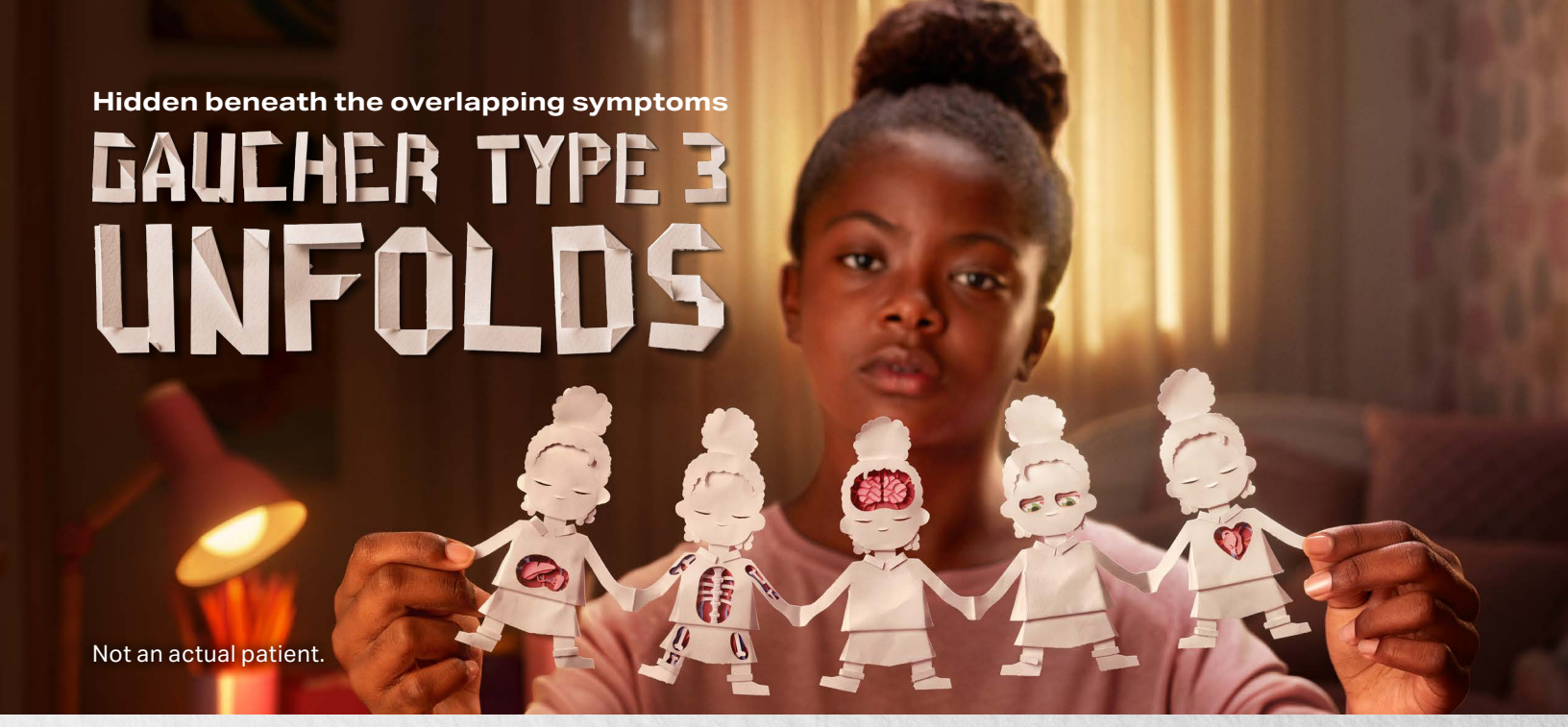
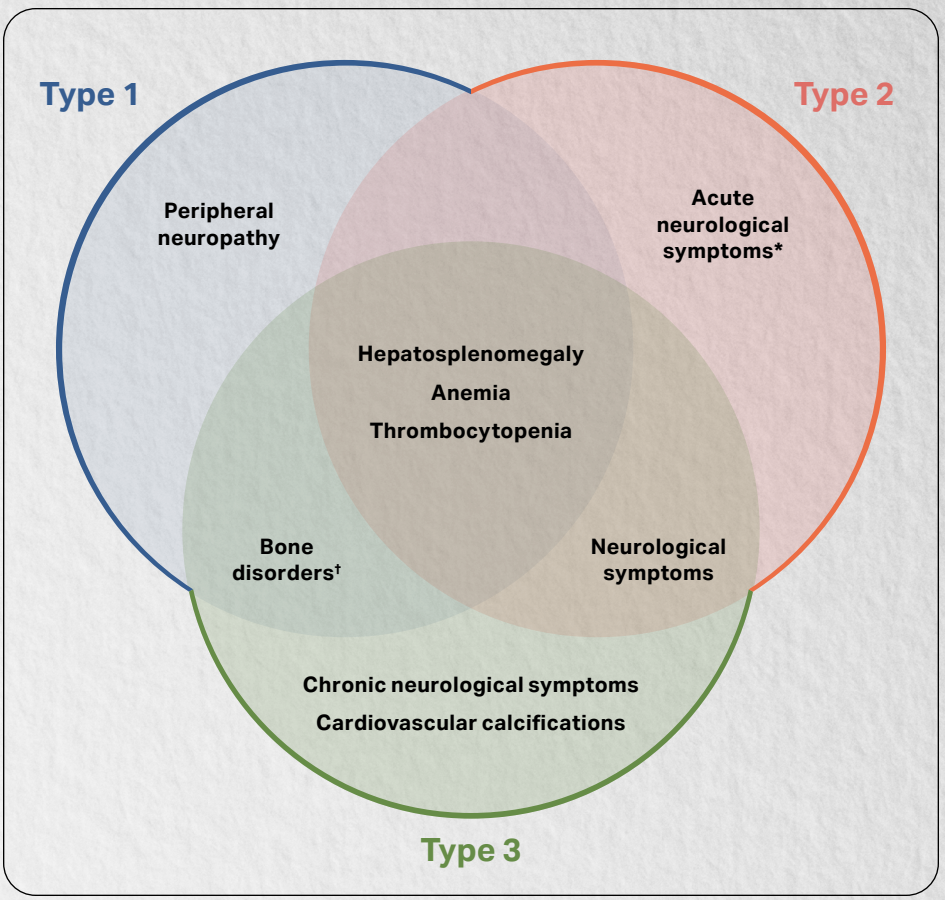


Gaucher disease is a difficult-to-diagnose disease with 3 subtypes[1-6]

Gaucher disease is a rare and progressive lysosomal storage disorder that can be generally categorized into 3 subtypes based on the presence, absence, and rate of progression of neurological symptoms.[2,7] Gaucher disease type 1 and type 3 (GD3) share many symptoms, leading to frequent reclassification.[1,8-12]

Early classification and monitoring of GD3 symptoms can help improve the timing and strategy of care[7]



Consistent monitoring is key to proper classification[13,14]

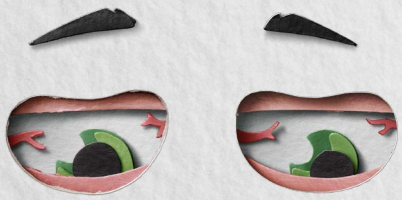
Gaucher disease can be diagnosed through acid β-glucosidase enzyme testing or genetic testing.[15] However, there is considerable phenotypic-genotypic heterogeneity between types, making it difficult to classify Gaucher disease based solely on genotype.[6] Therefore, regular neurological monitoring of all patients with Gaucher disease is essential to detect GD3 early.[7,13]

*Gaucher disease type 2 (GD2) is typically fatal within 2 years of life.[6]
†Skeletal manifestations in (GD2) are not well understood as the condition is typically fatal by 2 years of age.[1]

Detecting GAUCHER TYPE 3 requires more than meets the eye

The classic hallmark symptom of GD3 is gaze palsy[5]

Like Gaucher type 1, initial symptoms of GD3 often present in childhood.[1] Gaze palsy is a recognizable symptom that differentiates GD3 from GD1.[5]

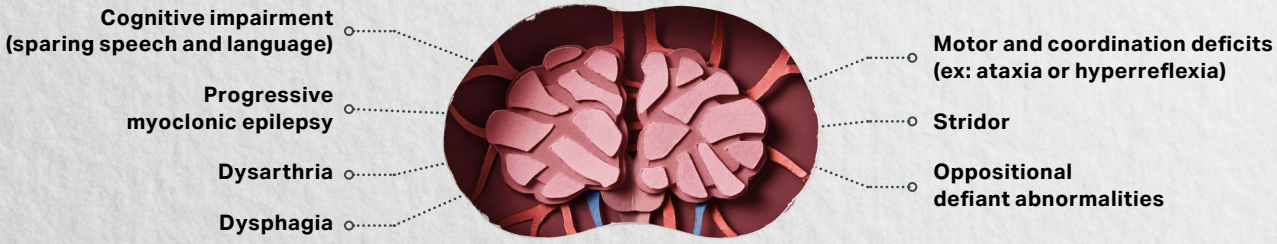


Gaze palsy in GD3

- Can be the first manifestation specific to type 3[6]
- Can occur early in childhood[6]
- Head thrusts and/or blinking may be signs of a patient compensating for ocular dysfunction[6]
- May be isolated or associated with other neurological symptoms[6]
- Absence does not rule out a diagnosis of GD3[16]

GD3 also causes diverse and sometimes severe neurological manifestations

Patients with GD3 may experience numerous neurological symptoms.[7] However, the symptoms vary in type, age of onset, rate of progression, and severity.[6,7]



Although approved therapies cannot address the neurological symptoms of GD3 yet, early detection and treatment can help avoid irreversible bone and visceral damage. Proper classification of Gaucher disease enables fully informed and proactive patient care.[2,7,17]

Monitor all patients with Gaucher disease for the emergence of neurological symptoms

References: 1. Weinreb NJ et al. *Mol Genet Metab.* 2022;136(1):4-21. **2.** El-Beshlawy A et al. *Mol Genet Metab.* 2017;120(1-2):47-56. **3.** Deegan PB et al. *Drug Des Devel Ther.* 2012;6:81-106. **4.** Goker-Alpan O. *Mol Genet Metab.* 2011;104(4):438-447. **5.** El-Beshlawy A et al. *J Rare Dis.* 2023;2(7). **6.** Schiffman R et al. *J Inherit Metab Dis.* 2020;43:1056-1059. **7.** Zhong W et al. *Acta Neurol Belg.* 2024;124(4):1213-1223. **8.** Capablo JL et al. *J Neurol Neurosurg Psychiatry.* 2008;79:219-222. **9.** Giraldo P et al. *Orphanet J Rare Dis.* 2012;7:17. **10.** Giraldo P et al. *Blood Cells Mol Dis.* 2016;56(1):23-30. **11.** Tajima A et al. *Mol Genet Metab.* 2009;97:272-277. **12.** D'Amore S et al. *Orphanet J Rare Dis.* 2021;16(1):431. **13.** Vellodi A et al. *J Inherit Metab Dis.* 2009;32(5):660-664. **14.** Hughes DA et al. *GeneReviews®* [Internet]. Accessed March 7, 2024. https://www.ncbi.nlm.nih.gov/books/NBK1269/ **15.** Grabowski GA et al. *The Online Metabolic and Molecular Bases of Inherited Disease.* Accessed March 11, 2024. https://ommbid.mhmedical.com/content.aspx?bookid=2709&sectionid=225546056 **16.** Lu WL et al. *Orphanet J Rare Dis.* 2023;18(1):293. **17.** Gary SE et al. *Expert Rev Endocrinol Metab.* 2018;13(2):107-118.

Scan for Sanofi Campus page

SANOFI, Level 3, One JLT,
Jumeirah Lake Towers (JLT), DMCC, PO Box 53899, Dubai, UAE Tel.: +971 4 550 3600 | Fax: +971 4 5521050.
For further medical information, please contact: For UAE ✆ 800 MEDICAL Toll-Free Number.
For all Gulf countries ✆ +971 45 50 38 63 or email: medical-information.gulf@sanofi.com.
To report an adverse event or drug reaction, please contact us on:
24/ 7 Pharmacovigilance reporting number: +971 561747001 e-mail: gulf.pharmacovigilance@sanofi.com

SANOFI, SAUDI ARABIA,
TAHLIA STREET, NOJOUD CENTER, GATE C, 1ST FLOOR, P.O. BOX 9874, JEDDAH 21423, SAUDI ARABIA
For Medical Information: Please contact: +966126693318 Email: ksa.medicalinformation@sanofi.com, Website: www.sanofi.com.sa
For Pharmacovigilance, Please contact: +966-54-428-4797, ksa_pharmacovigilance@sanofi.com
To report any product technical complaints, kindly contact quality.greatergulf@sanofi.com. To report any side effect(s), Saudi Arabia:
The National Pharmacovigilance Centre (NPC): SFDA Call Center: 19999, E-mail: npc.drug@sfda.gov.sa Website: https://ade.sfda.gov.sa/

MAT-BH-2600019-V1-Feb-2026

sanofi