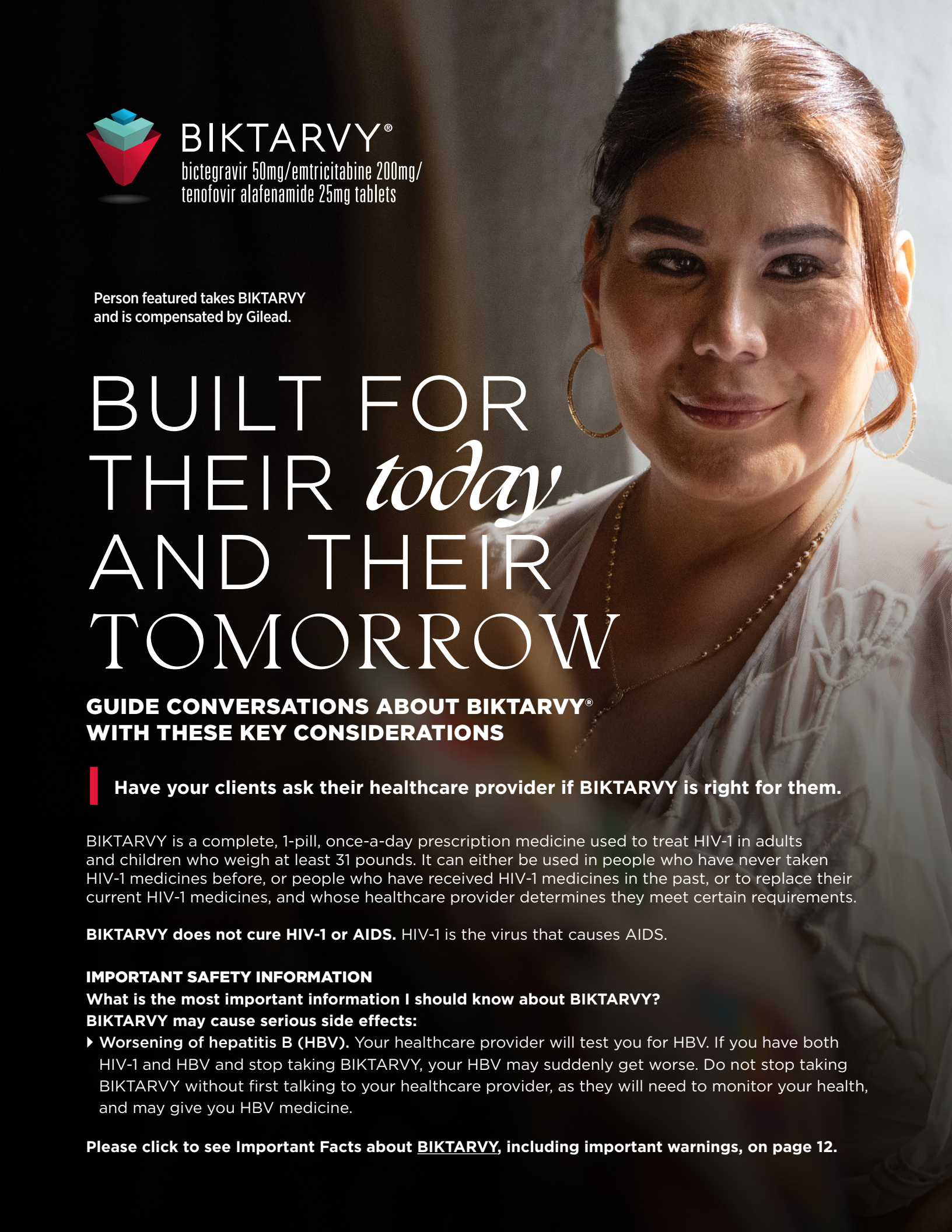


BIKTARVY®
bictegravir 50mg/emtricitabine 200mg/
tenofovir alafenamide 25mg tablets

Person featured takes BIKTARVY and is compensated by Gilead.

BUILT FOR THEIR *today* AND THEIR TOMORROW

GUIDE CONVERSATIONS ABOUT BIKTARVY® WITH THESE KEY CONSIDERATIONS

Have your clients ask their healthcare provider if BIKTARVY is right for them.

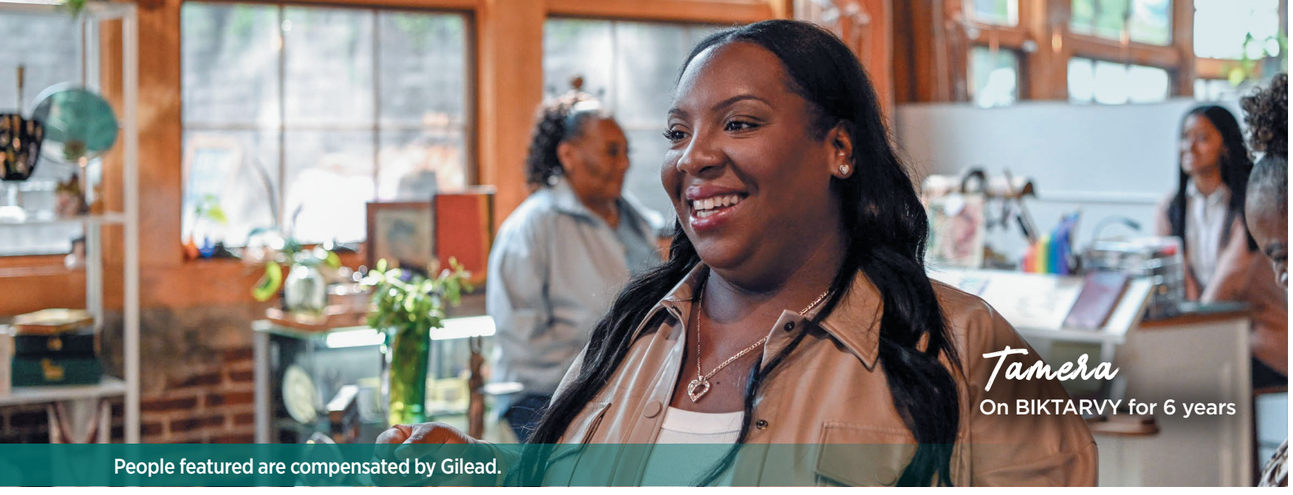
BIKTARVY is a complete, 1-pill, once-a-day prescription medicine used to treat HIV-1 in adults and children who weigh at least 31 pounds. It can either be used in people who have never taken HIV-1 medicines before, or people who have received HIV-1 medicines in the past, or to replace their current HIV-1 medicines, and whose healthcare provider determines they meet certain requirements.

BIKTARVY does not cure HIV-1 or AIDS. HIV-1 is the virus that causes AIDS.

IMPORTANT SAFETY INFORMATION
What is the most important information I should know about BIKTARVY?
BIKTARVY may cause serious side effects:

- **Worsening of hepatitis B (HBV).** Your healthcare provider will test you for HBV. If you have both HIV-1 and HBV and stop taking BIKTARVY, your HBV may suddenly get worse. Do not stop taking BIKTARVY without first talking to your healthcare provider, as they will need to monitor your health, and may give you HBV medicine.

Please click to see Important Facts about BIKTARVY, including important warnings, on page 12.



BIKTARVY® IS DHHS GUIDELINES–RECOMMENDED

- As an initial regimen for **most people living with HIV**
- As a preferred initial regimen for **children ≥2 years old (weighing at least 31 pounds)**
- As a regimen that **can be started same day** in clinically appropriate patients
- In virologically suppressed people with **M184V/I resistance mutation (BIII)***
- As a preferred regimen **for use during pregnancy and when trying to conceive**

6 YEARS AS THE #1 PRESCRIBED REGIMEN
for people starting and switching HIV-1 treatment

Source: *IQVIA LAAD*, July 2018 through July 2024.†

Over 430,000
people in the US take BIKTARVY as their HIV-1 treatment.

Source: *IQVIA LAAD*, March 2021 through July 2024.‡

*Rating of recommendation: **B**=Moderate. Rating of evidence: **III**=Expert opinion.

†This information is an estimate derived from the use of information under license from the following IQVIA information service: *IQVIA LAAD*, for the period July 2018 through July 2024. IQVIA expressly reserves all rights, including rights of copying, distribution, and republication.

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DHHS, US Department of Health and Human Services.

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BACKED BY BROAD EXPERIENCE IN CLINICAL TRIALS

YOUR CLIENTS DESERVE A TREATMENT THAT MAY REFLECT THEIR INDIVIDUAL EXPERIENCE

BIKTARVY® has been studied in **9 clinical trials** involving **thousands of people living with HIV from many different walks of life, including:**

- **PEOPLE WHO ARE NEW TO STARTING TREATMENT**
- **PEOPLE WHO SWITCHED TO BIKTARVY FROM ANOTHER TREATMENT WHILE UNDETECTABLE**
- **VARIOUS RACES AND ETHNICITIES**
- **NEARLY 1000 WOMEN** (~1000)
- **PEOPLE AGED 3 TO 80 YEARS**
- **VIROLOGICALLY SUPPRESSED PREGNANT ADULTS**
- **PEOPLE WITH HIGH AMOUNTS OF HIV IN THEIR BLOOD**
- **PEOPLE WITH A LOW CD4 COUNT** (CD4)
- **PEOPLE WITH A KNOWN OR SUSPECTED RESISTANCE MUTATION (M184V/I)**

KEY TERMS TO KNOW

- **Undetectable** – When the amount of virus in the blood is below the level that can be measured in a lab test (<50 copies/mL).
- **CD4 count** – The number of CD4 T cells in the blood. T cells are an important part of the immune system that help the body fight infections.
- **Resistance** – Sometimes HIV can change or mutate. This change might make some medicines not work as well. This is called a *resistance mutation* or *treatment resistance*. An example of a resistance mutation is M184V/I.
- **Virologically suppressed** – People who have an undetectable viral load.

CD4, cluster of differentiation 4.

Please click to see Important Facts about BIKTARVY, including important warnings, on page 12.

People featured take BIKTARVY and are compensated by Gilead.

EXTENSIVE REPRESENTATION IN CLINICAL TRIALS MATTERS

BIKTARVY® WAS EVALUATED IN 9 CLINICAL TRIALS INVOLVING MORE THAN 3600 PARTICIPANTS FOR VARYING PERIODS OF TIME

STUDY 1489
568
Treatment-Naïve Adults

STUDY 1490
585
Treatment-Naïve Adults

STUDY 1844
547
Virologically Suppressed Adults

STUDY 1878
534
Virologically Suppressed Adults

STUDY 4030
284
Virologically Suppressed Adults, Including Those With Known or Suspected M184V/I Resistance Mutation

STUDIES 1961 & 5310
494
Virologically Suppressed Adult Women

STUDY 4449
86
Virologically Suppressed Adults Aged ≥65 Years

STUDY 1474
122
Virologically Suppressed Children and Adolescents

BRAAVE
493
Virologically Suppressed Black American Adults

- **Treatment-naïve** – People who are new to treatment.
- **Virologically suppressed** – People who have an undetectable viral load.

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STUDIED IN PEOPLE WHO WERE NEW TO TREATMENT AND IN THOSE WHO WERE UNDETECTABLE AND THEN SWITCHED TO BIKTARVY®

Two studies involved **more than 1,200 adults** new to HIV-1 treatment (634 new to BIKTARVY and 640 new to other treatments[§]) over a 3-year period.

- At the end of 3 years, most adults who had either been taking BIKTARVY continued or who were taking other treatments switched to BIKTARVY.
- Both groups were studied for 2 additional years.
- Together, these study periods examined BIKTARVY in adults new to treatment for a total of 5 years and included **over 120 women** on BIKTARVY.

Two additional studies involved **more than 1,100 adults** who were undetectable and switched or continued their current treatment (572 switched treatment with BIKTARVY and 568 continued their current treatment[‖]) over a 1-year period.

- At the end of 1 year, most adults who had been taking BIKTARVY continued or who were taking other treatments chose to switch to BIKTARVY.
- These groups were studied for 1 or 2 additional years.
- Together, these trials included **over 150 women** on BIKTARVY.

BIKTARVY has been researched in 160+ studies with over 97,000 people with HIV around the world.[¶]

[§]The other treatments were TRIUMEQ® (abacavir, dolutegravir, lamivudine) or DESCOVY® (emtricitabine, tenofovir alafenamide) + TIVICAY® (dolutegravir).

[‖]The continued treatments were TRIUMEQ (abacavir, dolutegravir, lamivudine) or a combination of either EPZICOM® (abacavir, lamivudine) or TRUVADA® (emtricitabine, tenofovir disoproxil fumarate) + atazanavir or darunavir (with cobicistat or ritonavir).

[¶]As of January 2024.

IMPORTANT SAFETY INFORMATION (cont'd)

Who should not take BIKTARVY?

Do not take BIKTARVY if you take:

- dofetilide
- rifampin
- any other medicines to treat HIV-1

Please click to see Important Facts about BIKTARVY, including important warnings, on page 12.

PROVEN POWER MEETS A PROVEN SAFETY PROFILE

BIKTARVY® IS ONE OF THE ONLY SINGLE-TABLET REGIMENS BACKED BY 5 YEARS OF CLINICAL TRIAL DATA

Both 3-year and 5-year clinical study time points showed that most adults new to treatment taking BIKTARVY as prescribed reached and stayed undetectable.

Both 1-year and 2-year clinical study time points showed that most adults who replaced their current treatment with BIKTARVY and took their treatment as prescribed stayed undetectable.

BIKTARVY CAN HELP YOUR CLIENTS STAY UNDETECTABLE WHEN SWITCHING TREATMENT

When taken as prescribed, BIKTARVY can help adults switching treatments stay undetectable and maintain their CD4 T-cell count. Before taking BIKTARVY, your client's healthcare provider must determine that they meet certain requirements.

Starting or switching HIV-1 treatment is an important decision. Your clients should always work with their healthcare team to decide which medicine makes sense.

IMPORTANT SAFETY INFORMATION (cont'd)

What are the other possible side effects of BIKTARVY?

Serious side effects of BIKTARVY may also include:

- **Changes in your immune system.** Your immune system may get stronger and begin to fight infections that may have been hidden in your body. Tell your healthcare provider if you have any new symptoms after you start taking BIKTARVY.
- **Kidney problems, including kidney failure.** Your healthcare provider should do blood and urine tests to check your kidneys. If you develop new or worse kidney problems, they may tell you to stop taking BIKTARVY.

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tenofovir alafenamide 25mg tablets

HELP YOUR CLIENTS UNDERSTAND POSSIBLE SIDE EFFECTS OF BIKTARVY®

Fewer than 1% of adults new to treatment stopped taking BIKTARVY due to related side effects through 5 years. This includes patients who initially started on BIKTARVY at the beginning of the clinical trials and who switched to BIKTARVY from another treatment after 3 years.[#]

In clinical trials of adults who were new to treatment, no patients stopped taking BIKTARVY due to bone-, kidney-, or liver-related side effects **through 5 years**, including those who initially started on BIKTARVY at the beginning of the trials and who switched to BIKTARVY from another treatment after 3 years.

In those same trials, 3 people stopped taking BIKTARVY due to weight-related side effects through 5 years.

The most common side effects of BIKTARVY in clinical studies through 3 years were each experienced in at least 1 out of 20 people (≥5%). In clinical studies of 634 adults new to HIV-1 treatment with BIKTARVY, the most common side effects were diarrhea (6%), nausea (6%), and headache (5%).

For the 634 people who initially started and stayed on BIKTARVY through 5 years, at least 5% of people in either study experienced diarrhea, headache, and nausea. For the 519 people who switched to BIKTARVY from another treatment after 3 years, the most common side effects experienced in at least 2 or more participants were diarrhea, weight increase, and headache.

Overall, the safety profile in clinical trials for people who switched to BIKTARVY was similar to that of people who were new to treatment with BIKTARVY.

These are not the only side effects of BIKTARVY. Ask your clients to talk to their healthcare provider if they experience any side effects that bother them or do not go away.

[#]The side effects, also known as adverse events, related to BIKTARVY that led patients to stop taking BIKTARVY over the 5-year studies were: weight gain; obesity; chest pain; bloating; sleep disorder, indigestion, tension headache, depressed mood, and insomnia; depression.

IMPORTANT SAFETY INFORMATION (cont'd)

What are the other possible side effects of BIKTARVY? (cont'd)

Serious side effects of BIKTARVY may also include: (cont'd)

- **Too much lactic acid in your blood (lactic acidosis)**, which is a serious but rare medical emergency that can lead to death. Tell your healthcare provider right away if you get these symptoms: weakness or being more tired than usual, unusual muscle pain, being short of breath or fast breathing, stomach pain with nausea and vomiting, cold or blue hands and feet, feel dizzy or lightheaded, or a fast or abnormal heartbeat.
- **Severe liver problems,** which in rare cases can lead to death. Tell your healthcare provider right away if you get these symptoms: skin or the white part of your eyes turns yellow, dark "tea-colored" urine, light-colored stools, loss of appetite for several days or longer, nausea, or stomach-area pain.

Please click to see Important Facts about BIKTARVY, including important warnings, on page 12.

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A HIGH BARRIER TO RESISTANCE CAN HELP DEFEND AGAINST DEVELOPING DRUG RESISTANCE

Why drug resistance matters
It's important to encourage your clients to take their treatment as prescribed, because low levels of medicine in the blood may make it easier for the HIV virus to mutate, or change. Some mutations can cause drug resistance, which means your clients' medicine may stop working and make the virus harder to treat even if they took their medicines as prescribed. In some cases, HIV is already resistant to certain medications when it is acquired. This is called preexisting resistance and can impact both individuals and their communities.

High barrier to resistance
A medicine's barrier to resistance refers to how well it works, even when the virus has mutated. When a medicine has a high barrier to resistance, it means the medicine may still work even if the virus has mutated.
Important Note: Not all medicines have the same high barrier to resistance.

Taking a treatment that has a high barrier to resistance, like BIKTARVY, and taking medication as prescribed can help reduce the risk of drug resistance.

Resistance is permanent, irreversible, and can significantly limit a person's treatment options.

BIKTARVY®
bictegravir 50mg/emtricitabine 200mg/
tenofovir alafenamide 25mg tablets

STUDIED WITH DRUG RESISTANCE IN MIND

ZERO RESISTANCE OVER 5 YEARS

0 resistance

Zero adults new to treatment developed drug resistance to BIKTARVY® through 5 years of clinical trials.

The unique combination of medicines in BIKTARVY provides a high barrier to resistance. Encourage your clients to talk to their care team about why resistance matters.

IMPORTANT SAFETY INFORMATION (cont'd)

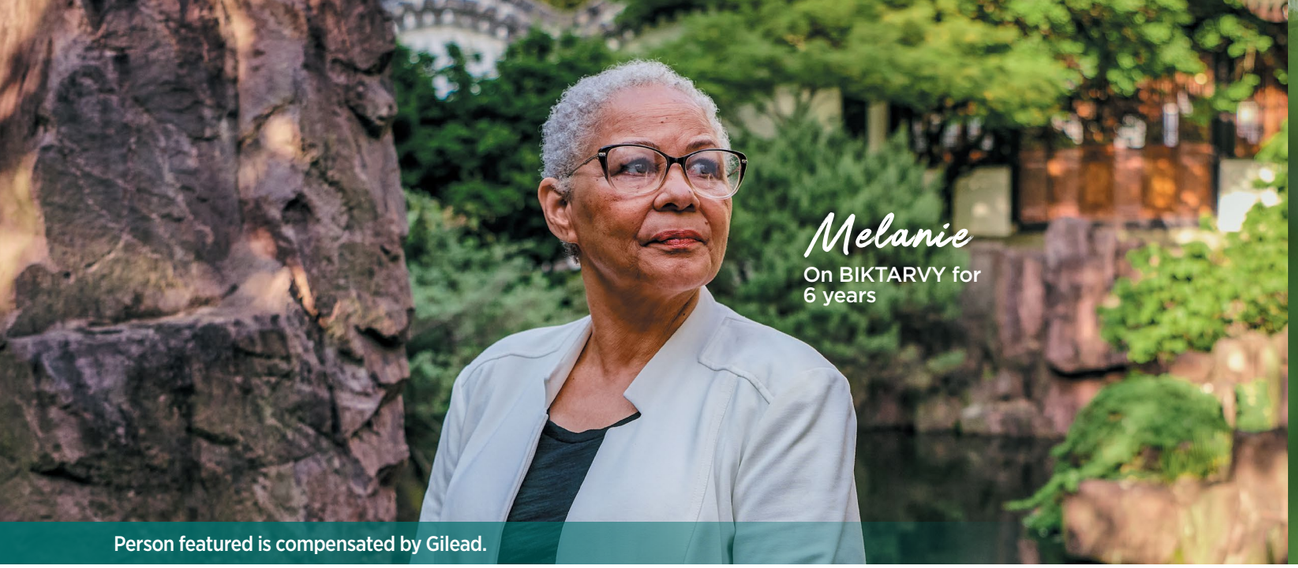
What are the other possible side effects of BIKTARVY? (cont'd)

The most common side effects of BIKTARVY in clinical studies were diarrhea (6%), nausea (6%), and headache (5%). Tell your healthcare provider if you have any side effects that bother you or don't go away.

What should I tell my healthcare provider before taking BIKTARVY?

- **All your health problems.** Be sure to tell your healthcare provider if you have or have had any kidney or liver problems, including hepatitis virus.

Please click to see Important Facts about BIKTARVY, including important warnings, on page 12.



ENSURING DIVERSITY IN CLINICAL TRIALS

BIKTARVY® WAS STUDIED IN A CLINICAL TRIAL EXCLUSIVELY INVOLVING BLACK AMERICANS

In an additional trial (BRAAVE), BIKTARVY was studied exclusively in **over 450 Black Americans** who switched or continued their current treatment.**

- This study involved more than 450 Black Americans (330 switched their current treatment to BIKTARVY and 165 continued their treatment) over 24 weeks.
- At the end of 24 weeks, those on BIKTARVY stayed on BIKTARVY. Those on their current original treatment switched to BIKTARVY. These groups were studied for another 24 weeks, for a total of 48 weeks.
- The study then continued for another 24 weeks, for a total of 72 weeks.

The BRAAVE study also evaluated some people with preexisting drug resistance, including the M184V/I mutation.

**The continued treatments were a combination of a baseline NRTI backbone (F/TAF, F/TDF, abacavir/lamivudine, or other) with a baseline third agent (INSTI, NNRTI, PI, or CCR5 antagonist).

IMPORTANT SAFETY INFORMATION (cont'd)

What should I tell my healthcare provider before taking BIKTARVY? (cont'd)

- **All the medicines you take**, including prescription and over-the-counter medicines, antacids, laxatives, vitamins, and herbal supplements. BIKTARVY and other medicines may affect each other. Keep a list of all your medicines and show it to your healthcare provider and pharmacist, and ask if it is safe to take BIKTARVY with all of your other medicines.

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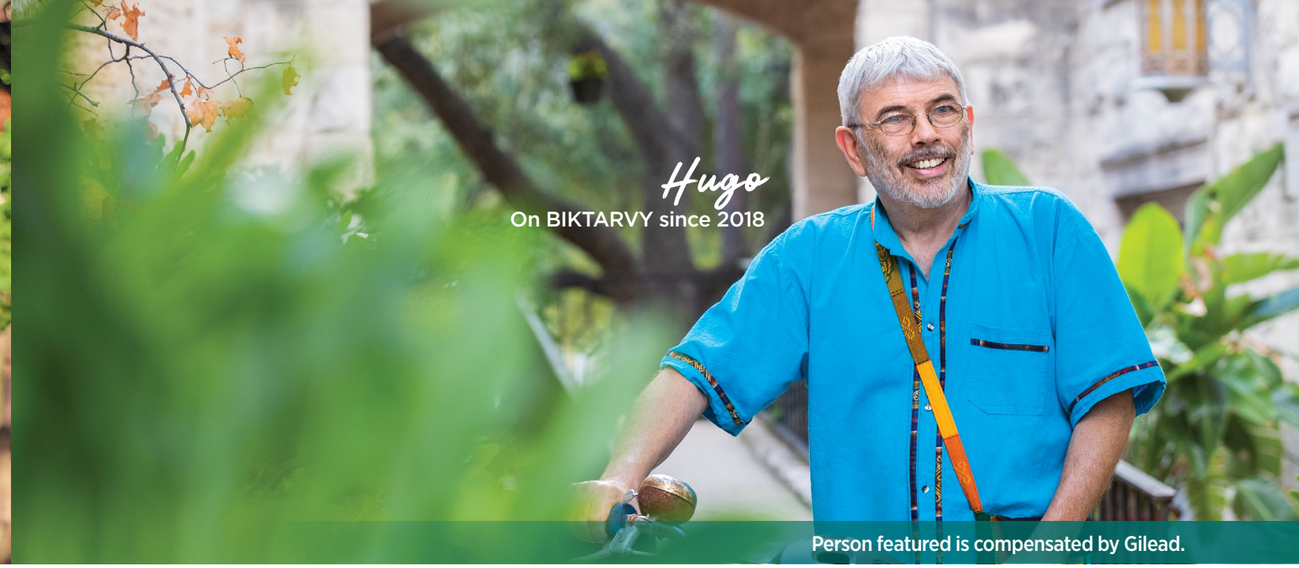

STUDIED IN CASES WHEN HIV CHANGED IN CERTAIN WAYS

BIKTARVY® WAS STUDIED IN SOME CASES WHERE THE VIRUS HAD CHANGED IN CERTAIN WAYS (A MUTATION CALLED M184V/I) BEFORE PARTICIPANTS SWITCHED TO TREATMENT WITH BIKTARVY

Sometimes the HIV virus can mutate or change. Some mutations can cause drug resistance, which means treatment may stop working and make the virus harder to treat.

One additional study (Study 4030) involved more than 560 adults.

- People in the study either switched or continued their current treatment. 284 switched treatment to BIKTARVY and 281 stayed on or switched their treatment to DESCOVY® (emtricitabine, tenofovir alafenamide) + TIVICAY® (dolutegravir) over a 1-year period.
- Of the adults who switched to BIKTARVY, 47 out of 284 had an HIV virus that had changed in a certain way **(a mutation called M184V/I)**, so that it was resistant to emtricitabine, a medicine in BIKTARVY.

Treatments that fight HIV in similar ways are grouped together in something called a "treatment class." BIKTARVY contains 3 medicines that work across 2 drug classes in 1 pill, making it a single-tablet regimen (STR). Bictegravir, 1 of the 3 medicines in BIKTARVY, is an integrase strand transfer inhibitor (INSTI), making BIKTARVY an INSTI-based STR.

BIKTARVY is FDA approved and DHHS recommended in virally suppressed people with known or suspected M184V/I resistance.

DHHS, US Department of Health and Human Services.

Please click to see Important Facts about BIKTARVY, including important warnings, on page 12.

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A COMMITMENT TO WOMEN

BIKTARVY® WAS STUDIED IN NEARLY 1000 WOMEN, INCLUDING SOME WHO WERE PREGNANT

In one trial, BIKTARVY was studied exclusively in **over 450 women** who were undetectable and switched or continued their current treatment.††

- This study involved more than 450 adult women (234 switched their current treatment with BIKTARVY and 236 continued their treatment) over a 1-year period.
- At the end of 1 year, adults were given the option to either continue taking BIKTARVY or switch from their treatment to BIKTARVY.
- These groups were studied for an additional year.

In another trial, BIKTARVY was studied in over **30 pregnant** women who were undetectable and switched from their current treatment to BIKTARVY.

- This study involved more than 30 pregnant women who switched from their current treatment during their second or third trimester of pregnancy and were observed through 18 weeks after giving birth.

The US Department of Health and Human Services recommends BIKTARVY as a preferred regimen for use during pregnancy and when trying to conceive.

††The other treatments were GENVOYA® (elvitegravir, cobicistat, emtricitabine, tenofovir alafenamide), STRIBILD® (elvitegravir, cobicistat, emtricitabine, tenofovir disoproxil fumarate), or REYATAZ® (atazanavir) + NORVIR® (ritonavir) + TRUVADA® (emtricitabine, tenofovir disoproxil fumarate).

BIKTARVY®
bictegravir 50mg/emtricitabine 200mg/
tenofovir alafenamide 25mg tablets

STUDIED IN MANY DIFFERENT AGES, FROM 3 TO 80

BIKTARVY® WAS STUDIED IN CHILDREN, ADOLESCENTS, AND OLDER ADULTS LIVING WITH HIV

In one clinical trial, BIKTARVY was studied exclusively in **more than 80 adults aged 65 years or older** who were undetectable and switched their current treatment. This group was studied for 2 years.‡‡

In another trial, BIKTARVY was studied exclusively in **more than 120 children and adolescents aged 2 to less than 18 years** who were undetectable and switched their current treatment.

- This study involved one group of 50 adolescents aged 12 to less than 18 years (weighing at least 77 lbs), one group of 50 children aged 6 to less than 12 years (weighing at least 55 lbs), and a third group of 22 children 2 years or older (weighing at least 31 lbs to less than 55 lbs).
- These groups were each studied for 1 or 2 years.

Children weighing at least 31 pounds to less than 55 pounds take a lower-dose tablet of BIKTARVY containing 30 mg bictegravir, 120 mg emtricitabine, and 15 mg tenofovir alafenamide once daily with or without food.

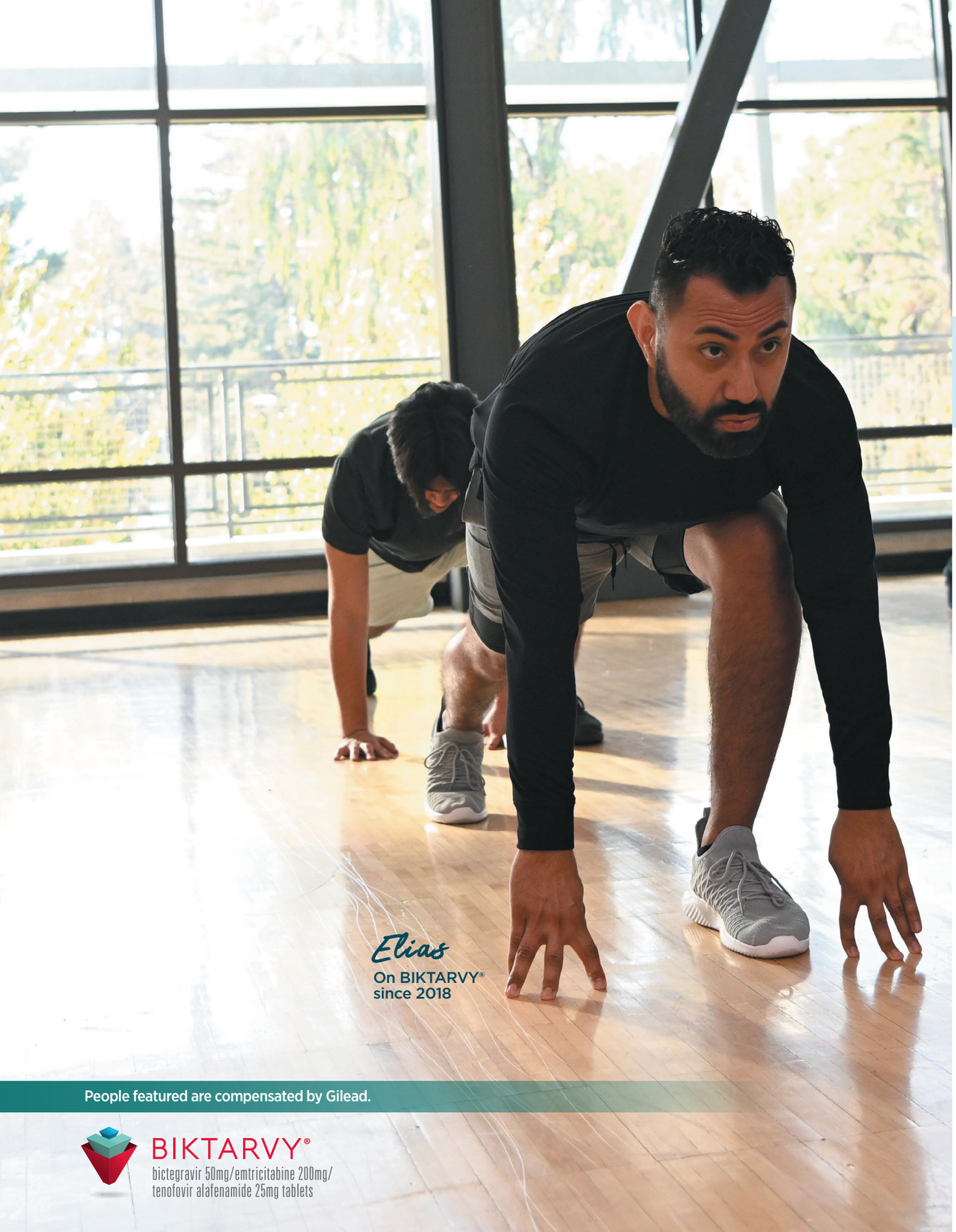
‡‡The other treatments were GENVOYA® (elvitegravir, cobicistat, emtricitabine, tenofovir alafenamide), COMPLERA® (rilpivirine, emtricitabine, tenofovir disoproxil fumarate), ATRIPLA® (efavirenz, emtricitabine, and tenofovir disoproxil fumarate), STRIBILD® (elvitegravir, cobicistat, emtricitabine, tenofovir disoproxil fumarate), or VIRAMUNE® (nevirapine) + TRUVADA® (emtricitabine, tenofovir disoproxil fumarate).

IMPORTANT SAFETY INFORMATION (cont'd)

What should I tell my healthcare provider before taking BIKTARVY? (cont'd)

- **If you are pregnant** or plan to become pregnant. Tell your healthcare provider if you become pregnant while taking BIKTARVY.

Please click to see Important Facts about BIKTARVY, including important warnings, on page 12.



BUILT TO START FAST

BIKTARVY® WAS DESIGNED TO ATTACK THE VIRUS RIGHT AWAY

The unique combination of medicines in BIKTARVY was designed to attack the virus right away and to work together to lower the amount of HIV in your clients' blood to undetectable levels.

According to the US Department of Health and Human Services (DHHS), many patients can get to undetectable in as quickly as 8 to 24 weeks when taking their treatment as prescribed. Some people are even able to start treatment the **same day** as diagnosis.

HELP YOUR CLIENTS STAY ON TRACK

ENCOURAGE YOUR CLIENTS TO KEEP TAKING THEIR TREATMENT EXACTLY AS PRESCRIBED

Here are a few ways you can help your clients keep going with their treatment:

- **Make BIKTARVY part of their routine.** Prompt your clients to set a reminder in their phone. This way, they won't forget when it's time to take their medication.
- **Stay connected.** Encourage your clients to have ongoing conversations with their healthcare provider.
- **Get automated.** Suggest your clients set up an automatic refill prescription with their pharmacy.
- **Build a support network.** Encourage your clients to seek additional support from their friends, family, or support groups.

IMPORTANT SAFETY INFORMATION (cont'd)

What should I tell my healthcare provider before taking BIKTARVY? (cont'd)

- **If you are breastfeeding** (nursing) or plan to breastfeed. Talk to your healthcare provider about the risks of breastfeeding during treatment with BIKTARVY.

You are encouraged to report negative side effects of prescription drugs to the FDA. Visit www.fda.gov/medwatch or call 1-800-FDA-1088.

Please click to see Important Facts about BIKTARVY, including important warnings, on page 12.

HELP YOUR CLIENTS GET BACK ON TRACK

According to the CDC, in 2023 nearly

1/2 OF PEOPLE

diagnosed with HIV[§§] in the US were not retained in care[¶¶]

[§§] Persons aged 13 years and older with diagnosed HIV in the United States.

[¶¶] Retention in HIV care defined as ≥2 CD4 count or viral load tests spaced at least 3 months apart during 2023 among people with diagnosed HIV in the United States and 6 territories and freely associated states.

According to the US Department of Health and Human Services, some reasons people with HIV stop seeking HIV care may include fear of HIV stigma or general mistrust of the healthcare system. As an Allied Health Care Professional, you are often the first contact for your clients, and it's important to provide your clients with support, resources, and encouragement to help them get back and stay engaged in care.

START THE CONVERSATION ABOUT RESTARTING TREATMENT

Here are some key points to keep in mind when talking with your clients about restarting their HIV treatment.

Empathy and outreach

Help ground your discussion by creating a safe space where your clients can feel comfortable discussing their concerns without fear of judgment or blame.

Identify barriers to treatment

Ask your clients why they may have stopped treatment and encourage them to discuss these issues with their healthcare provider. Ensure that your clients are aware of available support resources.

Support their next step

Encourage your clients to restart treatment and let them know that a healthcare provider can help determine the right treatment option to address their goals.

IMPORTANT SAFETY INFORMATION

What is the most important information I should know about BIKTARVY?

BIKTARVY may cause serious side effects:

- **Worsening of hepatitis B (HBV).** Your healthcare provider will test you for HBV. If you have both HIV-1 and HBV and stop taking BIKTARVY, your HBV may suddenly get worse. Do not stop taking BIKTARVY without first talking to your healthcare provider, as they will need to monitor your health, and may give you HBV medicine.

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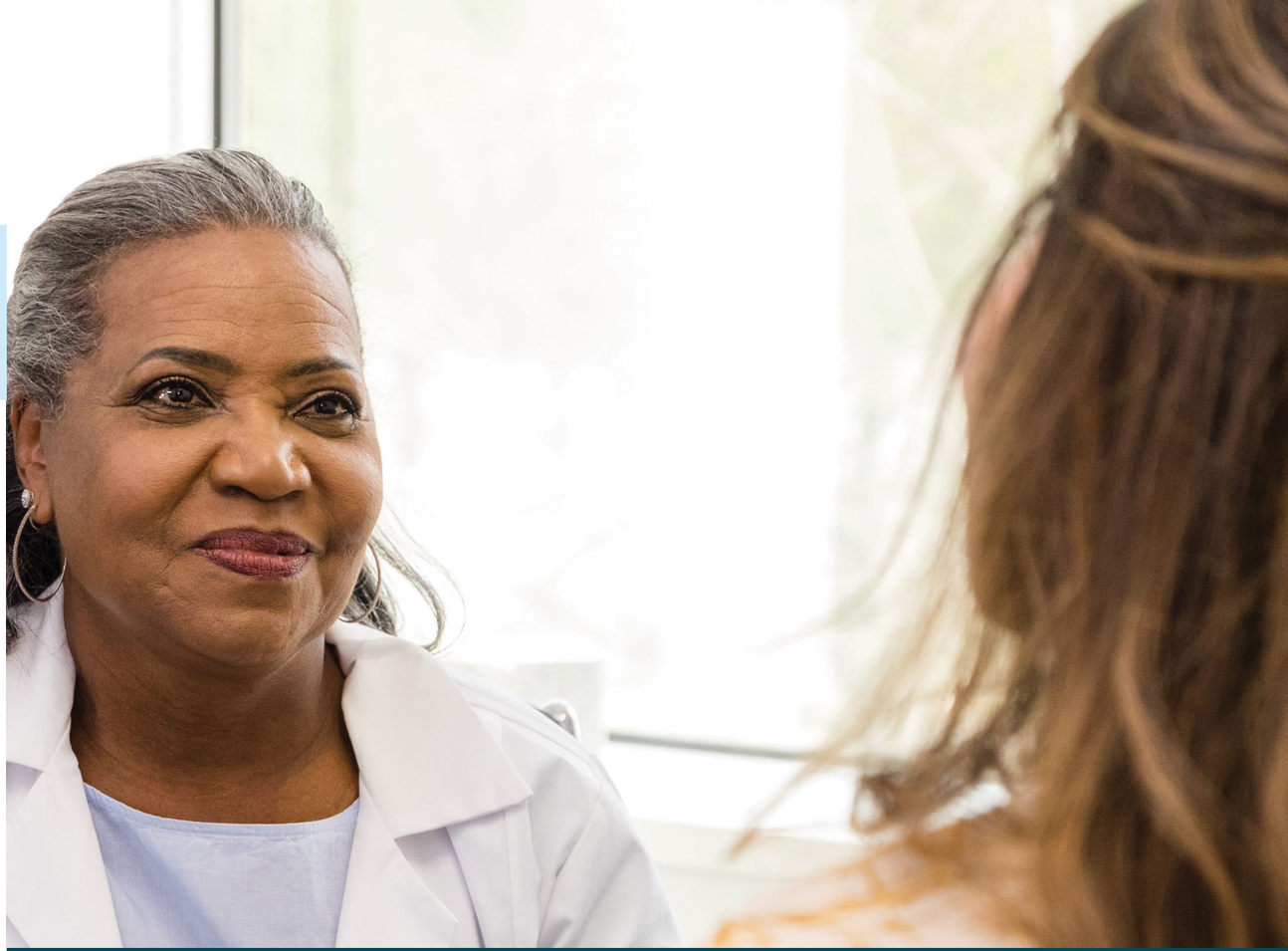


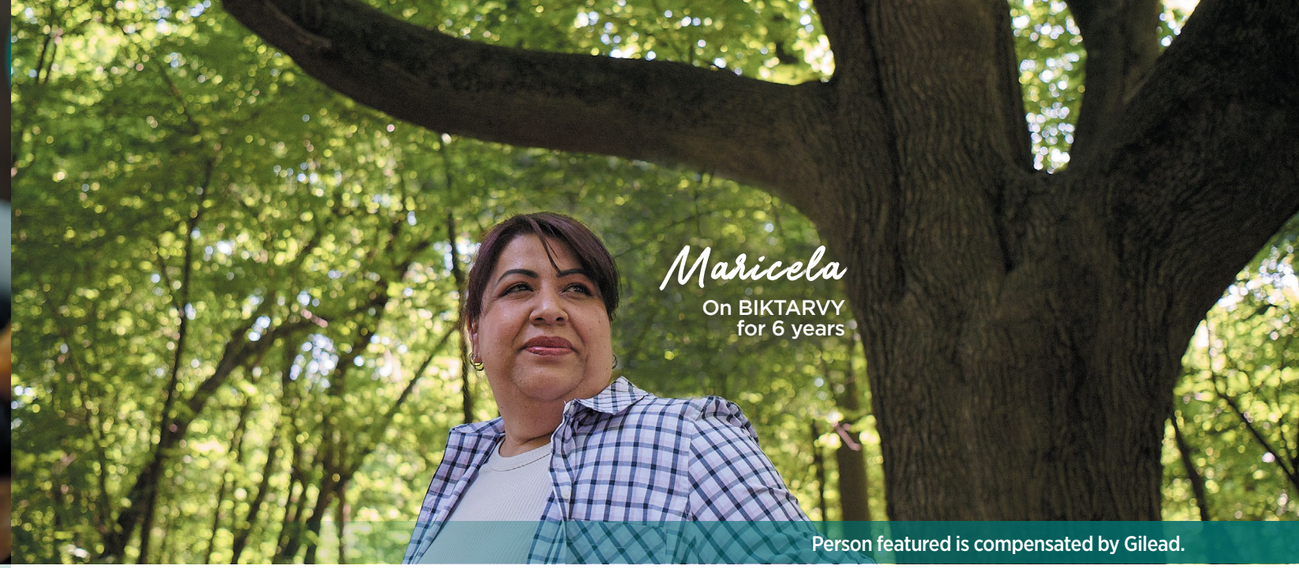
BIKTARVY is the **first and only**, **once-daily**, **single pill** to receive an **additional FDA approval** for use in **people with HIV restarting treatment**, when appropriate.

Encourage your clients to talk to their healthcare provider to see if BIKTARVY is right for them as they restart treatment.

Model portrayals

Please click to see Important Facts about BIKTARVY, including important warnings, on page 12.

Not actual size (15 mm x 8 mm)



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DON'T LET COST BE A BARRIER TO TREATMENT FOR YOUR CLIENTS

If a healthcare provider has determined that a Gilead treatment is right for their clients, then the Gilead Advancing Access® program is committed to helping them afford their medication, no matter the situation.

If eligible,

Your clients may be able to pay as little as **$0 for their co-pay**.##

##For commercially insured eligible patients only. Restrictions apply. Subject to change. See terms and conditions at GileadAdvancingAccess.com.

If your clients do not have insurance, Advancing Access can help explore alternative support options. Call Advancing Access (1-800-226-2056) or go to **GileadAdvancingAccess.com**.

Advancing Access specialists can help your clients understand health insurance and Gilead medication costs.

IMPORTANT SAFETY INFORMATION (cont'd)

Who should not take BIKTARVY®?

Do not take BIKTARVY if you take:

- dofetilide
- rifampin
- any other medicines to treat HIV-1

BIKTARVY®
bictegravir 50mg/emtricitabine 200mg/
tenofovir alafenamide 25mg tablets

THE #1 PRESCRIBED HIV TREATMENT FOR PEOPLE LIVING WITH HIV

Source: *IQVIA LAAD*, July 2018 through July 2024.***

Backed by broad experience in clinical trials

- BIKTARVY® has been studied in **thousands of people from many different walks of life**.

Proven power meets a proven safety profile

- BIKTARVY is one of the only single-tablet regimens backed by **5 years of efficacy data and a proven safety profile in clinical trials of people new to treatment**.
- Both 3-year and 5-year clinical study time points showed that most adults new to treatment taking BIKTARVY as prescribed **reached and stayed undetectable**.
- In clinical studies of adults new to HIV treatment with BIKTARVY, the most common side effects were diarrhea (6%), nausea (6%), and headache (5%).

Studied with drug resistance in mind

- Zero adults new to treatment developed drug resistance to BIKTARVY through 5 years of clinical trials.

Your clients are like no other. Discover how BIKTARVY studies may reflect their unique experiences.

Visit **BIKTARVY.com** to learn more about the #1 prescribed HIV treatment.***

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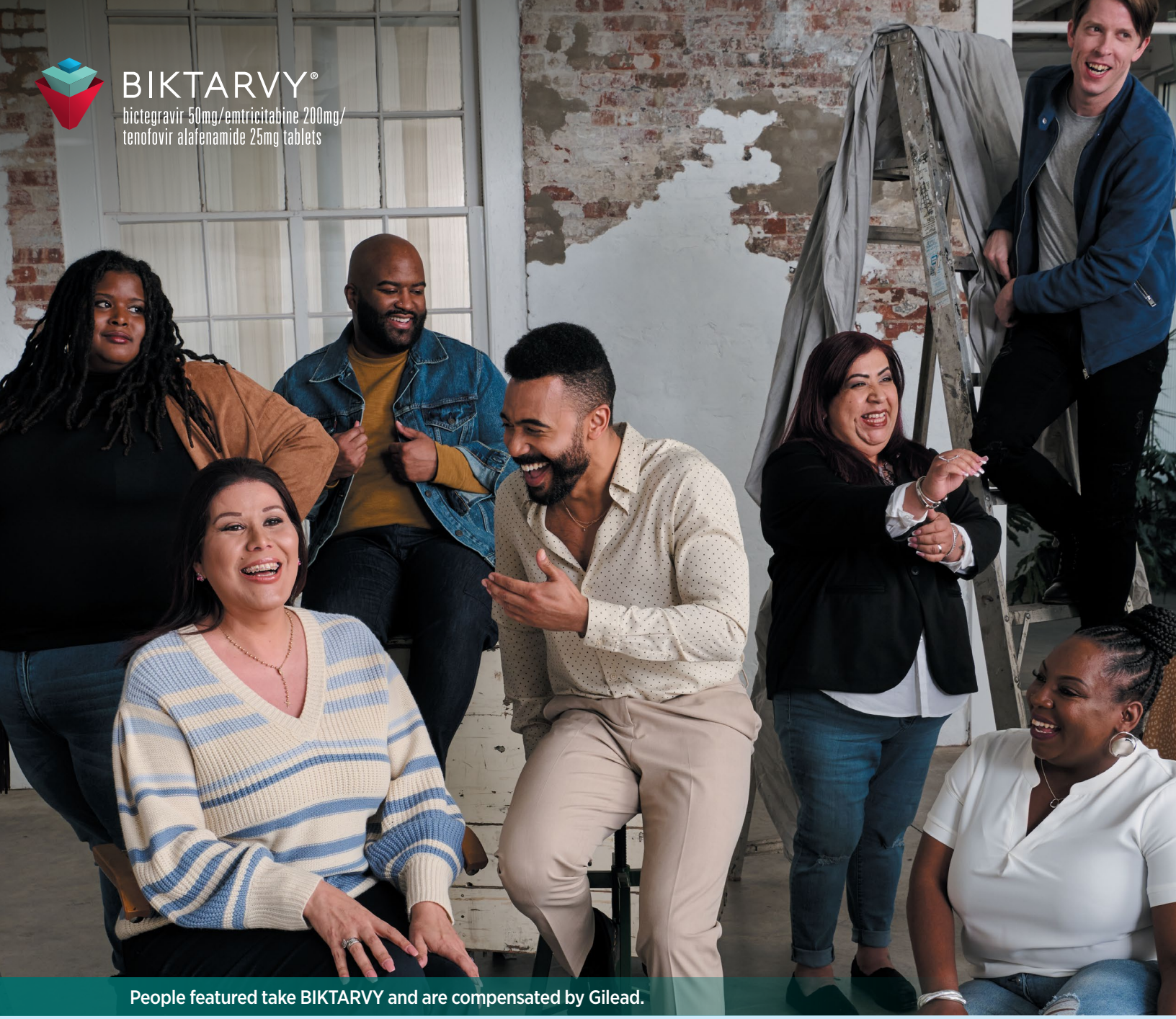
Please click to see Important Facts about BIKTARVY, including important warnings, on page 12.



CONNECT WITH YOUR CLIENTS

One of the best ways to connect with your clients is to hear stories like theirs. Watch some of the brilliant people who take BIKTARVY® share how they go beyond their diagnosis. Visit **BIKTARVY.com/real-stories**.

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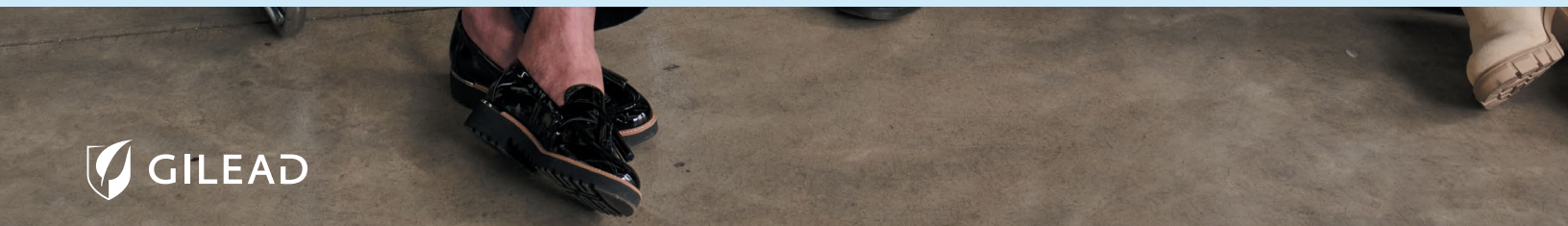

GILEAD

BIKTARVY®

bictegravir 50mg/emtricitabine 200mg/
tenofovir alafenamide 25mg tablets

(bik-TAR-vee)

IMPORTANT FACTS

This is only a brief summary of important information about BIKTARVY® and does not replace talking to your healthcare provider about your condition and your treatment.

MOST IMPORTANT INFORMATION ABOUT BIKTARVY

BIKTARVY may cause serious side effects, including:

- **Worsening of hepatitis B (HBV).** Your healthcare provider will test you for HBV. If you have both HIV-1 and HBV, your HBV may suddenly get worse if you stop taking BIKTARVY. Do not stop taking BIKTARVY without first talking to your healthcare provider, as they will need to check your health regularly for several months, and may give you HBV medicine.

ABOUT BIKTARVY

BIKTARVY is a complete, 1-pill, once-a-day prescription medicine used to treat HIV-1 in adults and children who weigh at least 31 pounds. It can either be used in people who have never taken HIV-1 medicines before, or people who have received HIV-1 medicines in the past, or to replace their current HIV-1 medicines, and whose healthcare provider determines they meet certain requirements.

BIKTARVY does not cure HIV-1 or AIDS. HIV-1 is the virus that causes AIDS.

Do NOT take BIKTARVY if you also take a medicine that contains:

- dofetilide
- rifampin
- any other medicines to treat HIV-1

BEFORE TAKING BIKTARVY

Tell your healthcare provider all your medical conditions, including if you:

- Have or have had any kidney or liver problems, including hepatitis.
- Are pregnant or plan to become pregnant.
- Are breastfeeding (nursing) or plan to breastfeed. Talk to your healthcare provider about the risks of breastfeeding during treatment with BIKTARVY.

Tell your healthcare provider about all the medicines you take:

- Keep a list that includes all prescription and over-the-counter medicines, antacids, laxatives, vitamins, and herbal supplements, and show it to your healthcare provider and pharmacist.
- Ask your healthcare provider or pharmacist about medicines that interact with BIKTARVY.

POSSIBLE SIDE EFFECTS OF BIKTARVY

BIKTARVY can cause serious side effects, including:

- Those in the "Most Important Information About BIKTARVY" section.
- Changes in your immune system.
- New or worse kidney problems, including kidney failure.
- Too much lactic acid in your blood (lactic acidosis), which is a serious but rare medical emergency that can lead to death. Tell your healthcare provider right away if you get these symptoms: weakness or being more tired than usual, unusual muscle pain, being short of breath or fast breathing, stomach pain with nausea and vomiting, cold or blue hands and feet, feel dizzy or lightheaded, or a fast or abnormal heartbeat.
- Severe liver problems, which in rare cases can lead to death. Tell your healthcare provider right away if you get these symptoms: skin or the white part of your eyes turns yellow, dark "tea-colored" urine, light-colored stools, loss of appetite for several days or longer, nausea, or stomach-area pain.
- **The most common side effects of BIKTARVY** in clinical studies were diarrhea (6%), nausea (6%), and headache (5%).

These are not all the possible side effects of BIKTARVY. Tell your healthcare provider right away if you have any new symptoms while taking BIKTARVY.

Your healthcare provider will need to do tests to monitor your health before and during treatment with BIKTARVY.

HOW TO TAKE BIKTARVY

Take BIKTARVY 1 time each day with or without food.

GET MORE INFORMATION

- This is only a brief summary of important information about BIKTARVY. Talk to your healthcare provider or pharmacist to learn more.
- Go to BIKTARVY.com or call 1-800-GILEAD-5.
- If you need help paying for your medicine, visit BIKTARVY.com for program information.

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