



ARTWORK

LEO Pharma A/S
Internal Market Access

Scale	Get-up	Material No	Sent by e-mail
100%	HK+MY	064963-XX	▼
Subject	CRT 63 x 53 x 185 mm	Date	25/03/20
Colour	PMS 485 + 7421 + black	Sign.	OMA

Preparation Strength Packsize	Enstilar® Foam 60 g	Place of production	Ireland
Comments: Braille shown with colour Braille Marburg medium Mock-up for reg. purpose			



CIE097B-02 - 63 x 53 x 185 mm

Keyline

No Varnish

Net contents: 146.4 g/268 ml

60 g

calcipotriol/betamethasone

cutaneous foam

50 micrograms/g + 0.5 mg/g

Enstilar®

CIE097B-02
63x53x185mm

No varnish

Enstilar®

50 micrograms/g + 0.5 mg/g
cutaneous foam
calcipotriol/betamethasone

Cutaneous use
For external use only
只供外用。

Caution:
Extremely flammable aerosol.
Pressurised container: May burst if heated.
Protect from sunlight.
Do not expose to temperatures exceeding 50°C.
Do not pierce or burn, even after use.
Do not spray on an open flame or other ignition source.
Keep away from sparks, open flames and other ignition sources. No smoking.

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60 g
Net contents: 146.4 g/268 ml

LEO

LEO

Lot/MAN/EXP:

Imprinting area
No varnish

064963-XX

One gram contains 50 micrograms of calcipotriol (as monohydrate) and 0.5 mg of betamethasone (as dipropionate).

Excipients:
Liquid paraffin
Polyoxypropylene stearyl ether
All-rac-α-tocopherol
White soft paraffin
Butylhydroxytoluene (E321)
Butane
Dimethyl ether.
See leaflet for further information.

Shake can for a few seconds before use.
Hold can (not horizontally) at least 3 cm from skin and spray.
Do not apply directly to the face or eyes.
Wash hands after use.

Read the package leaflet before use.

Keep out of the sight and reach of children.

請勿貯存於攝氏25度以上。
Do not store above 25°C.

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Hong Kong: HK-66143
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Product registration holder in Malaysia: DKSH Malaysia Sdn Bhd
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47301 Petaling Jaya, Selangor, Malaysia.

JAUHI UBAT DARI KANAK-KANAK
Controlled medicine/Ubat terkawal

Prescription Drug 處方藥物

No varnish

No varnish

4. PROOF FROM OMA	Mock-up Approval Stamp (MAS)		
Date 26/05/20	Graphic Design	Editorial Proof	Second Approver
New proof requested ☐	According to: SOP_000647, SOP_000962, SOP_003993 and SOP_008676	According to: SOP_000647, SOP_000962 and SOP_008676	Product name ☐
Sign.:	☐	☐	Dosage form ☐
	1st Sign.: Date:	Sign.: Date:	Strength/Stripes ☐
Date:			Pack size ☐
	2nd Sign.: Date:		Prompts ☐
			Material No./Reg. No. ☐
			Barcode ☐
			Sign.: Date: