

ABECMA (idecabtagene vicleucel) is for the treatment of multiple myeloma in patients who have received at least four kinds of treatment regimens that have not worked or have stopped working. ABECMA is a medicine made from your own white blood cells; the cells are genetically modified to recognize and attack your multiple myeloma cells.

Harness your power to fight MM with ABECMA[®]



Introducing ABECMA: The first CAR T cell therapy for MM



CAR=chimeric antigen receptor;
MM=multiple myeloma.

IMPORTANT SAFETY INFORMATION

What is the most important information I should know about ABECMA?

ABECMA may cause side effects that are severe or life-threatening. Call your healthcare provider or get emergency help right away if you get any of the following:

- difficulty breathing
- fever (100.4°F/38°C or higher)
- chills/shivering
- confusion
- dizziness or lightheadedness
- shaking or twitching (tremor)
- fast or irregular heartbeat
- severe fatigue
- severe nausea, vomiting, diarrhea

It is important that you tell your healthcare providers that you have received ABECMA and to show them your ABECMA Patient Wallet Card. Your healthcare provider may give you other medicines to treat your side effects.

Please see Important Safety Information throughout and [click here for full Prescribing Information](#), including **Boxed WARNINGS** and [Medication Guide](#).

 **Abecma**[™]
(idecabtagene vicleucel) SUSPENSION FOR IV INFUSION

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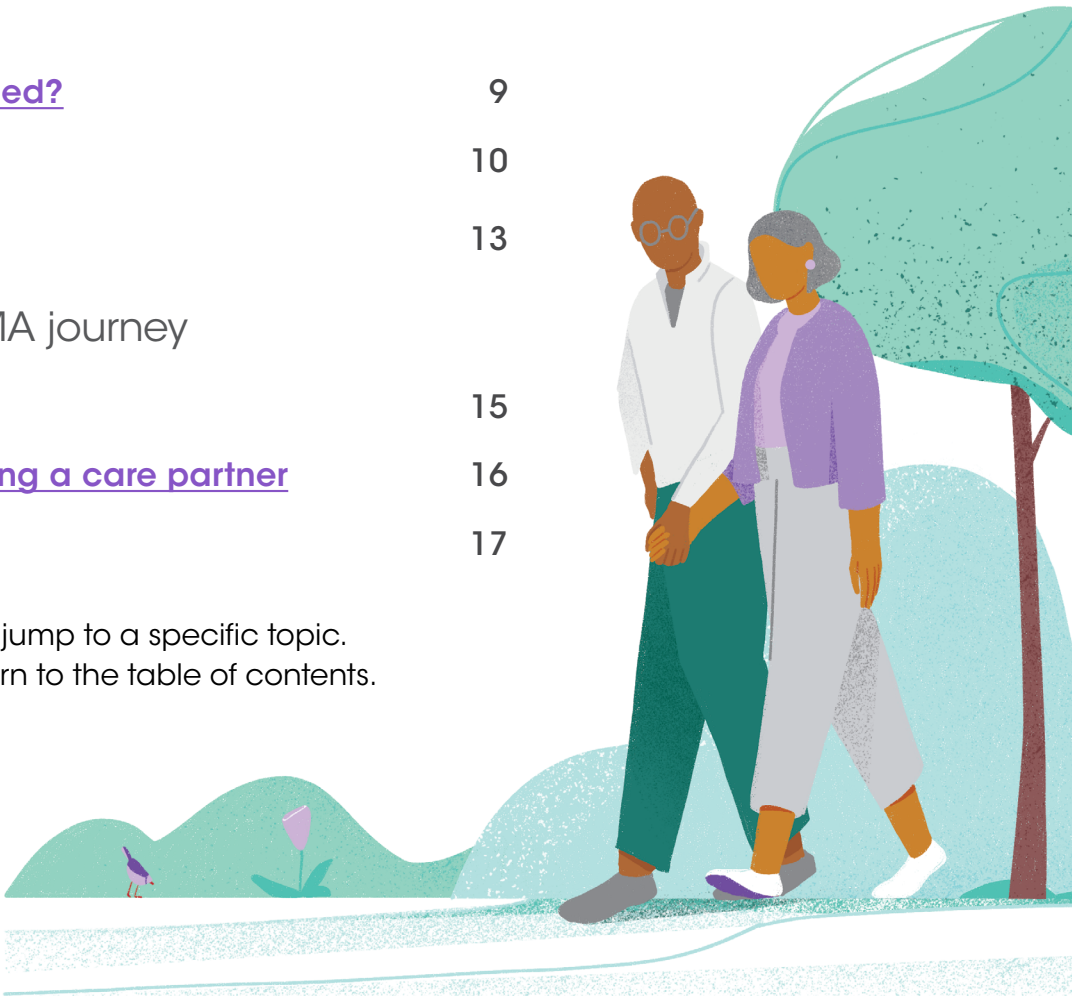
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*The treatment process includes blood collection, CART cell creation, administration, and adverse event monitoring.

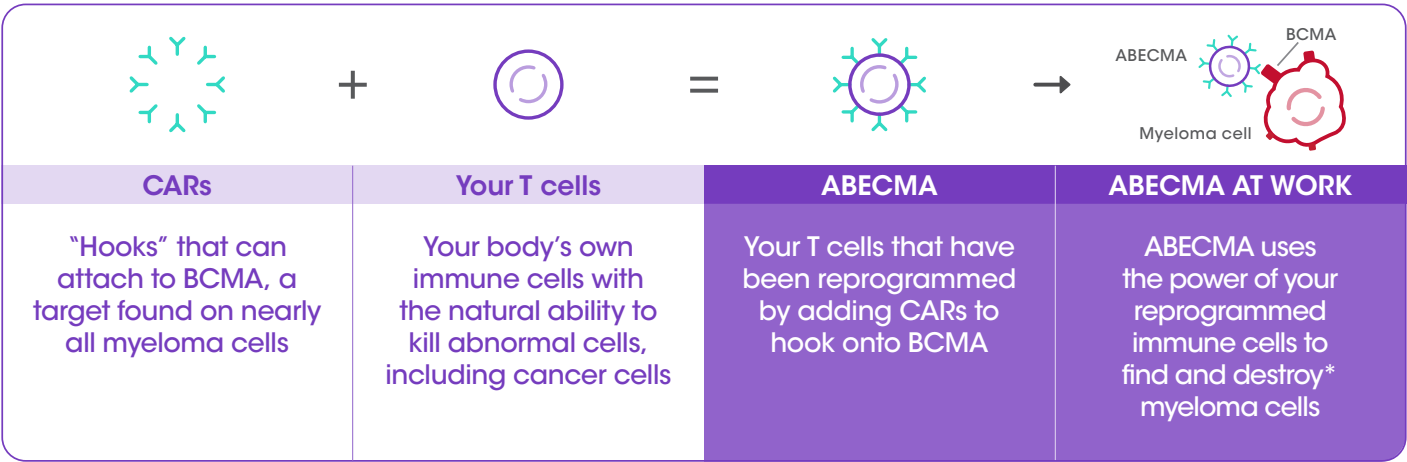
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ABECMA is a first-of-its-kind CAR T cell therapy for MM

Understanding CAR T cell therapy and ABECMA

ABECMA is a chimeric antigen receptor (CAR) T cell therapy—a treatment for MM unlike anything you've received before. CAR T cell therapies are made from your own T cells that have been reprogrammed to find and destroy specific target cells, which may include cancer cells and normal cells.



► **Further reading:** Refer to our [Glossary](#) on page 17 for definitions of BCMA and other multiple myeloma and CART cell therapy terms.

BCMA=B-cell maturation antigen; CARs=chimeric antigen receptors.
*CAR T cell therapies find and destroy specific target cells, which may include cancer cells and normal cells.

IMPORTANT SAFETY INFORMATION (cont'd)

How will I receive ABECMA?

- ABECMA is made from your own white blood cells, so your blood will be collected by a process called "leukapheresis".
- Your blood cells will be sent to a manufacturing center to make your ABECMA. It takes about 4 weeks from the time your cells are received at the manufacturing site and are available to be shipped back to your healthcare provider, but the time may vary.

Please see Important Safety Information throughout and [click here](#) for full Prescribing Information, including **Boxed WARNINGS** and [Medication Guide](#).

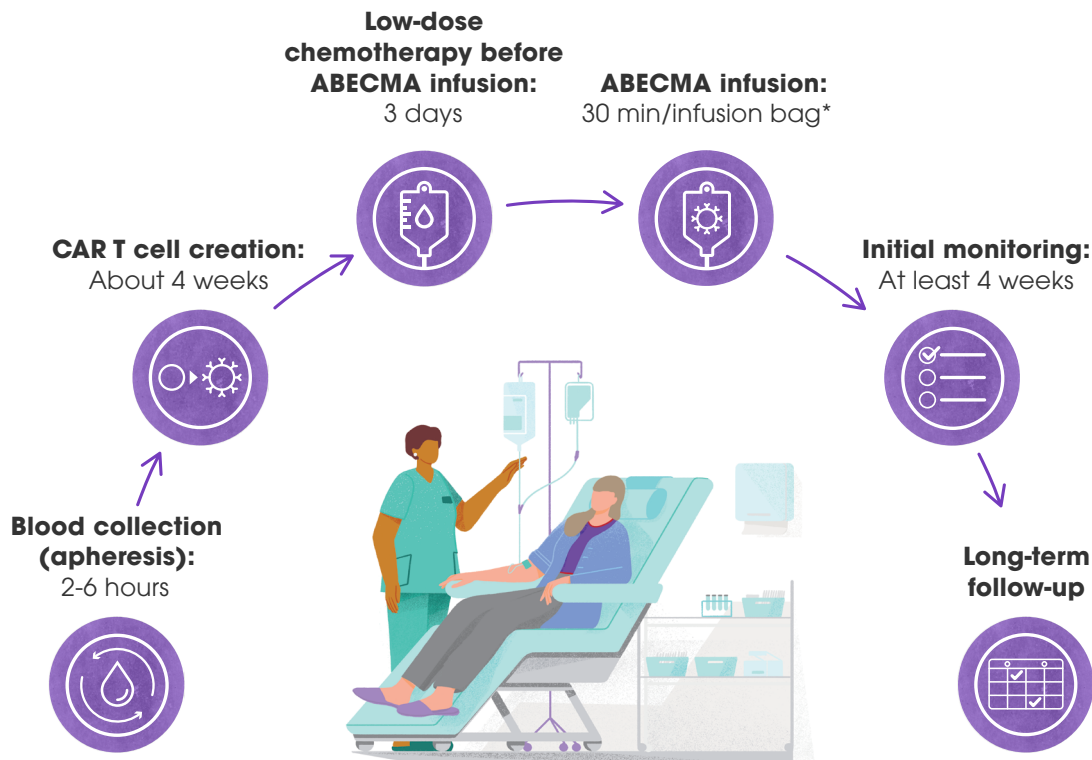




Your immune cells. Your treatment.

How long does ABECMA treatment take?

There are 6 steps to treatment with ABECMA:



Every patient is different, and the time it takes to complete the ABECMA treatment process may vary.

*Your dose of ABECMA may be given in one or more infusion bags.

IMPORTANT SAFETY INFORMATION (cont'd)

How will I receive ABECMA? (cont'd)

- Before you get ABECMA, your healthcare provider will give you chemotherapy for 3 days to prepare your body.
- When your ABECMA is ready, your healthcare provider will give ABECMA to you through a catheter (tube) placed into your vein (intravenous infusion). Your dose of ABECMA may be given in one or more infusion bags. The infusion usually takes up to 30 minutes for each infusion bag.
- You will be monitored at the certified healthcare facility where you received your treatment daily for at least 7 days after the infusion.

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Preparing for your one-time infusion of ABECMA

What happens during each step of the ABECMA treatment process?

Each step of your treatment is important. Your healthcare team will be by your side to help along the way. Don't hesitate to ask questions so you feel more comfortable with the treatment process.

ABECMA comes with the risk for severe or life-threatening side effects. It is only available at certified treatment centers and must be infused by trained healthcare teams. Your doctor may refer you to a certified treatment center to be evaluated if you aren't already being treated by one.



Step 1: Blood collection (apheresis)

Your immune cells will be collected through a process called apheresis (sometimes called leukapheresis).

- ▶ Your blood is collected (each of the components are separated into groups)
- ▶ Your T cells are removed (the other parts of your blood are returned to your body)
- ▶ Apheresis can be done in 1 day and usually takes 2 to 6 hours

▶ **Further reading:** Refer to our [Glossary](#) on page 17 for definitions of multiple myeloma and CART cell therapy terms.

IMPORTANT SAFETY INFORMATION (cont'd)

How will I receive ABECMA? (cont'd)

- You should plan to stay within 2 hours of this location for at least 4 weeks after getting ABECMA. Your healthcare provider will check to see that your treatment is working and help you with any side effects that may occur.

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Preparing for your one-time infusion of ABECMA (cont'd)



Step 2: CAR T cell creation

After your T cells are collected, they are sent to a specialized manufacturing laboratory to be made into ABECMA.

At the specialized manufacturing laboratory:

- ▶ “Hooks” called CARs are added to your T cells, creating ABECMA that is unique to you
- ▶ After your ABECMA is created, your cells are multiplied
- ▶ This process takes about 4 weeks, but every patient's cells are different and process times may vary

Your healthcare provider may also recommend other treatments to manage your MM while your ABECMA is created and multiplied.



Step 3: Low-dose chemotherapy before ABECMA infusion

Shortly before your ABECMA infusion, you'll receive low-dose chemotherapy for 3 days.

- ▶ Low-dose chemotherapy helps prepare your body for ABECMA
- ▶ This type of chemotherapy is composed of 2 medications and is given to all patients who receive ABECMA

CARs=chimeric antigen receptors; MM=multiple myeloma.

IMPORTANT SAFETY INFORMATION (cont'd)

What should I avoid after receiving ABECMA?

- Do not drive, operate heavy machinery, or do other activities that could be dangerous if you are not mentally alert, for at least 8 weeks after you get ABECMA. This is because the treatment can cause temporary memory and coordination problems, sleepiness, confusion, dizziness, and seizures.
- Do not donate blood, organs, tissues, or cells for transplantation.

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Preparing for your one-time infusion of ABECMA (cont'd)



Step 4: One-time infusion of ABECMA

You'll receive ABECMA as a one-time intravenous infusion.

- ▶ Your ABECMA infusion will take place at a certified treatment center by your trained healthcare team
- ▶ Your ABECMA infusion usually takes up to 30 minutes for each infusion bag



Step 5: Follow-up monitoring

You'll be closely monitored for side effects following your ABECMA infusion.

- ▶ You will be monitored daily at a certified treatment center for at least 7 days after the infusion
- ▶ Plan to stay within 2 hours of the treatment center for at least 4 weeks after infusion so your healthcare team can help you with any side effects that may occur



Step 6: Long-term follow-up

You'll follow up with your own healthcare team after at least 4 weeks of initial monitoring.

- ▶ You and your healthcare team will work together to track your progress, including monitoring for potential side effects
- ▶ Additional scans and blood tests may also be needed
- ▶ Your long-term care, which will continue after treatment center monitoring, may be overseen by the healthcare provider who originally referred you

IMPORTANT SAFETY INFORMATION (cont'd)

What are the possible or reasonably likely side effects of ABECMA?

The most common side effects of ABECMA are:

- fatigue
- fever (100.4°F/38°C or higher)
- chills/shivering
- severe nausea or diarrhea
- decreased appetite
- headache

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Deciding if ABECMA is right for you

You and your doctor should consider the following when deciding whether ABECMA is right for you:



Prior treatment

ABECMA may be right for you if you have tried at least 4 kinds of treatment regimens and have received at least 1 therapy from each of these drug classes:

- ▶ **An IMiD[®] agent (eg, lenalidomide or pomalidomide)**
- ▶ **A proteasome inhibitor (eg, bortezomib, carfilzomib, or ixazomib)**
- ▶ **An anti-CD38 antibody (eg, daratumumab or isatuximab)**

If you do not know whether you have received these treatments, your doctor can help explain.



Overall health

Your doctor will also assess your overall health, not just your age, when determining your eligibility for ABECMA. Adults 18 and over may be eligible for ABECMA.



ABECMA is different from a stem cell transplant (SCT). You may be eligible for ABECMA regardless of your prior eligibility for an SCT.

▶ **Download the ABECMA Eligibility Guide at [ABECMA.com](https://www.abecma.com) to learn more.**

IMPORTANT SAFETY INFORMATION (cont'd)

What are the possible or reasonably likely side effects of ABECMA? (cont'd)

The most common side effects of ABECMA are:

- dizziness/lightheadedness
- confusion
- difficulty speaking or slurred speech
- cough
- difficulty breathing
- fast or irregular heartbeat

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How was ABECMA studied?

In the clinical trial of ABECMA:



All patients had received at least 3 other kinds of treatment that had not worked or had stopped working—including an IMiD[®] agent, a proteasome inhibitor, and an anti-CD38 antibody



100 adults with MM were treated with ABECMA

- ▶ 88 of the 100 patients had received 4 or more prior treatment regimens



Did you know?

Overall response is the term used when there is a meaningful decrease in signs of myeloma. This includes partial responses (a decrease in the amount of myeloma in the body) and complete response.

Complete response (CR) or better is a term that means there is no detectable evidence of tumor in the body (all signs of myeloma have disappeared). A CR does not mean the myeloma has been cured.

Follow-up time is the time between infusion and the most recent time point when data on the patient's outcomes were recorded.

IMPORTANT SAFETY INFORMATION (cont'd)

What are the possible or reasonably likely side effects of ABECMA? (cont'd)

ABECMA can cause a very common side effect called cytokine release syndrome or CRS, which can be severe or fatal. Symptoms of CRS include fever, difficulty breathing, dizziness or light-headedness, nausea, headache, fast heartbeat, low blood pressure, or fatigue. Tell your healthcare provider right away if you develop fever or any of these other symptoms after receiving ABECMA.

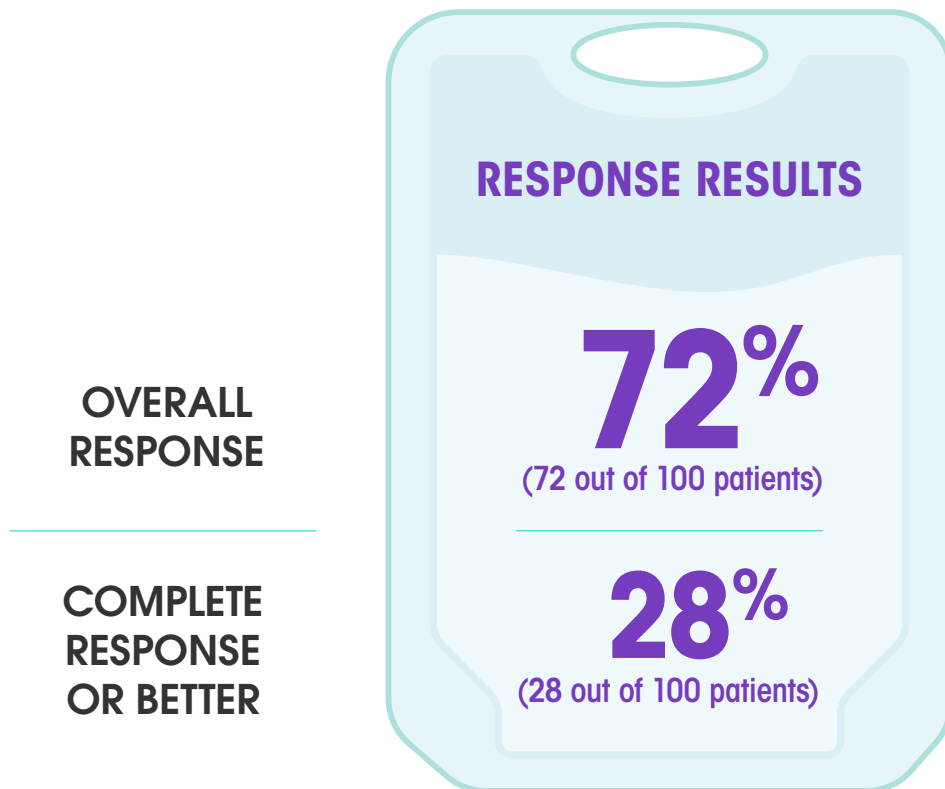
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The power of a one-time infusion of ABECMA

What percentage of patients responded to ABECMA?



The median follow-up time was 13.2 months (the range was 0.2 to 21.0 months).

**These are results experienced by people in the ABECMA clinical trial.
Your results may be different.**

IMPORTANT SAFETY INFORMATION (cont'd)

What are the possible or reasonably likely side effects of ABECMA? (cont'd)

ABECMA can increase the risk of life-threatening infections that may lead to death. Tell your healthcare provider right away if you develop fever, chills, or any signs or symptoms of an infection.

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Rapid and lasting responses with a one-time infusion of ABECMA

How long did it take for ABECMA to work?

83% of patients responded to ABECMA in as little as 1 month after infusion (60 out of 72 patients; the range was 0.5 to 2.9 months).

How long did the ABECMA response last?

Median duration of response
(72 out of 100 patients)

Responses lasted **11.0 MONTHS**

Responses lasted a median of **19.0 MONTHS** for patients who achieved a complete response or better (28 out of 100 patients).



ABECMA is given as a one-time infusion. Repeated infusions, daily pills, or maintenance therapy are *not required* for your MM while responding to ABECMA.

These are results experienced by people in the ABECMA clinical trial. Your results may be different.

MM=multiple myeloma.

IMPORTANT SAFETY INFORMATION (cont'd)

What are the possible or reasonably likely side effects of ABECMA? (cont'd)

ABECMA can lower one or more types of your blood cells (red blood cells, white blood cells, or platelets), which may make you feel weak or tired or increase your risk of severe infection or bleeding. After treatment, your healthcare provider will test your blood to check for this. Tell your healthcare provider right away if you get a fever, are feeling tired, or have bruising or bleeding.

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Rapid and lasting responses with a one-time infusion of ABECMA (cont'd)



Did you know?

Duration of response is the length of time a patient continues to respond to therapy without their multiple myeloma growing or spreading.

The **median** is the middle number in a set of data. This means half the numbers in a group are more than the median and half the numbers in the group are less than the median.

IMPORTANT SAFETY INFORMATION (cont'd)

What are the possible or reasonably likely side effects of ABECMA? (cont'd)

Having ABECMA in your blood may cause a false-positive human immunodeficiency virus (HIV) test result by some commercial tests.

This is a summary of the most important safety information about ABECMA. These are not all the possible side effects of ABECMA. Call your doctor for medical advice about side effects. For more information, go to www.ABECMA.com or call 1-888-805-4555. You may report side effects to the FDA.

Visit <http://www.fda.gov/medwatch>, or call 1-800-FDA-1088.

Please see Important Safety Information throughout and [click here for full Prescribing Information](#), including **Boxed WARNINGS** and [Medication Guide](#).





ABECMA is available at certified treatment centers that are trained to monitor and manage potential side effects if they occur

When should I call my healthcare provider or get immediate help?

ABECMA may cause side effects that are severe or life-threatening and can lead to death. Call your healthcare provider or get emergency help right away if you get any of the following:

- ▶ Difficulty breathing
- ▶ Shaking or twitching (tremor)
- ▶ Fever (100.4°F/38°C or higher)
- ▶ Fast or irregular heartbeat
- ▶ Chills/shivering
- ▶ Severe fatigue
- ▶ Confusion
- ▶ Severe nausea, vomiting, diarrhea
- ▶ Dizziness or lightheadedness

It is important that you tell your healthcare providers that you have received ABECMA and to show them your ABECMA Patient Wallet Card. Your healthcare provider may give you other medicines to treat your side effects.

Common side effects associated with ABECMA:

- ▶ Fatigue
- ▶ Dizziness/lightheadedness
- ▶ Fever (100.4°F/38°C or higher)
- ▶ Confusion
- ▶ Chills/shivering
- ▶ Difficulty speaking or slurred speech
- ▶ Severe nausea or diarrhea
- ▶ Cough
- ▶ Decreased appetite
- ▶ Difficulty breathing
- ▶ Headache
- ▶ Fast or irregular heartbeat

ABECMA can increase the risk of life-threatening infections that may lead to death. Tell your healthcare provider right away if you develop fever, chills, or any signs or symptoms of an infection.

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ABECMA is available at certified treatment centers that are trained to monitor and manage potential side effects if they occur (cont'd)

ABECMA can lower one or more types of your blood cells (red blood cells, white blood cells, or platelets), which may make you feel weak or tired or increase your risk of severe infection or bleeding. After treatment, your healthcare provider will test your blood to check for this. Tell your healthcare provider right away if you get a fever, are feeling tired, or have bruising or bleeding.

Having ABECMA in your blood may cause a false-positive human immunodeficiency virus (HIV) test result by some commercial tests.

What is cytokine release syndrome (CRS)?

ABECMA can cause a very common side effect called cytokine release syndrome, or CRS, which can be severe or fatal. Cytokines are immune substances that have many different actions in the body, and immunotherapies like ABECMA can sometimes cause a large, rapid release of cytokines into the blood from the immune cells.

Symptoms of CRS include fever, difficulty breathing, dizziness or lightheadedness, nausea, headache, fast heartbeat, low blood pressure, or fatigue. Tell your healthcare provider right away if you develop fever or any of these other symptoms after receiving ABECMA.

These are not all the possible side effects of ABECMA. Call your doctor for medical advice about side effects. You may report side effects to the FDA at 1-800-FDA-1088.



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 **Abecma™**
(idecabtagene vicleuce)
SUSPENSION
FOR IV INFUSION



Cell Therapy 360®: Your partner throughout the CAR T cell therapy treatment journey

Cell Therapy 360 offers assistance programs for you and your care partner that are designed to support you throughout treatment and the initial post-infusion monitoring period (at least 4 weeks).



A dedicated Patient Support Navigator



Financial support

Eligibility requirements apply.



Post-treatment temperature monitoring support

You may enroll in support programs after a certified CAR T cell therapy treatment center determines that ABECMA is the right treatment for you.



To learn more about the support programs available through Cell Therapy 360:

- ▶ Talk to your healthcare team for more information
- ▶ Visit CellTherapy360.com
- ▶ Call **1-888-805-4555** (available Monday through Sunday, 24 hours a day)

Please see Important Safety Information throughout and [click here for full Prescribing Information](#), including **Boxed WARNINGS** and [Medication Guide](#).





The importance of having a care partner

When you receive CAR T cell therapy, it will be important to have a care partner to help you through the process before and after your ABECMA infusion.

Some things a care partner can help with before and after your infusion include:

Everyday support:

- ▶ Providing emotional support
- ▶ Assisting with scheduling and driving to appointments
- ▶ Organizing and relaying medical and insurance information to the healthcare team
- ▶ Assisting with driving, meal prep, laundry, cleaning, and managing visitors

Medical support:

- ▶ Speaking up to the healthcare team when you have questions
- ▶ Watching for symptoms, side effects, and other changes in health and behaviors
- ▶ Checking and recording your temperature at least 3 times a day
- ▶ Calling 911 or your healthcare team in the event of a medical emergency



Are you a care partner?

Being a care partner is a real job and can be stressful. It's okay to alternate care partners if you need to take a break. Coordinate with friends and family as appropriate to ensure patients have around-the-clock coverage while you get the help and support you need.

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Glossary of multiple myeloma and CAR T cell therapy terms

Apheresis is a procedure in which blood is collected, part of the blood such as platelets or white blood cells are taken out, and the rest of the blood is returned to the donor.

B-cell maturation antigen (BCMA) is a specific marker found on normal and cancerous plasma cells, including nearly all myeloma cells, making it a target for multiple myeloma treatments.

CAR T cell therapy is a type of treatment in which a patient's T cells (a type of immune cell) are changed in a laboratory so they will attack target cells with a specific protein on their surface, such as BCMA.

Complete response (CR) or better is a term that means there is no detectable evidence of tumor in the body (all signs of myeloma have disappeared). A CR does not mean the myeloma has been cured.

Duration of response is the length of time a patient continues to respond to therapy without their multiple myeloma growing or spreading.

Follow-up time is the time between infusion and the most recent time point when data on the patient's outcomes were recorded.

Low-dose chemotherapy, or lymphodepleting chemotherapy, used before CAR T cell therapy, is a short course of anticancer drugs given at lower doses than standard chemotherapy to help prepare your body for treatment.

Median is the middle number in a set of data. This means half the numbers in a group are more than the median and half the numbers in the group are less than the median.

Overall response is the term used when there is a meaningful decrease in signs of myeloma. This includes partial response (a decrease in the amount of myeloma in the body) and complete response.

T cells are a type of white blood cell that are part of the immune system. T cells develop from stem cells found in bone marrow and help protect the body from infection and abnormal cells, including cancer cells.

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ABECMA (idecabtagene vicleucel) is for the treatment of multiple myeloma in patients who have received at least four kinds of treatment regimens that have not worked or have stopped working. ABECMA is a medicine made from your own white blood cells; the cells are genetically modified to recognize and attack your multiple myeloma cells.


Harness your power to fight MM with ABECMA



ABECMA is a CAR T cell therapy made from your own immune cells and given as a one-time infusion

ABECMA may be right for you if you have tried at least 4 kinds of treatment regimens and have received at least 1 therapy from each of these drug classes:

- ▶ An IMiD[®] agent (eg, lenalidomide or pomalidomide)
- ▶ A proteasome inhibitor (eg, bortezomib, carfilzomib, or ixazomib)
- ▶ An anti-CD38 antibody (eg, daratumumab or isatuximab)

 [AbecmaFinder.com](https://abecmafinder.com) can help you find a certified treatment center near you.



Start the conversation with your doctor:
See how ABECMA can fit into your MM treatment plan and visit [ABECMA.com](https://abecma.com) to learn more.

MM=multiple myeloma.

IMPORTANT SAFETY INFORMATION

What is the most important information I should know about ABECMA?

ABECMA may cause side effects that are severe or life-threatening. Call your healthcare provider or get emergency help right away if you get any of the following:

- difficulty breathing
- fever (100.4°F/38°C or higher)
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