeezed" position when Patch is empty or cannula is occluded[5]

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

Tactile and audible feedback indicates 2-unit delivery[5]

Patients prefer **CeQur Simplicity**

72%

preferred
the **Patch
over pens**[1]

76%

**asked to
be switched**
from pen or syringe[7]

86%

**were
satisfied**
with the Patch[3]

CeQur Simplicity encourages adherence

Many patients using the Patch said that they dosed in instances where they probably wouldn't have dosed with a pen or syringe, and stated that they are likely to dose more often across meals, snacks, and correction boluses.[3]

CeQur Simplicity™ is
easy to teach, easy to learn[1,3]

84%
of patients said
**training was
EASY**[3]

95%
of patients said
EASIER
than pen or syringe
for dosing[3]

<30
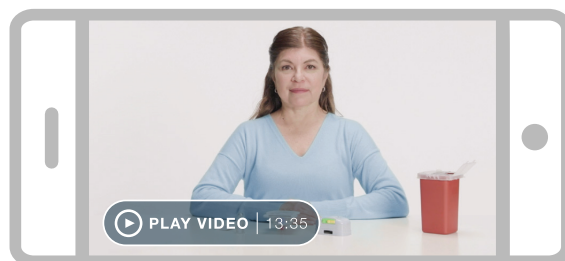Most needed
**<30 minutes of
training**[3]

Confidence comes quickly
**Most patients said that they felt fully comfortable
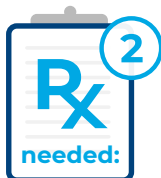applying the Patch after just 1–3 times.**[3]

Patient video reinforces learning

See for yourself how easy it is to teach, learn, and use
CeQur Simplicity. This helpful video reinforces training
that patients receive from healthcare professionals.

Watch it at **MyCeQurSimplicity.com/video**

▶ PLAY VIDEO | 13:35

How to
prescribe CeQur Simplicity

1. **CeQur Simplicity 10-Pack**
   – Write "CeQur Simplicity 2U Patch, 10-Pack".

2. **Vial of rapid-acting insulin**
   – Labeled for use with Humalog® U-100 or NovoLog® U-100. Insulin sold separately.
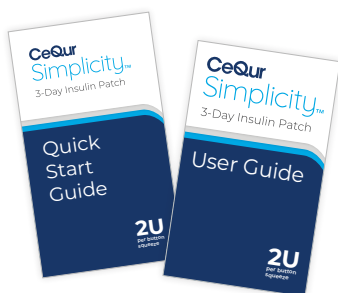
Getting started

Starter Kit

- Each patient will receive a Starter Kit.
- Kit includes the reusable Inserter needed to apply the Patches. (*Note*: Inserter is provided only in the Starter Kit)
- Starter Kits are available from your CeQur Representative or by calling CeQur Care at 1-888-55-CeQur (1-888-552-3787).
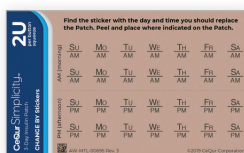

2 Patches

1 Inserter (reusable)

Quick Start Guide   User Guide

CHANGE BY Stickers

Dose Count Card

We're here to help

For you and your practice:
- Starter Kit Ordering
- Product and Training Support

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

Call CeQur Care 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:
CeQurSimplicity.com

Welcome to
CeQur Simplicity™

Convenient, discreet, injection-free dosing

Accurately delivers a 2-unit dose with every squeeze of the buttons[5]

Small, flexible cannula for insulin delivery

Low profile, less than 4-stacked-quarters thick

Soft corners for comfort

2U

CeQur Simplicity™

3-Day Insulin Patch

Water-resistant, and stays on through bathing, exercise, intimacy, and sleep[5]

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 CeQurSimplicity.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.** Johnson ML, Dreon DM, Levy BL, et al. Comparing patch versus pen bolus insulin delivery in type 2 diabetes using continuous glucose monitoring metrics and profiles. Paper presented at: 54th Annual Meeting of the European Association for the Study of Diabetes; October 1-5, 2018; Berlin, Germany. **3.** Zraick V, Dreon D, Naik R, et al. Patient user experience evaluation of bolus patch insulin delivery system. Poster presented at: American Diabetes Association 76th Scientific Sessions. 2016. Abstract 995-P. New Orleans, LA. **4.** Peyrot M, Dreon D, Zraick V, Cross B, Tan MH. Patient perceptions and preferences for a mealtime insulin delivery patch. *Diabetes Ther.* 2018;9:297-307. **5.** Dreon DM, Hannon TM, Cross B, et al. Laboratory and benchtop performance of a mealtime insulin-delivery system. *J Diabetes Sci Technol.* 2018;12(4):817-827. **6.** Battelino T, Danne T, Bergenstal RM, et al. Clinical targets for continuous glucose monitoring data interpretation: recommendations from the International Consensus on Time in Range [published ahead of print June 8, 2019]. *Diabetes Care.* doi:10.2337/dci19-0028. **7.** Bohannon N, Bergenstal R, Cuddihy R, et al. Comparison of a novel insulin bolus-patch with pen/syringe injection to deliver mealtime insulin for efficacy, preference, and quality of life in adults with diabetes: a randomized, crossover, multicenter study. *Diabetes Technol Ther.* 2011;13(10):1031-1037.

CeQur Simplicity™