

Working With Your Care Team



You are not alone in your treatment journey with multiple myeloma

It's important to have open and honest conversations with your healthcare team. Use these questions to help prepare for your next conversation with your healthcare provider.



Questions you may wish to discuss

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? How 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?

Please read the Important Safety Information on page 3-4 and the Patient Information in the accompanying full Prescribing Information.

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Commonly Asked Questions (Continued)

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

- How should I take the NINLARO 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 possible 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.

These questions are provided as a guide to prompt discussions that you may wish to have with your healthcare team, and they are not intended to be medical advice. You should follow the medical advice of your healthcare team.

For more information about NINLARO and multiple myeloma, visit www.NINLARO.com.

*NINLARO+lenalidomide+dexamthasone.

Please read the Important Safety Information on page 3-4 and the Patient Information in the accompanying full Prescribing Information.

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Indication and Important Safety Information

Indication and Important Safety Information for NINLARO® (ixazomib)

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.

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.

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Indication and Important Safety Information (Continued)

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

- Have liver problems.
- Have kidney problems or are on dialysis.
- Are pregnant or plan to become pregnant. NINLARO can harm your unborn baby.

Females who are able to become pregnant:

- o Avoid becoming pregnant during treatment with NINLARO. Your healthcare provider will do a pregnancy test before you start treatment with NINLARO. You should use effective non-hormonal birth control during treatment and for 90 days after your final dose of NINLARO. If using hormonal contraceptives (for example, birth control pills), you should also use an additional barrier method of contraception (for example, diaphragm or condom). Talk to your healthcare provider about birth control methods that may be right for you during this time. Tell your healthcare provider right away if you become pregnant or think you may be pregnant during treatment with NINLARO.

Males with female partners who are able to become pregnant:

- o You should use effective birth control during treatment and for 90 days after your final dose of NINLARO. Tell your healthcare provider right away if your partner becomes pregnant or thinks she may be pregnant while you are being treated with NINLARO.
- Are breastfeeding or plan to breastfeed. It is not known if NINLARO passes into breast milk, if it affects an infant who is breastfed, or breast milk production. Do not breastfeed during treatment with NINLARO and for 90 days after your final dose of NINLARO.

Taking too much NINLARO (overdose) can cause serious side effects, including death. If you take more NINLARO than instructed by your healthcare provider, call your healthcare provider right away or go to the nearest hospital emergency room right away. Take your medicine pack with you.

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 read the Patient Information in the accompanying full Prescribing Information.

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