



# Starting the conversation with your healthcare team

Remember you are not alone in your treatment journey. Your healthcare team of doctors, nurses, pharmacists, and others, is your number one resource for questions or concerns about the NINLARO® (ixazomib) regimen\* and the disease.

To get the most from your visits or calls with your healthcare team, consider the following:



**Create a partnership** with your healthcare team that has clear lines of communication



**Establish trust** by having open discussions



**Prepare for your visit** by noting down symptoms and/or potential side effects



**Ask questions** if you're uncertain. There's no such thing as a silly question



**Take notes** during your visit or call



**Reach out** to professional organizations and patient support groups for information and help



**Review this conversation guide** prior to your visit or call to prepare for a productive discussion

## Indication

### Uses of NINLARO

NINLARO is a prescription medicine used to treat multiple myeloma in combination with the medicines REVLIMID® (lenalidomide) and dexamethasone, in people who have received at least one prior treatment for their multiple myeloma.

It is not known if NINLARO is safe and effective in children.

\*The NINLARO regimen included NINLARO+lenalidomide+dexamethasone.

**Please see Important Safety Information on page 4 and Patient Information in the accompanying full Prescribing Information.**

 **NINLARO**<sup>®</sup>  
(ixazomib) capsules  
4mg | 3mg | 2.3mg

## Questions you can ask

You can use these questions to prepare for your next conversation with your healthcare provider. They can help you get the conversation started and focus your time on discussing relevant needs and concerns. These questions and topics may prompt additional thoughts or concerns that you may want to write down to bring up with your healthcare team.

### General questions

- What are the goals of this treatment?
- These are the medications and supplements I am currently taking (be prepared with a list). Do these affect my treatment, and how?
- Can you help me understand how this treatment works?
- How often is treatment administered? For how long is treatment administered? What ways is treatment administered?
- How effective is the treatment you're recommending?
- How will I know if my multiple myeloma is responding to treatment?
- What does it mean if I achieve remission?
- How often will I need to come into the office?
- Can I make plans to travel?
- Are there patient support groups that you might recommend?

### Questions about lab work and tests

- What typical tests and scans will I need?
- How often do I need them?
- What tests/results should I keep track of?
- Can you explain the results of my tests?

**Don't hesitate to ask about other tests you may be curious about.**

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## Questions you can ask (cont'd)

### Questions about taking the all-oral NINLARO® (ixazomib) regimen\*

- How will I remember to take my medication?
- How should I store my medication?
- What if I forget to take a capsule?

### Questions about side effects

- What are the side effects of treatment?
- Are there signs or symptoms I should look out for?
- Should I expect any new or worsening symptoms at this point in my treatment?
- What should I do if I experience any side effects? How can they be managed?



**Have an open dialogue  
with your healthcare team.**

For more information about NINLARO and multiple myeloma, visit [www.NINLARO.com](http://www.NINLARO.com).

\*The NINLARO regimen included NINLARO+lenalidomide+dexamethasone.

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## IMPORTANT SAFETY INFORMATION FOR NINLARO® (ixazomib)

### NINLARO may cause serious side effects, including:

- **Low platelet counts (thrombocytopenia)** are common with NINLARO and can sometimes be serious. You may need platelet transfusions if your counts are too low. Tell your healthcare provider if you have any signs of low platelet counts, including bleeding and easy bruising.
- **Stomach and intestinal (gastrointestinal) problems.** Diarrhea, constipation, nausea, and vomiting are common with NINLARO and can sometimes be severe. Call your healthcare provider if you get any of these symptoms and they do not go away during treatment with NINLARO. Your healthcare provider may prescribe medicine to help treat your symptoms.
- **Nerve problems** are common with NINLARO and may also be severe. Tell your healthcare provider if you get any new or worsening symptoms including: tingling, numbness, pain, a burning feeling in your feet or hands, or weakness in your arms or legs.
- **Swelling** is common with NINLARO and can sometimes be severe. Tell your healthcare provider if you develop swelling in your arms, hands, legs, ankles, or feet, or if you gain weight from swelling.
- **Skin Reactions.** Tell your healthcare provider if you get a new or worsening rash.
- **Thrombotic microangiopathy (TMA).** This is a condition involving blood clots and injury to small blood vessels that may cause harm to your kidneys, brain, and other organs, and may lead to death. Get medical help right away if you get any of the following signs or symptoms during treatment with NINLARO: fever, bruising, nose bleeds, tiredness, or decreased urination.
- **Liver problems.** Tell your healthcare provider if you get these signs of a liver problem: yellowing of your skin or the whites of your eyes; pain in your right upper-stomach area.

Other common side effects have occurred. Tell your healthcare provider if you get new or worsening back pain, skin rash and pain (shingles) as a result of reactivation of the chicken pox virus (herpes zoster), lowered white blood cells (neutropenia) that may increase the risk of infection, or vision conditions including blurred vision, dry eye, and pink eye (conjunctivitis).

These are not all the possible side effects of NINLARO. Talk to your healthcare provider for medical advice about side effects. You may report side effects to FDA at 1-800-FDA-1088.

### Before taking NINLARO, tell your healthcare provider about all your medical conditions, including if:

- You have liver problems or kidney problems or are on dialysis.
- You or your partner are pregnant or plan to become pregnant. NINLARO can harm your unborn baby. Avoid becoming pregnant during treatment with NINLARO. Both male and female patients on NINLARO should use effective birth control during treatment and for 90 days after the final dose of NINLARO. If using hormonal contraceptives (for example, the pill), an additional barrier method of contraception (for example, diaphragm or condom) must be used.
- You are breastfeeding or plan to breastfeed. Do not breastfeed during treatment with NINLARO and for 90 days after your final dose of NINLARO.

**Tell your healthcare provider about all the medicines you take**, including prescription and over-the-counter medicines, vitamins, and herbal supplements or before starting any new medicines.

**Please see Patient Information in the accompanying full Prescribing Information.**

# Takeda Oncology: Helping you get the support you need

## Takeda Oncology Patient Support Program

Your connection for financial assistance and educational resources

- Works with your healthcare provider and your insurance company to help get you started on your medication
- Identifies available financial assistance that may be right for you
- May help get you started on treatment if there is a delay in insurance coverage determination
- Works with your pharmacy to arrange the delivery of your medication
- Connects you to additional support services and resources

To learn more about the Takeda Oncology Patient Support Program, call to speak with a case manager at 1-844-817-6468, Option 2, or visit [www.oncologypatientsupport.com](http://www.oncologypatientsupport.com).

Let's Talk. We're available Monday-Friday, 8AM-8PM ET.

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