FACT SHEET
August 13, 2018

Looking Deeper to Help Transform Medical Dermatology

Company Overview

Dermira is a biopharmaceutical company dedicated to bringing biotech ingenuity to medical dermatology by delivering important new therapies to the millions of patients living with chronic skin conditions. We are committed to understanding and addressing the needs of both patients and physicians, and using our experience and insight to identify and develop leading-edge medical dermatology clinical programs. Our goal is to help transform the way skin conditions are treated by serving as the bridge between unmet patient needs and the significant scientific advances being made in understanding skin biology.

We are answering patient needs across the $21 billion medical dermatology market by going beyond incremental improvements. Instead, we're focused on the development of game-changing therapies that elevate existing standards of care for people living with chronic skin diseases. To that end, our portfolio includes our first approved medication for the treatment of primary axillary hyperhidrosis, as well as product candidates for the treatment of atopic dermatitis and other indications.

Quick Facts

NASDAQ SYMBOL
DERM

HEADQUARTERS
Menlo Park, Calif.

EMPLOYEES
200

CASH & INVESTMENTS
$472.5 million at June 30, 2018

SHARES OUTSTANDING
42.0 million shares as of June 30, 2018

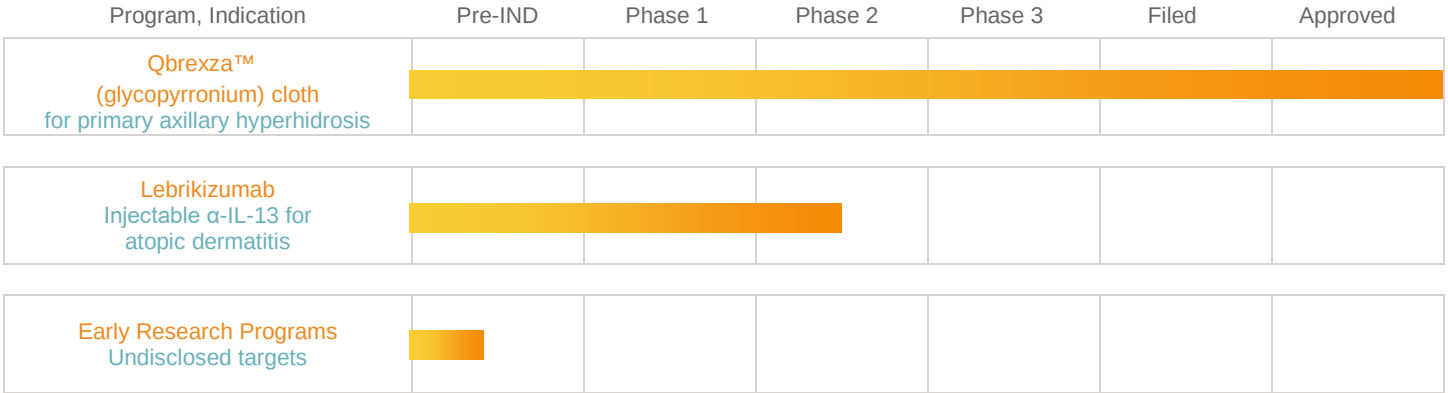
FISCAL YEAR END
December 31

FDA-Approved Medicine:

Qbrexza™ (glycopyrronium) cloth

Developing a Unique Portfolio of Therapies

With our deep insight in skin biology and thorough understanding of unmet patient needs, we are developing a portfolio of unique therapies to elevate the standard of care for patients living with skin conditions. Our dermatology-focused pipeline includes glycopyrronium tosylate, which is now FDA-approved for primary axillary hyperhidrosis, an atopic dermatitis therapy in late-stage development, as well as a variety of early stage molecules.



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Transforming the Way Skin Conditions Are Treated

Qbrexza™ (glycopyrronium) cloth: Developed with the Needs of Patients in Mind

Qbrexza is a prescription, medicated cloth that was FDA approved in June 2018 for topical treatment of primary axillary hyperhidrosis in adults and pediatric patients 9 years of age and older. Primary axillary hyperhidrosis is a skin condition that affects nearly 10 million Americans and can cause emotional, social and physical impairment.[1] It is a topical anticholinergic designed to block sweat production by inhibiting the interaction between acetylcholine and the cholinergic receptors responsible for sweat gland activation. Full prescribing information is available.

Lebrikizumab: A Targeted Way to Treat Atopic Dermatitis

We are developing lebrikizumab, a novel, humanized monoclonal antibody that has been designed to specifically block the action of interleukin-13 (IL-13), a cytokine that is a central pathogenic mediator in atopic dermatitis, the most common and severe form of eczema. Atopic dermatitis is a chronic inflammatory condition that can present as early as childhood and continue into adulthood. A moderate-to-severe form of the disease is characterized by rashes on the skin that often cover much of the body and can cause intense, persistent itching, redness, cracking, and dryness. Atopic dermatitis affects approximately 33 million people in the United States[2] and has a profound and negative impact on patients' mental and physical functioning, limiting their activities and health-related quality of life.[3]

Lebrikizumab has been evaluated in two exploratory Phase 2 clinical studies in adult patients with moderate-to-severe atopic dermatitis. The double-blind, placebo-controlled TREBLE study evaluated the safety and efficacy of lebrikizumab in combination with topical corticosteroids, while the open-label ARBAN study was designed to assess the safety of lebrikizumab as a monotherapy, with an exploratory assessment of efficacy. A Phase 2b dose-ranging study assessing lebrikizumab in adult patients with moderate-to-severe atopic dermatitis was initiated in January 2018. Results are expected in the first half of 2019.

Despite recent promising advances for atopic dermatitis, additional treatment options are still necessary due to the difficult-to-treat nature of the condition.

IMPORTANT SAFETY INFORMATION

CONTRAINDICATIONS

Qbrexza is contraindicated in patients with medical conditions that can be exacerbated by the anticholinergic effect of Qbrexza (e.g., glaucoma, paralytic ileus, unstable cardiovascular status in acute hemorrhage, severe ulcerative colitis, toxic megacolon complicating ulcerative colitis, myasthenia gravis, Sjogren's syndrome).

WARNINGS AND PRECAUTIONS

Worsening of Urinary Retention: Qbrexza should be used with caution in patients with a history or presence of documented urinary retention. Prescribers and patients should be alert for signs and symptoms of urinary retention (e.g., difficulty passing urine, distended bladder), especially in patients with prostatic hypertrophy or bladder-neck obstruction. Instruct patients to discontinue use immediately and consult a physician should any of these signs or symptoms develop. Patients with a history of urinary retention were not included in the clinical studies.

Control of Body Temperature: In the presence of high ambient temperature, heat illness (hyperpyrexia and heat stroke due to decreased sweating) can occur with the use of anticholinergic drugs such as Qbrexza. Advise patients using Qbrexza to watch for generalized lack of sweating when in hot or very warm environmental temperatures and to avoid use if not sweating under these conditions.

Operating Machinery or an Automobile: Transient blurred vision may occur with use of Qbrexza. If blurred vision occurs, the patient should discontinue use until symptoms resolve. Patients should be warned not to engage in activities that require clear vision such as operating a motor vehicle or other machinery, or performing hazardous work until the symptoms have resolved.

ADVERSE REACTIONS

The most common adverse reactions seen in ≥2% of subjects treated with Qbrexza were dry mouth (24.2%), mydriasis (6.8%), oropharyngeal pain (5.7%), headache (5.0%), urinary hesitation (3.5%), vision blurred (3.5%), nasal dryness (2.6%), dry throat (2.6%), dry eye (2.4%), dry skin (2.2%) and constipation (2.0%). Local skin reactions, including erythema (17.0%), burning/stinging (14.1%) and pruritus (8.1%) were also common.

Healthcare providers: Please see Qbrexza Full Prescribing Information. Patients: Please see Qbrexza Patient Product Information.

Contacts

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[1] Doolittle et al. Hyperhidrosis: an update on prevalence and severity in the United States. *Arch Dermatol Res*. 2016;308:743-749.
[2] Silverberg JI, Hanifin JM. Adult eczema prevalence and associations with asthma and other health and demographic factors: a US population-based study. *J Allergy Clin Immunol*. 2013;132(5):1132-8.
[3] Drucker et al. The Burden of Atopic Dermatitis: Summary of a Report for the National Eczema Association. *J Invest Dermatol*. 2017;137:26-30.

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