GETTING STARTED WITH ON NIN



What is 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.

NINLARO should **not** be used to treat the following people, unless they are participants in a controlled clinical trial:

- people who are receiving maintenance treatment, or
- people who have been newly diagnosed with multiple myeloma.

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

NINLARO® (ixazomib) is the ability to have freedom to conduct my life and lifestyle in a more normal manner.

— Joe, real patient taking the all-oral NINLARO treatment combination (NINLARO + lenalidomide + dexamethasone).

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.

Keep Your on-the-go Lifestyle With NINLARO® (ixazomib)

We're here to support you with resources, tools, and tips to help you or your loved one get the most out of NINLARO.

NINLARO is the first and only proteasome inhibitor (PI) that has oral, at-home convenience—for people whose multiple myeloma has relapsed. A clinical study also proved that the NINLARO treatment combination* helped some patients live longer without their multiple myeloma getting worse.[†]

You can use this guide to help you along your NINLARO treatment journey. You'll find lots of practical content to answer questions, such as:

- results with NINLARO
- possible side effects
- how to take NINLARO
- how to get help paying for NINLARO
- living with multiple myeloma

You can find additional information and resources at www.NINLARO.com.

*The NINLARO treatment combination includes NINLARO + lenalidomide + dexamethasone.

^tThe US Food and Drug Administration (FDA) approved NINLARO based on the results of a clinical study. This study tested the NINLARO treatment combination (NINLARO + lenalidomide + dexamethasone) compared with placebo + lenalidomide + dexamethasone in 722 people whose multiple myeloma had come back or stopped responding to prior therapy. It measured the length of time a patient lived without their disease getting worse. Placebo pills do not contain active drug.

IMPORTANT SAFETY INFORMATION (continued)

 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.

Please see Important Safety Information throughout, full Important Safety Information on pages 27-28, and <u>Patient Information</u> in the accompanying NINLARO full <u>Prescribing Information</u>.

Not an actual patient.

In a clinical study with patients whose multiple myeloma had come back or stopped responding to prior therapy, the NINLARO treatment combination* helped some patients live longer without their multiple myeloma getting worse.[†]

Please see below for additional study information and check the bottom of page 6 for medical definitions you may not be familiar with.

Progression-free survival (PFS)[‡]

Treatment with the NINLARO treatment combination improved the median[§] progression-free survival by about 6 months.



Overall survival

In this study, people taking the NINLARO treatment combination lived a similar overall length of time after diagnosis as people who received the lenalidomide + dexamethasone combination.¹¹

Fast responses

Of the people who responded to it, half of them saw their first response in less than 1.1 months (the other half taking the NINLARO treatment combination took longer to see a response). For the patients who responded to the lenalidomide + dexamethasone combination, half saw their first response in less than 2 months (the other half taking the lenolidamide + dexamethasone combination took longer to see a response).

IMPORTANT SAFETY INFORMATION (continued)

• **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.



Deepened responses over time

Response to the NINLARO treatment combination deepened with more time on treatment. For example, twice as many people saw a complete response[¶] to treatment (disappearance of the M protein[#]) after 12 months compared to after 6 months. Responses deepened over time for both treatment combinations in the study.

Most people had a response



78% of people responded to the NINLARO treatment combination (vs 72% with the lenalidomide + dexamethasone combination). Of those taking the NINLARO treatment combination, 48% had a very good partial response (VGPR)** or a complete response (CR).[¶]

*The NINLARO treatment combination includes NINLARO + lenalidomide + dexamethasone.

¹The US Food and Drug Administration (FDA) approved NINLARO based on the results of this clinical study. This study tested the NINLARO treatment combination (NINLARO + lenalidomide + dexamethasone) compared with placebo + lenalidomide + dexamethasone in 722 people whose multiple myeloma had come back or stopped responding to prior therapy. It measured the length of time a patient lived without their disease getting worse. Placebo pills do not contain active drug.

[‡]PFS is the length of time during and after treatment that a person with multiple myeloma lives without it getting worse.

[§]A median is the middle number in a set of data. In other words, half of the numbers in the group are more than the median and half of the numbers in the group are less than the median.

¹¹The lenalidomide + dexamethasone combination includes placebo + lenalidomide + dexamethasone.

¹⁷Complete response is when there are less than 5% plasma cells in the bone marrow, and blood and urine lab tests show no M protein.

*M protein is an abnormal myeloma protein produced by myeloma cells.

**A 90% or greater decrease in M protein. Also called very good partial remission.

IMPORTANT SAFETY INFORMATION (continued)

• **Swelling** is common with NINLARO and can sometimes be severe. Tell your healthcare provider if you develop swelling in your face, arms, hands, legs, ankles, or feet, or if you gain weight from swelling.

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Staying on top of one's dosing schedule is key. The information in this section is based on how NINLARO was approved by the FDA. Please make sure to take the NINLARO treatment combination as prescribed by your healthcare provider.

Dosing highlights

- NINLARO is a capsule you take once a week for 3 weeks, followed by 1 week off
- NINLARO is taken with 2 other medications, lenalidomide and dexamethasone, in 4-week cycles
- Take NINLARO exactly as your healthcare provider tells you to take it. Do not change your dose or stop taking NINLARO without talking to your healthcare provider first

How to take NINLARO



Take each dose of NINLARO at least 1 hour before or at least 2 hours after food.



On the days that you take both NINLARO and dexamethasone, **do not** take NINLARO at the same time as dexamethasone.



Take dexamethasone with food.

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 immediately or go to the nearest hospital emergency room right away. Take your medicine pack with you.

IMPORTANT SAFETY INFORMATION (continued)

• **Skin Reactions.** Rashes are common with NINLARO. NINLARO can cause rashes and other skin reactions that can be serious and can lead to death. Tell your



Not an actual patient.



Dosing calendar

The calendar above represents the approved monthly dosing schedule for the NINLARO treatment combination.* A larger, blank NINLARO Dosing Calendar can be found in the pocket of this brochure. Fill in your individual dosing schedule with your healthcare provider and use it to keep track of your dosing schedule.

*The NINLARO treatment combination includes NINLARO + lenalidomide + dexamethasone.



Keep track of your dosing schedule

Download the Dosing Calendar www.ninlaro.com/dosing-calendar Use your phone camera to scan the QR code

IMPORTANT SAFETY INFORMATION (continued)

healthcare provider right away if you get a new or worsening rash, severe blistering or peeling of the skin, or mouth sores.



Know How to Take NINLARO® (ixazomib) (continued)



Important things to know when taking NINLARO

- Store in original packaging at room temperature. Remove capsule just before taking. Do not use pill containers
- NINLARO should be taken at least 1 hour before or at least 2 hours after food
- Swallow capsule whole, with water; do not crush or chew
- If a capsule breaks and you get medication on your skin, wash with soap and water
- If you get medication in your eyes, flush your eyes with water
- Take each dose at the same time each day
- If you miss a dose, you can take the missed dose as long as the next scheduled one is more than 3 days away
- If you vomit after taking a dose of NINLARO, do not repeat the dose. Instead, take your next dose of NINLARO on the next scheduled day and time
- If you take more NINLARO than instructed by your healthcare provider, call your healthcare provider immediately or go to the nearest hospital emergency room right away. Take your medicine pack with you
- For more information about your dosing, speak to your doctor and visit <u>NINLARO.com</u>

IMPORTANT SAFETY INFORMATION (continued)

• **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.



Questions you may want to ask at your next doctor visit

The NINLARO Conversation Starter includes questions that may help you prepare for your next conversation with your healthcare team.



Prepare for your next visit with your healthcare team

Download the Conversation Starter www.ninlaro.com/conversation-starter

Use your phone camera to scan the QR codes

Medication-reminder tips

[O]

Create a routine

Take medication after a routine activity, such as right after brushing teeth

Set an alarm

Set an alarm on your phone or watch that repeats, for the length of the treatment cycle

Keep it in plain sight

Leave medication in a place that's easy to spot, such as the kitchen counter

Record each dose

Keep track of each dose in a calendar or notebook. Use the Dosing Calendar included in the pocket of this brochure or download a Dosing Calendar at **www.NINLARO.com/dosing-calendar**

IMPORTANT SAFETY INFORMATION (continued)

• **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 (abdomen).



It's a relief to be able to take an **all-oral regimen at home**.

— Daryl, real patient

SAFE HANDLING PRECAUTIONS

Do not store above **86° F**/30° C Store at room temperature (**69° F**/21° C) Do not freeze (**32° F**/0° C)



Contents of the NINLARO capsule can be harmful to your skin and eyes. The capsule should not be crushed, chewed, or opened. If a NINLARO capsule breaks, avoid contact with capsule contents. If skin contact occurs, wash thoroughly with soap and water. If eye contact occurs, flush thoroughly with water.

Safe disposal—ask your pharmacist or healthcare team how you should dispose of unused NINLARO. **Keep out of the reach of children.**

IMPORTANT SAFETY INFORMATION (continued)

Other common side effects of NINLARO include low white blood cell counts (neutropenia) and bronchitis.



NINLARO comes in 2.3 mg, 3 mg, and 4 mg doses, all with similar packaging that you may not have used before. Follow these step-by-step instructions for safely handling your NINLARO package and capsules.



Make sure that the **blister pack is pushed all the way into the sleeve** to help with the release.



Press in on the package with your thumb and hold to release the locking mechanism.

Always store NINLARO in its original packaging until it is time to take it.

IMPORTANT SAFETY INFORMATION (continued)

Tell your healthcare provider if you get new or worsening signs or symptoms of the following during treatment with NINLARO:



Not an actual patient.



While pressing and holding the button with your thumb, **pull out the blister pack using your free hand**.



To access the NINLARO capsule, gently press on the blue tab to puncture the foil and remove the capsule.



Avoid direct contact with capsule contents. Swallow the capsule whole with water. Do not crush, chew, or open the capsule. After you take your medication, **wash your hands with soap and water**.

IMPORTANT SAFETY INFORMATION (continued)

 skin rash and pain (shingles) due to reactivation of the chicken pox virus (herpes zoster)

Please see Important Safety Information throughout, full Important Safety Information on pages 27-28, and <u>Patient Information</u> in the accompanying NINLARO full <u>Prescribing Information</u>.



Manageable tolerability was seen with the NINLARO treatment combination*



As with many medications, NINLARO treatment can cause side effects. It's important to know what most common side effects to expect when you or your loved one are on the NINLARO regimen* so you can take steps to manage them with your doctor.

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.** 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
 - o numbness
 - o pain
 - a burning feeling in your feet or hands
 - weakness in your arms or legs

*The NINLARO treatment combination includes NINLARO + lenalidomide + dexamethasone.

IMPORTANT SAFETY INFORMATION (continued)

• blurred vision or other changes in your vision, dry eye, and pink eye (conjunctivitis)



- **Swelling** is common with NINLARO and can sometimes be severe. Tell your healthcare provider if you develop swelling in your face, arms, hands, legs, ankles, or feet, or if you gain weight from swelling.
- **Skin Reactions.** Rashes are common with NINLARO. NINLARO can cause rashes and other skin reactions that can be serious and can lead to death. Tell your healthcare provider right away if you get a new or worsening rash, severe blistering or peeling of the skin, or mouth sores.
- **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 or pain in your right upper stomach-area (abdomen).

Other common side effects of NINLARO include low white blood cell count (neutropenia) and bronchitis.

Tell your healthcare provider if you get new or worsening signs or symptoms of the following during treatment with NINLARO:

- skin rash and pain (shingles) due to reactivation of the chicken pox virus (herpes zoster)
- blurred vision or other changes in your vision, dry eye, and pink eye (conjunctivitis)

These are not all the possible side effects of NINLARO. Call your healthcare provider for medical advice about side effects.

IMPORTANT SAFETY INFORMATION (continued)

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 Takeda at 1-844-217-6468 or FDA at 1-800-FDA-1088 or <u>www.fda.gov/medwatch</u>.**

Please see Important Safety Information throughout, full Important Safety Information on pages 27-28, and <u>Patient Information</u> in the accompanying NINLARO full <u>Prescribing Information</u>.



Not an actual patient.



There are steps that you may wish to discuss with your doctor to help manage the most common side effects that you may experience when taking the NINLARO treatment combination.* Working together with your doctor to practice these tips can lead to a more positive treatment experience.

Nausea and vomiting

- Make sure you let your healthcare team know when you experience nausea or vomiting so they can help you best manage your symptoms.
- There are many ways to manage nausea/vomiting, including lifestyle changes such as changing some things you eat or drink. Ask your healthcare team for recommendations.
 - Your team may recommend you eat small, frequent meals.
 - Take NINLARO at least 1 hour before or at least 2 hours after food.
- Your healthcare team may also give you a medication to prevent or treat nausea.
- Let your healthcare team know if the medicines for nausea/vomiting aren't working. You may have to try a few different medicines to find the one that works best for you.

Constipation

- After talking with your healthcare provider, you may be asked to modify your diet to include more liquids or change to certain foods to reduce constipation.
- Exercise may also be recommended. Always consult with your healthcare team to learn whether a certain exercise regimen is appropriate for you.
- Your healthcare provider may prescribe a laxative or other medicine.

*The NINLARO treatment combination includes NINLARO + lenalidomide + dexamethasone.

IMPORTANT SAFETY INFORMATION (continued)

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



Not actual patients.

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. Talk to your healthcare provider before starting any new medicines during treatment with NINLARO.

Diarrhea

- Ask your healthcare team for specific recommendations for coping with diarrhea.
- Your healthcare team may suggest you eat certain foods and make changes to your overall diet to help reduce diarrhea.
- You may be advised to drink more fluids to stay hydrated.
- Your healthcare provider may give you medicines to reduce the diarrhea.

Rash

- It is important to immediately report rash or any skin changes to your healthcare team.
- Do not diagnose or treat yourself to avoid making the rash worse.

Take NINLARO at least 1 hour before or at least 2 hours after food

*The NINLARO treatment combination includes NINLARO + lenalidomide + dexamethasone.

IMPORTANT SAFETY INFORMATION (continued)

- have liver problems.
- have kidney problems or are on dialysis.

Please see Important Safety Information throughout, full Important Safety Information on pages 27-28, and <u>Patient Information</u> in the accompanying NINLARO full <u>Prescribing Information</u>.



I've gotten into a for the sticking with it.

—Scott, real patient

Track (and make sense of) your lab tests

Laboratory tests (labs) play a major role in monitoring treatment progress and side effects. For help familiarizing yourself with the terms and reference ranges for different labs and for tracking labs, download the Lab Test Tracker at www.ninlaro.com/Lab-Test-Tracker, or point your phone's camera at this QR code.



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Use the Lab Test Tracker to record your test results after each visit

Download the Lab Test Tracker www.ninlaro.com/lab-test-tracker

Use your phone camera to scan the QR codes

IMPORTANT SAFETY INFORMATION (continued)

• are pregnant or plan to become pregnant. NINLARO can harm your unborn baby.

Females who are able to become pregnant:

• Avoid becoming pregnant during treatment with NINLARO.



Understanding Your Multiple Myeloma Lab Tests

In this resource, you will find:

Lab test tracker

Takeda, ONCOLOGY

Considerations for discussions with your neartificate team Questions you may want to consider asking yourself and your care team Considerations for discussions with your healthcare team

Lab test tracker A worksheet where you can enter your test results and track them over time

test mormation Descriptions of each of the tests that may be required as part of your care plan

This resource is not provided to replace discussions with your healthcare provider. If you have any questions about your test results or treatment plan, discuss them with your healthcare provider.

Please see Important Safety Information throughout, full Important Safety Information on pages 27-28, and Patient Information in the accompanying NINLARO full Prescribing Information.

Not an actual patient.

Practice good nutrition

Maintaining healthy eating and drinking habits is an important part of multiple myeloma self-care. Below are some tips that may help you optimize your nutrition. Make sure to work with your care team to formulate a nutrition plan that is best for you.

- Eat small and frequent meals throughout the day. This can help your body get enough calories and nutrients without making you feel nauseous
- Stay away from spicy or fried foods that might upset your stomach
- Choose blander foods with milder odors, like white toast, yogurt, and clear broth
- Work in high-protein foods to help your body's cells, tissues, and immune system recover
- Include carbohydrates to maintain a good energy level
- Add a variety of fruits and vegetables each day
- Eat healthy fats, like avocado, nuts, or olive oil
- Limit added sugars
- Drink plenty of water and avoid too much caffeine
- Since multiple myeloma can make your immune system weaker, you'll need to avoid any foods that could make you sick, such as raw meat or fish, runny eggs, unpasteurized drinks, sushi, and unwashed fruits and vegetables

IMPORTANT SAFETY INFORMATION (continued)

- 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 last 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.





Try to relieve stress

It's normal to feel stress while undergoing treatment for multiple myeloma. Managing stress with multiple myeloma can be challenging, but there are steps you can take to feel more relaxed:

- Talk to a professional counselor
- Ask your doctor if antianxiety or antidepressant medication is right for you
- Talk to your close friends and family about your stress. You may find it easier to face challenges together
- Take some time each day to relax and unload stress
- Meditate. There are many smartphone apps that offer guided meditations
- Follow an exercise plan with your doctor's guidance. Low- to moderateintensity exercise may boost your mood
- Connect with others to unwind

IMPORTANT SAFETY INFORMATION (continued)

Males with female partners who are able to become pregnant:

- You should use effective birth control during treatment and for 90 days after your last 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.



Con't wait for someday—do the things that you love to do.

-Jennifer, real patient

Remember, you are not alone. Additional resources relating to coverage and financial and educational support may be available through the **Takeda Oncology Here2Assist®** program, should you choose to enroll. You may also connect with us on the NINLARO Facebook page.



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Be sure to sign up and check your email for additional helpful resources!

Get resources & support www.ninlaro.com/resources

Use your phone camera to scan the QR codes

IMPORTANT SAFETY INFORMATION (continued)

 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 last dose of NINLARO.



We're here for you throughout your treatment

Takeda Oncology ↓ Here2Assist[®]

From helping you understand coverage options to identifying available financial assistance, Takeda Oncology Here2Assist® is committed to offering you comprehensive support throughout your treatment journey.

- Works with your insurance company to help you get started on your medication
- Identifies available financial assistance that may be right for you
- Connects you to additional support services and resources
- Identifies specialty pharmacies to help fill and ship your prescriptions appropriately
- Conducts regular follow-up calls with you



Get more information on patient support

Visit the Here2Assist website www.here2assist.com/patient/home

Please see Important Safety Information throughout, full Important Safety Information on pages 27-28, and <u>Patient Information</u> in the accompanying NINLARO full <u>Prescribing Information</u>.



Care partners need support too

Being a care partner has its rewards, but it may feel overwhelming at times. You battle challenges alongside your loved one. You deal with the same uncertainties. You shoulder a great deal of responsibility. Plus, caring for someone with a chronic condition may cause you to deprioritize your own care needs.

Connecting with support communities and learning about others in your situation can help. By caring for yourself, you may find you can better meet the challenges of caring for your loved one.



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Discover additional resources for care partners

Get care partner resources & support www.ninlaro.com/carepartner-resources

Use your phone camera to scan the QR codes

IMPORTANT SAFETY INFORMATION (continued)

Tell your healthcare provider about all the medicines you take, including prescription and over-the-counter medicines, vitamins, and herbal supplements. Talk to your healthcare provider before starting any new medicines during treatment with NINLARO.





Important things to remember



NINLARO is taken with 2 other medications, lenalidomide and dexamethasone. Your loved one **should not** take NINLARO and dexamethasone at the same time. Dexamethasone should be taken with food.

Not actual patients



The dosing schedule for NINLARO along with lenalidomide and dexamethasone will be determined by your loved one's healthcare provider.



Your loved one should take NINLARO at least 1 hour before or at least 2 hours after food.



Contact your loved one's healthcare provider about any possible side effects.



Talk to your loved one's healthcare provider about ways to manage side effects like nausea, constipation, or diarrhea with medications or dietary changes.

*The NINLARO treatment combination includes NINLARO + lenalidomide + dexamethasone.

IMPORTANT SAFETY INFORMATION (continued)

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.

Please see <u>Patient Information</u> in the accompanying NINLARO (ixazomib) full <u>Prescribing Information</u>.



What is 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.

NINLARO should **not** be used to treat the following people, unless they are participants in a controlled clinical trial:

- people who are receiving maintenance treatment, or
- people who have been newly diagnosed with multiple myeloma.

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

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 face, arms, hands, legs, ankles, or feet, or if you gain weight from swelling.
- **Skin Reactions.** Rashes are common with NINLARO. NINLARO can cause rashes and other skin reactions that can be serious and can lead to death. Tell your healthcare provider right away if you get a new or worsening rash, severe blistering or peeling of the skin, or mouth sores.
- **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 (abdomen).

Other common side effects of NINLARO include low white blood cell counts (neutropenia) and bronchitis.

Tell your healthcare provider if you get new or worsening signs or symptoms of the following during treatment with NINLARO:



- skin rash and pain (shingles) due to reactivation of the chicken pox virus (herpes zoster)
- blurred vision or other changes in your 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 Takeda at 1-844-217-6468 or FDA at 1-800-FDA-1088 or www.fda.gov/medwatch.

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:

- 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 last 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:

- You should use effective birth control during treatment and for 90 days after your last 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 last dose of NINLARO.

Tell your healthcare provider about all the medicines you take, including prescription and over-the-counter medicines, vitamins, and herbal supplements. Talk to your healthcare provider before starting any new medicines during treatment with 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.

Please see <u>Patient Information</u> in the accompanying NINLARO (ixazomib) full <u>Prescribing Information</u>.



Use the included Dosing Calendar to keep track of your schedule



Need additional Dosing Calendars?

Download more at <u>www.NINLARO.com/how-to-take</u>



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