

In 2 different trials, more people lived progression free when treated with SARCLISA given with other therapies

Living progression free means living without your multiple myeloma getting worse.

**Trial 1:** At an average follow-up of 20.7 months, 74% (133 of 179 people) lived progression free with SARCLISA + Kyprolis® (carfilzomib) and dexamethasone (Kd) vs 59% (73 of 123 people) treated with Kd alone.

**Trial 2:** At an average follow-up of 11.6 months, 53% (81 of 154 people) lived progression free with SARCLISA + Pomalyst® (pomalidomide) and dexamethasone (Pd) vs 42% (64 of 153 people) treated with Pd alone.

### What is SARCLISA?

SARCLISA is a prescription medicine used in combination with:

- The medicines pomalidomide and dexamethasone, to treat adults who have received at least 2 prior therapies including lenalidomide and a proteasome inhibitor to treat multiple myeloma.
- The medicines carfilzomib and dexamethasone, to treat adults with multiple myeloma who have already received 1 to 3 lines of treatment and they did not work or are no longer working.

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

### Important Safety Information

**Do not receive SARCLISA if** you have a history of a severe allergic reaction to isatuximab-irfc or any of the ingredients in SARCLISA (see the list of ingredients in the full <u>Prescribing Information</u>).



# You and your doctor — making a treatment decision together

## An informed decision starts with the right information

Talking with your doctor about your options is an important step in your treatment journey. If you're considering treatment with SARCLISA, the questions below can help you start the conversation with your doctor.



### Questions you may want to ask your doctor about SARCLISA

- Based on my treatment history, is SARCLISA an option for me?
- Can you tell me how SARCLISA works?
- How could treatment with SARCLISA help me?
- · What were the study results for SARCLISA?
- What are the possible side effects of treatment?
- What is the treatment schedule for SARCLISA?
- Is there a patient support program that may help with the cost of SARCLISA?

Consider taking these questions to your next appointment to help you have an informed conversation with your doctor.

### Important Safety Information (cont'd)

Before receiving SARCLISA, tell your healthcare provider about all of your medical conditions, including if you:

- Have heart problems, if your healthcare provider prescribes SARCLISA in combination with carfilzomib and dexamethasone for you.
- Have had shingles (herpes zoster)
- Are pregnant or plan to become pregnant. SARCLISA may harm your unborn baby. You should not receive SARCLISA during pregnancy.
- Females who are able to become pregnant should use an effective method of birth control during treatment and for 5 months after your last dose of SARCLISA. Talk to your healthcare provider about birth control methods that you can use during this time.

Tell your healthcare provider right away if you think you are pregnant or become pregnant during treatment with SARCLISA.

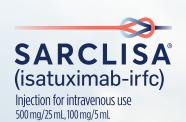
 Are breastfeeding or plan to breastfeed. It is not known if SARCLISA passes into your breast milk. You should not breastfeed during treatment with SARCLISA.

Please see Important Safety Information on pages 22–23, and accompanying full Prescribing Information, including Patient Information.



# What you'll find in this guide

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SARCLISA: A targeted immunotherapy	5
SARCLISA clinical trial results	6
Possible side effects of SARCLISA	8
The treatment schedule for SARCLISA	10
Preparing for your infusions	13
Access and support for SARCLISA	14
Living with relapsed refractory multiple myeloma	17
Glossary of terms	21
Important Safety Information	22



Not chemotherapy. **A targeted immunotherapy.** 



# SARCLISA: A targeted immunotherapy

# Designed to find and bind

SARCLISA is not chemotherapy. It is a type of targeted immunotherapy that is able to "find and bind" to myeloma cells. SARCLISA works together with your immune system to help destroy myeloma cells.

SARCLISA works in 3 distinct ways to reduce the number of myeloma cells in your body



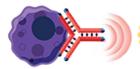
SARCLISA



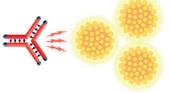
Immune system cell



Myeloma cell





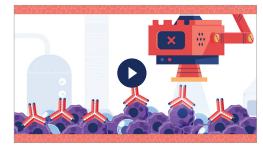




SARCLISA **finds and binds**to myeloma cells and exposes
them for elimination by your
immune system.

SARCLISA helps
boost your immune system,
making it harder for myeloma
cells to survive.

SARCLISA directly kills myeloma cells.



Visit **SARCLISA.com** to watch a video about how SARCLISA works



Scan with your smartphone camera

# Important Safety Information (cont'd)

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

# SARCLISA was proven to help more people live progression free

Trial 1: SARCLISA + Kd (Kyprolis® and dexamethasone)



people treated with SARCLISA + Kd lived progression free

At an average follow-up of 20.7 months, **74%** (133 of 179 people) lived progression free with SARCLISA + Kyprolis® (carfilzomib) and dexamethasone (Kd) vs **59%** (73 of 123 people) treated with Kd alone.

Trial 2: SARCLISA + Pd (Pomalyst® and dexamethasone)



of people treated with SARCLISA + Pd lived progression free

At an average follow-up of 11.6 months, **53%** (81 of 154 people) lived progression free with SARCLISA + Pomalyst® (pomalidomide) and dexamethasone (Pd) vs **42%** (64 of 153 people) treated with Pd alone.

At this time, there are not enough data available from the trials to assess whether people receiving SARCLISA + Kd or SARCLISA + Pd lived longer.

### The SARCLISA Phase 3 trials

#### Trial 1: SARCLISA + Kd compared to Kd alone

In a clinical trial of 302 people with previously treated multiple myeloma who had received 1 to 3 prior treatments, 179 people received SARCLISA + Kd and 123 people received Kd alone.

#### Trial 2: SARCLISA + Pd compared to Pd alone

In a clinical trial of 307 people with previously treated multiple myeloma who had received at least 2 prior treatments, including Revlimid® (lenalidomide) and a proteasome inhibitor,\* 154 people received SARCLISA + Pd and 153 people received Pd alone.

Both trials compared how long people lived without their disease getting worse and how people responded to treatment.

# The majority of people responded to treatment with SARCLISA



**87**%

responded to SARCLISA + Kd

**83**% responded to treatment with Kd alone. The difference between SARCLISA + Kd and Kd alone was not statistically meaningful.



60%

responded to SARCLISA + Pd

vs 35% who responded to treatment with Pd alone.

# Important Safety Information (cont'd)

#### How will I receive SARCLISA?

- SARCLISA will be given to you by your healthcare provider by intravenous (IV) infusion into your vein.
- SARCLISA is given in treatment cycles of 28 days (4 weeks), together with either the medicines pomalidomide and dexamethasone, or carfilzomib and dexamethasone.
- In cycle 1, SARCLISA is usually given weekly.
- Starting in cycle 2, SARCLISA is usually given every 2 weeks.
- If you miss any appointments, call your healthcare provider as soon as possible to reschedule your appointment.
- Your healthcare provider will give you medicines before each dose of SARCLISA to help reduce the risk of infusion reactions (make them less frequent and severe).



<sup>\*</sup>Examples of proteasome inhibitors include Kyprolis, Ninlaro® (ixazomib), and Velcade® (bortezomib)

# Possible side effects of SARCLISA

### Infusion reactions



SARCLISA is given by a healthcare provider as an intravenous (IV) infusion into your vein. Medicines given by IV infusion can sometimes cause unwanted reactions.

Infusion reactions are common with SARCLISA and can sometimes be severe or life threatening.

Your healthcare provider will prescribe medicines before each infusion of SARCLISA to help decrease your risk for infusion reactions or to help make any infusion reaction less severe. You will be monitored for infusion reactions during each dose of SARCLISA.

Your healthcare provider may slow down or stop your infusion, or completely stop treatment with SARCLISA if you have an infusion reaction.

Get medical help right away if you develop any of the following symptoms of infusion reaction during or after an infusion of SARCLISA:

- shortness of breath, wheezing, or trouble breathing
- swelling of the face, mouth, throat, or tongue
- throat tightness
- palpitations
- dizziness, lightheadedness, or fainting

- headache
- cough
- rash or itching
- nausea
- runny or stuffy nose
- chills

### Decreased white blood cell counts



Decreased white blood cell counts are common with SARCLISA and certain white blood cells can be severely decreased. You may have an increased risk of getting certain infections, such as upper and lower respiratory tract infections and urinary tract infections.

Your healthcare provider will check your blood cell counts during treatment with SARCLISA. Your healthcare provider may prescribe an antibiotic or antiviral medicine to help prevent infection, or a medicine to help increase your white blood cell counts during treatment with SARCLISA.

Tell your healthcare provider right away if you develop any fever or symptoms of infection during treatment with SARCLISA.

### Risk of new cancers

New cancers have happened in people during treatment with SARCLISA. Your healthcare provider will monitor you for new cancers during treatment with SARCLISA.

In 2 clinical trials studying SARCLISA, most infusion reactions started during the first infusion or the first treatment cycle and all infusion reactions resolved.

# Change in blood tests

SARCLISA can affect the results of blood tests to match your blood type. Your healthcare provider will do blood tests to match your blood type before you start treatment with SARCLISA. **Tell all** of your healthcare providers that you are being treated with SARCLISA before receiving blood transfusions.

# Common side effects that may occur with SARCLISA in combination with Pomalyst® and dexamethasone

- upper respiratory tract infection
- lung infection (pneumonia)
- decreased red blood cell count (anemia)
- decreased platelet count (thrombocytopenia)
- diarrhea

# Common side effects that may occur with SARCLISA in combination with Kyprolis® and dexamethasone

- upper respiratory tract infection
- tiredness and weakness
- high blood pressure
- diarrhea
- · lung infection (pneumonia)
- trouble breathing
- trouble sleeping

- bronchitis
- · cough
- back pain
- decreased red blood cell count (anemia)
- decreased platelet count (thrombocytopenia)

### Heart failure

Heart failure can happen during treatment with SARCLISA in combination with carfilzomib and dexamethasone. Tell your healthcare provider right away if you develop any of the following symptoms:

trouble breathing • cough • swelling of your ankles, feet, or legs



These are not all the possible side effects of SARCLISA. For more information, ask your healthcare provider or pharmacist.

SARCLISA is not chemotherapy. SARCLISA is a targeted immunotherapy that works with your immune system to help fight multiple myeloma.

Please see Important Safety Information on pages 22–23, and accompanying full Prescribing Information, including Patient Information.



8

# Treatment with SARCLISA

### Fewer infusions after the first cycle

SARCLISA is given by a doctor or nurse by intravenous (IV) infusion into your vein in 4-week, or 28-day, treatment periods called cycles. For the first cycle, SARCLISA is usually given once a week. After the first cycle, SARCLISA is usually given once every 2 weeks.





Cycle 2 and beyond Once every 2 weeks

SARCLISA is given together with either Kyprolis® and dexamethasone or Pomalyst® and dexamethasone. Once prescribed, your doctor and other members of your healthcare team will explain how you will receive SARCLISA along with these other medicines.

> Talk with your doctor about whether a SARCLISA combination is right for you.

## Important Safety Information (cont'd)

What are the possible side effects of SARCLISA? SARCLISA may cause serious side effects, including:

- Infusion reactions. Infusion reactions are common with SARCLISA and can sometimes be severe or life threatening.
- Your healthcare provider will prescribe medicines before each infusion of SARCLISA to help decrease your risk for infusion reactions or to help make any infusion reaction less severe. You will be monitored for infusion reactions during each dose of SARCLISA.
- Your healthcare provider may slow down or stop your infusion, or completely stop treatment with SARCLISA if you have an infusion reaction.

### Shorter infusion times as treatment continues

### **Estimated infusion times for SARCLISA**

First infusion

**Second infusion** 

Following infusions







Before each infusion of SARCLISA, you will receive other medicines to help reduce possible infusion reactions. Infusion times may be longer if you experience an infusion reaction while receiving SARCLISA. See page 8 for more information about infusion reactions.

> If you miss any appointments, call your doctor as soon as possible to reschedule.

## Important Safety Information (cont'd)

Get medical help right away if you develop any of the following symptoms of infusion reaction during or after an infusion of SARCLISA:

- shortness of breath, wheezing, or trouble

cough

- swelling of the face, mouth, throat, or tongue

- rash or itching

throat tightness

- nausea

- runny or stuffy nose

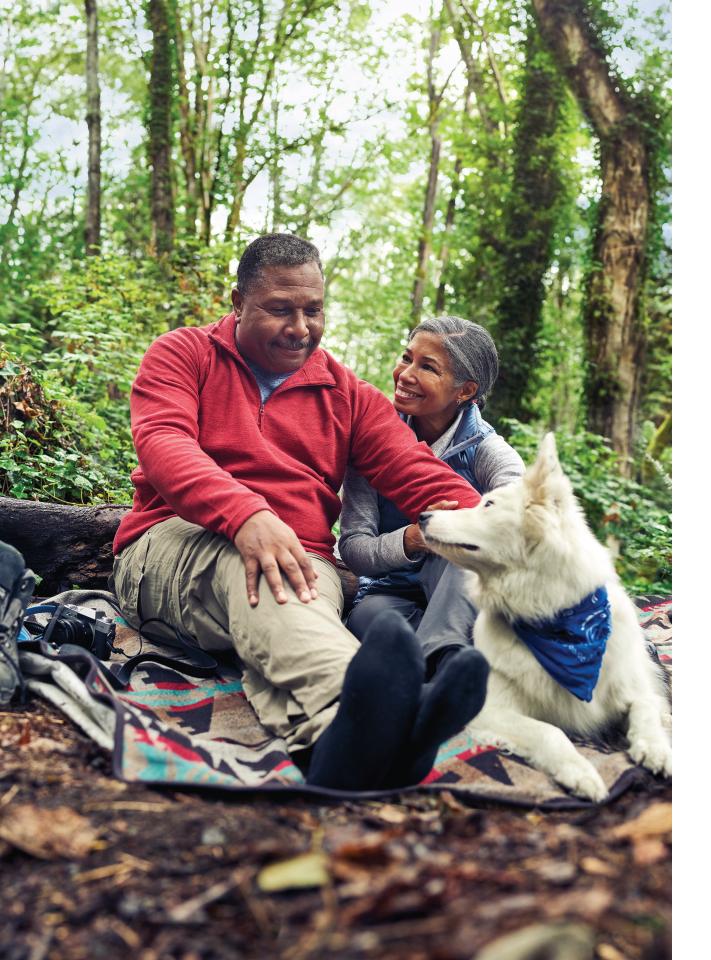
palpitations

- chills

- dizziness, lightheadedness, or fainting

- headache





# **Preparing for your infusions**

Plan ahead to help make your experience more comfortable



Wear comfortable clothing and consider bringing a blanket, pillow, or anything else that would help you feel at ease.



Take along a book, tablet, music, or anything to help pass the time and make your experience more enjoyable.



Bring a snack and something to drink in case you get hungry or thirsty.



If possible, arrange for your caregiver, a family member, or a friend to join you.



Consider bringing this guide with you, along with a list of questions you may have for your healthcare team.

## Important Safety Information (cont'd)

What are the possible side effects of SARCLISA? (cont'd)

• Decreased white blood cell counts. Decreased white blood cell counts are common with SARCLISA and certain white blood cells can be severely decreased. You may have an increased risk of getting certain infections, such as upper and lower respiratory tract infections and urinary tract infections.

Your healthcare provider will check your blood cell counts during treatment with SARCLISA. Your healthcare provider may prescribe an antibiotic or antiviral medicine to help prevent infection, or a medicine to help increase your white blood cell counts during treatment with SARCLISA.

Tell your healthcare provider right away if you develop any fever or symptoms of infection during treatment with SARCLISA.



# Sanofi is here to support you

CareASSIST by Sanofi helps eligible patients with access and support for SARCLISA. Below are some of the services and resources available to help you get started and stay on track with SARCLISA.



#### **Access and Reimbursement**

CareASSIST can help determine insurance coverage and options.



#### **Financial Assistance**

CareASSIST offers programs and services that can help eligible patients who have commercial insurance, or who are uninsured or lack coverage, with the cost of SARCLISA.



#### **Resource Support**

CareASSIST can identify other resources and support that may be available.

To learn more about CareASSIST for SARCLISA, call 1-833-WE+CARE (1-833-930-2273), Mon - Fri, 9<sub>AM</sub> - 8<sub>PM</sub> ET, or visit SanofiCareAssist.com/sarclisa.

# The CareASSIST Copay Program

The CareASSIST Copay Program may be able to assist with your out-of-pocket costs for SARCLISA.



#### **Program benefits**

If you are eligible and have commercial insurance, you may pay as little as \$0. This program covers any product-specific copay, coinsurance, and insurance deductibles – up to \$25,000 in assistance per year. Restrictions apply.\*



### Out-of-pocket responsibility

You are responsible for any SARCLISA out-of-pocket costs that exceed the program assistance limit of \$25,000 per year. This is in addition to non-SARCLISA-specific expenses related to supplies, procedures, or physician-related services.



#### **Eligibility requirements**

- Insurance You must have commercial or private insurance, including state or federal employee plans and health insurance exchanges
- Residency You must be a resident of the US or its territories or possessions

Other conditions apply.

There is no income requirement to qualify for this program.

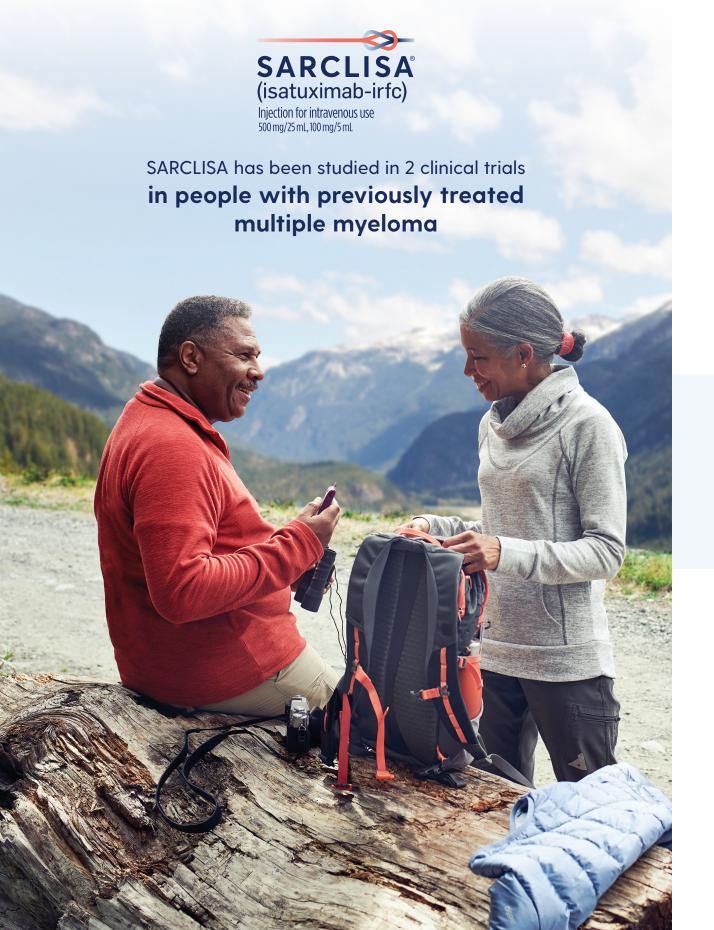
Sanofi reserves the right to modify or terminate these programs at any time without notice.

#### \*CareASSIST Copay Program Terms and Conditions

Subject to annual maximum copay assistance amount of \$25,000. This program is not valid for prescriptions covered by or submitted for reimbursement under Medicare, Medicaid, Veterans Affairs/Department of Defense, TRICARE, or similar federal or state programs, including any state pharmaceutical assistance programs. Not a debit card program. This program does not cover or provide support for supplies, procedures, or any physician-related service associated with SARCLISA® (isatuximab-irfc). General non-product-specific copays, coinsurance, or insurance deductibles are not covered. This program only applies to patients who are at least 18 years of age, residents of the United States or its territories or possessions, are prescribed SARCLISA for an FDA-approved indication, and are insured by a commercial health plan that requires a copayment, coinsurance, and/or deductible amount for SARCLISA. It is not an insurance benefit. The CareASSIST Copay Program reserves the right to rescind, terminate, or amend this offer, eligibility, and terms and conditions at any time without notice. Patients, pharmacists, and prescribers cannot seek reimbursement from health insurance or any third party for any part of the benefit received by the patient through this offer. This offer is not conditional on any past, present, or future purchase, including refills. This offer is nontransferable, limited to one per person, and cannot be combined with any other offer or discount. This program is not valid where prohibited by law, taxed, or restricted. Offer has no cash value. Program is not valid for cash-paying customers. Additional program conditions may apply. Savings may vary depending on patient's out-of-pocket costs. Upon registration, patient will receive all program details.







# Living with relapsed refractory multiple myeloma

### Understanding remission and relapse

Advances in medicine have given doctors and patients a number of treatment options that help control multiple myeloma by reducing the number of myeloma cells in your body.

When your body responds to treatment, you may have a complete or partial remission, where your myeloma is under control and isn't currently progressing.

After a period of being in remission, it is possible for multiple myeloma to relapse or not respond to your current treatment (sometimes called "refractory"). When this happens, there may be other treatments available, which may include SARCLISA, that have been studied specifically in people with previously treated multiple myeloma.



Find out about steps you can take to support your physical and emotional health while living with multiple myeloma. Living With Relapsed Refractory Multiple Myeloma is a guide featuring practical tips on staying active, eating a healthy and enjoyable diet, and supporting your emotional well-being.

Get this guide delivered to you directly when you sign up for updates at SARCLISA.com/get-the-latest



Scan with your smartphone camera

## Important Safety Information (cont'd)

What are the possible side effects of SARCLISA? (cont'd)

- Risk of new cancers. New cancers have happened in people during treatment with SARCLISA.
   Your healthcare provider will monitor you for new cancers during treatment with SARCLISA.
- Change in blood tests. SARCLISA can affect the results of blood tests to match your blood type.
   Your healthcare provider will do blood tests to match your blood type before you start treatment with SARCLISA. Tell all of your healthcare providers that you are being treated with SARCLISA before receiving blood transfusions.



# Find helpful resources

## Multiple myeloma information and support networks

These organizations and networks can offer helpful information about living with multiple myeloma, updates on the latest research, and help connect you with emotional support, including others living with multiple myeloma.\*

#### **International Myeloma Foundation**

myeloma.org | 800-452-2873

### The Myeloma Beacon

myelomabeacon.org | info@myelomabeacon.org

### Multiple Myeloma Research Foundation

themmrf.org | 203-229-0464

### Myeloma Crowd

myelomacrowd.org | 800-709-1113

# Important Safety Information (cont'd)

### What are the possible side effects of SARCLISA? (cont'd)

The most common side effects of SARCLISA in combination with pomalidomide and dexamethasone include:

- upper respiratory tract infection
- lung infection (pneumonia)
- diarrhea

The most common side effects of SARCLISA in combination with carfilzomib and dexamethasone include:

- upper respiratory tract infection
- tiredness and weakness
- high blood pressure
- diarrhea
- lung infection (pneumonia)
- trouble breathing
- trouble sleeping

- decreased platelet count (thrombocytopenia)

decreased red blood cell count (anemia)

- - bronchitis
  - · cough
  - back pain
  - decreased red blood cell count (anemia)
  - decreased platelet count (thrombocytopenia)



<sup>\*</sup>This listing is provided as a resource only and does not constitute an endorsement by Sanofi of any particular organization or its programming. Additional resources on this topic may be available and should be investigated. Sanofi does not review or control the content of non-Sanofi websites. These listings do not constitute an endorsement by Sanofi of information provided by any other organizations.

# Notes and questions

Use this page to write down questions you have, or information you may want to share with your doctor or nurse.	

# Glossary of terms

**Immune system:** The body's natural defense system against infections and diseases.

Infusion reaction: Symptoms that sometimes develop when a patient receives intravenous medicines.

Intravenous (IV) infusion: A treatment given by needle or tube directly into a vein.

**Minimal residual disease (MRD):** The small number of myeloma cells that may be present in the bone marrow during or after treatment.

**M-protein:** An abnormal antibody produced by myeloma cells that can build up in the blood and urine of people with multiple myeloma. Also called monoclonal protein.

**Progression-free survival (PFS):** How long during or after the treatment of a disease, including multiple myeloma, that a person lives without their disease getting worse. In clinical trials, measuring progression-free survival is one way to see how well a treatment works.

**Proteasome inhibitor:** A type of treatment that slows the growth of myeloma cells and kills myeloma cells by interfering with a certain cell function.

**Refractory:** When myeloma does not respond to treatment or stops responding to treatment.

**Relapse:** When the signs and symptoms of myeloma return after a period of improvement.

**Remission or response:** Remission means there is a complete or partial disappearance of the signs and symptoms of multiple myeloma and that the disease is under control. Response to treatment is sometimes referred to as remission.

# Important Safety Information (cont'd)

What are the possible side effects of SARCLISA? (cont'd)

Heart failure can happen during treatment with SARCLISA in combination with carfilzomib and dexamethasone. Tell your healthcare provider right away if you develop any of the following symptoms:

- trouble breathing
- cough
- swelling of your ankles, feet, or legs

These are not all the possible side effects of SARCLISA. For more information, ask your healthcare provider or pharmacist.





# Visit **SARCLISA.com** to watch a video about how SARCLISA works





Scan with your smartphone camera

Please see Important Safety Information on pages 22-23, and accompanying full Prescribing Information, including Patient Information.

## sanofi

