

TAKEDA ONCOLOGY:

DEDICATED TO TREATING MULTIPLE MYELOMA.
DEDICATED TO HELPING PATIENTS LIKE YOU.





More than 20 years ago, Nobel Prize-winning science brought forth the idea of proteasome inhibition to disrupt the growth and survival of cancer cells. This groundbreaking discovery led to the creation of VELCADE® (bortezomib), the first-ever treatment of its kind, called proteasome inhibitors, specifically approved for multiple myeloma. At the time, it was a new way to treat the disease.

INDICATION AND IMPORTANT SAFETY INFORMATION FOR VELCADE® (bortezomib)

What is VELCADE used for?

VELCADE (bortezomib) is approved for the treatment of adults with multiple myeloma (a cancer of the plasma cells).

Who should not receive VELCADE?

Before you receive treatment with VELCADE, tell your doctor about all of your medical conditions. You should not receive VELCADE if you are allergic to bortezomib, boron, or mannitol.

Please read the Important Safety Information on pages 7-9 and the accompanying VELCADE (bortezomib) full Prescribing Information.

No two people with cancer are alike.

At Takeda Oncology, the unique needs of each patient have been at the core of our oncology business since our inception, and they remain at the very heart of our commitment, research, and outreach.



Following VELCADE, Takeda Oncology continued its commitment to the research and development of treatments for multiple myeloma. In 2015, NINLARO was the first oral proteasome inhibitor approved by the US Food and Drug Administration.

INDICATION 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.

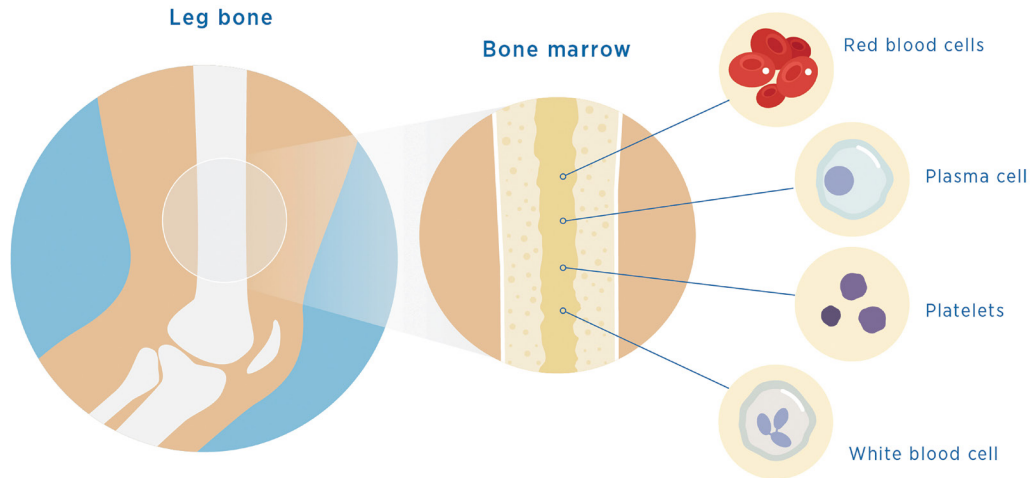
It is not known if NINLARO is safe and effective in children.

Learn more about multiple myeloma and Takeda Oncology treatments on the following pages.

Please read the Important Safety Information on page 11 and the Patient Information in the accompanying NINLARO (ixazomib) full Prescribing Information.

What is multiple myeloma?

Multiple myeloma is a cancer of the blood. It affects the part of your bone called bone marrow. Your bone marrow produces the cells that make up your blood, including red blood cells, white blood cells, platelets, and plasma cells.



A plasma cell is a type of white blood cell that normally produces antibodies to fight infections. People with multiple myeloma have cancerous plasma cells, also called myeloma cells.

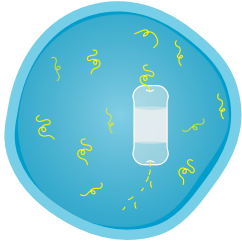
Prior to diagnosis, people with multiple myeloma may experience a number of symptoms that lead them to seek medical attention. Some common signs and symptoms of multiple myeloma are listed below; however, some people may not have any symptoms or their symptoms may be vague:

- Bone pain and broken bones
- Nausea or vomiting
- Weakness and tiredness
- Frequent infections
- Nervous system problems, such as back pain, numbness, and muscle weakness
- Low red blood cell count, known as anemia
- High calcium levels in the blood, known as hypercalcemia

Symptoms like these could be signs of other medical problems. Talk with your healthcare team about any questions you may have.

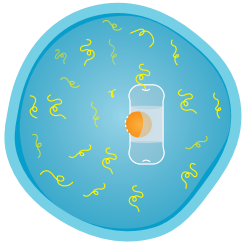
Ask your doctor for a Takeda Oncology Multiple Myeloma Lab Tracker to help you understand your test results and keep them in a central place. This can also be downloaded from www.NINLARO.com and www.VELCADE.com.

How proteasome inhibitors work



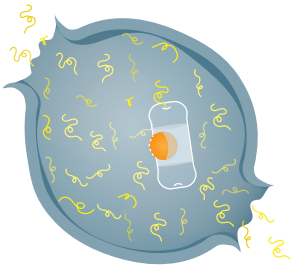
Myeloma cell

The proteasomes in all cells act like garbage disposals. The proteasomes digest unneeded or damaged proteins. Myeloma cells are more dependent on proteasomes than normal cells.



Enter the proteasome inhibitor

Proteasome inhibitors block the proteasomes in cells, causing a buildup of proteins.



Cell death

The buildup of proteins within cells can lead to cell death.





VELCADE is a treatment for multiple myeloma that has been approved by the US Food and Drug Administration. It belongs to a category of medicines called proteasome inhibitors and was the first proteasome inhibitor approved for the treatment of multiple myeloma.



VELCADE is an injection that is given intravenously (into your vein) or subcutaneously (under your skin) by a healthcare professional.



VELCADE is usually given in a doctor's office or at a clinic 1 or 2 times per week.

More than 1 in 5 people (20%) receiving VELCADE have experienced the following side effects in one or more clinical trials: neutropenia, thrombocytopenia, peripheral neuropathy, fatigue, nausea, diarrhea, leukopenia (low levels of white blood cells), anemia, constipation, neuralgia (nerve pain), vomiting, lymphopenia (low levels of a certain type of white blood cells), rash, pyrexia (fever), and anorexia.

Visit VELCADEconnect.com if you have been prescribed VELCADE and would like to receive a starter kit, or if you would like to receive more information on your treatment.

INDICATION AND IMPORTANT SAFETY INFORMATION FOR VELCADE® (bortezomib)

What is VELCADE used for?

VELCADE (bortezomib) is approved for the treatment of adults with multiple myeloma (a cancer of the plasma cells).

How is VELCADE administered?

VELCADE is prescribed by a doctor experienced in the use of medications to treat cancer. It is administered by a healthcare professional as an injection into your vein (intravenously, or IV) or under your skin (subcutaneously, or SC). VELCADE must not be administered into your spinal fluid (intrathecally).

Who should not receive VELCADE?

Before you receive treatment with VELCADE, tell your doctor about all of your medical conditions. You should not receive VELCADE if you are allergic to bortezomib, boron, or mannitol.

What are the possible side effects of VELCADE?

VELCADE (bortezomib) can cause serious side effects, including:

- **Nerve problems (peripheral neuropathy).** VELCADE can cause damage to the nerves, a condition called peripheral neuropathy. You may feel muscle weakness, tingling, burning, pain, and loss of feeling in your hands and feet, any of which can be severe. Tell your doctor if you notice any of these symptoms. Your doctor may change the dose and/or schedule of VELCADE or stop it altogether. If you have peripheral neuropathy before starting VELCADE, your doctor could consider giving you VELCADE subcutaneously.
- **Low blood pressure (hypotension).** VELCADE can cause a drop in blood pressure. Tell your doctor if you have low blood pressure, feel dizzy, or feel as though you might faint. If you are taking drugs that lower blood pressure, your medications might need to be adjusted. If you are not drinking enough liquids, your doctor may need to administer IV fluids.
- **Heart problems (cardiac toxicity).** Treatment with VELCADE can cause or worsen heart rhythm problems and heart failure. Your doctor may closely monitor you if you have, or are at risk for, heart disease. Tell your doctor if you experience chest pressure or pain, palpitations, swelling of your ankles or feet, or shortness of breath.
- **Lung problems (pulmonary toxicity).** There have been reports of lung disorders in people receiving VELCADE. Some of these events have been fatal. Tell your doctor if you experience any cough, shortness of breath, wheezing, or difficulty breathing.
- **Brain swelling (Posterior Reversible Encephalopathy Syndrome—PRES).** There have been reports of a rare, reversible condition involving the brain, called PRES, in people treated with VELCADE. People with PRES can have seizures, high blood pressure, headaches, tiredness, confusion, blindness, or other vision problems. Treatment with VELCADE should be stopped in cases of PRES. It is not known whether restarting VELCADE therapy in patients previously experiencing this complication is safe.

Please see additional Important Safety Information on the following pages.

IMPORTANT SAFETY INFORMATION FOR VELCADE® (bortezomib), cont'd

- **Stomach and Intestinal problems (gastrointestinal toxicity).** VELCADE treatment can cause nausea, vomiting, diarrhea, and constipation. If your symptoms are severe, your doctor may recommend IV fluids and/or medications.
- **Low platelet counts (thrombocytopenia).** VELCADE can cause low levels of platelets (clot-forming cells). If platelets become very low, there is an increased risk of bleeding. Your doctor may recommend a platelet transfusion or other supportive care.
- **Lowered white blood cells (neutropenia).** VELCADE can cause low levels of neutrophils which are a type of white blood cells that help to fight infections. If your white blood cells become low, you can be at higher risk for infections. Tell your doctor if you develop a fever or believe you have an infection.

You will have regular blood tests to check your cell counts during your treatment with VELCADE. If the number of these cells is very low, your doctor may change the dose and/or schedule of VELCADE.

- **Tumor Lysis Syndrome (TLS).** TLS is a syndrome that causes a chemical imbalance in the blood that could lead to heart and/or kidney problems. TLS can occur with cancer treatments, and your doctor will be monitoring your blood and urine for any signs of this syndrome. If you develop TLS, your doctor will take appropriate steps to treat it.
- **Liver problems (hepatic toxicity).** If you have liver problems, it can be harder for your body to get rid of VELCADE. VELCADE has caused sudden liver failure in people who were taking many medications or had other serious medical conditions. Symptoms of liver problems include a yellow discoloration of the eyes and skin (jaundice) and changes in liver enzymes measured in blood tests. Your doctor will closely monitor you if you have liver disease. It is not known whether restarting VELCADE therapy in patients previously experiencing this complication is safe.
- **Hematologic disease (Thrombotic Microangiopathy, TMA).** VELCADE can lead to the formation of blood clots in small blood vessels. These clots can result in low platelets, kidney damage, confusion, and an increased risk of bleeding. Tell your doctor if you develop pinpoint-sized purple dots (petechiae), larger bruises, or you see blood in your urine. Your doctor may stop treatment with VELCADE. It is not known whether restarting VELCADE therapy in patients previously experiencing this complication is safe.

IMPORTANT SAFETY INFORMATION FOR VELCADE® (bortezomib), cont'd

More than 1 in 5 people (20%) receiving VELCADE have experienced the following side effects in one or more clinical trials: neutropenia, thrombocytopenia, peripheral neuropathy, fatigue, nausea, diarrhea, leukopenia (low levels of white blood cells), anemia, constipation, neuralgia (nerve pain), vomiting, lymphopenia (low levels of a certain type of white blood cells), rash, pyrexia (fever), and anorexia.

What other information should you discuss with your doctor?

Women should avoid becoming pregnant or planning to become pregnant while being treated with VELCADE as it could harm your unborn baby. Females should use effective birth control during treatment and for at least seven months after the final dose of VELCADE. If using hormonal contraceptives (for example, the pill), an additional barrier method of contraception (for example, diaphragm or condom) must be used. Males should use effective contraception during treatment with VELCADE and for four months following treatment. Tell your doctor immediately if you think you are pregnant. Do not breastfeed during treatment with VELCADE and for seven months after your final dose of VELCADE.

You should also tell your doctor if you:

- Have kidney disease. If you are on dialysis, your doctor will administer VELCADE after the dialysis procedure.
- Are taking medication for diabetes. VELCADE can affect your blood glucose levels. Your doctor may require close monitoring of your blood glucose levels and change the dose of your diabetes medicine while you are being treated with VELCADE.
- Have liver disease.
- Are using any other medications, including prescription and nonprescription medications, herbal or dietary supplements, or holistic treatments. St. John's wort should be avoided.
- Develop a rash of any type or have skin pain while receiving VELCADE.

The side effects of VELCADE may impair your ability to drive or operate machinery. These are not all of the possible side effects with VELCADE. It is important to always contact your doctor if you experience any side effects while on VELCADE. If you have any questions about VELCADE, contact your doctor. Additional information is available on the website at VELCADE.com.

Please see accompanying VELCADE® (bortezomib) full Prescribing Information.



NINLARO is a prescription medicine used to treat multiple myeloma that has been approved by the US Food and Drug Administration in combination with the medicines REVLIMID® (lenalidomide) and dexamethasone. It is for patients who have taken at least 1 prior therapy for multiple myeloma. It belongs to a category of medicines called proteasome inhibitors and is the first oral treatment of its kind.



NINLARO is a capsule that is part of an all-oral regimen.



NINLARO may be taken at home, 1 time each week, on the same day of the week for the first 3 weeks of each cycle. It is taken along with REVLIMID and dexamethasone, in 4-week cycles.

NINLARO may cause serious side effects including low platelet counts (thrombocytopenia), stomach and intestinal (gastrointestinal) problems, nerve problems, swelling, skin reactions, thrombotic microangiopathy (TMA), and liver problems. 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).

Visit www.NINLAROconnect.com if you have been prescribed NINLARO and would like to receive a starter kit, or if you would like to receive more information on your treatment.

INDICATION AND SELECTED IMPORTANT SAFETY INFORMATION

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.

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

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

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

Please see Patient Information in the accompanying NINLARO (ixazomib) full Prescribing Information.

Getting involved with your treatment



At Takeda Oncology, we believe that being an active participant in your treatment plan helps you get more out of your doctor's appointments. And that starts with asking questions. Lots of them.

Below are some suggestions to bring up at your next appointment. Feel free to add your own, and remember: In a subject as complicated as multiple myeloma, there is no such thing as a silly question.

We suggest you bring a notepad and take notes during your office visits.

GENERAL QUESTIONS

- What are the goals of 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 the differences in available multiple myeloma treatments?
- How often is treatment given? For how long is treatment given? What ways are treatment given?
- 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?
- Are there patient support groups that you might recommend?
- Can I make plans to travel?

QUESTIONS ABOUT SIDE EFFECTS

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

QUESTIONS ABOUT LAB WORK AND TESTS

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

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

QUESTIONS ABOUT THE ADMINISTRATION OF IV OR SUBCUTANEOUS VELCADE® (bortezomib)

- How often will I need to come into the office to receive my treatment?
- How long do injections take?
- What are the differences between intravenous and subcutaneous injections?

QUESTIONS ABOUT TAKING THE ALL-ORAL NINLARO® (ixazomib) REGIMEN

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

Please read the Important Safety Information on pages 7-9 and the accompanying VELCADE (bortezomib) full [Prescribing Information](#).

Please read the Important Safety Information on page 11 and the [Patient Information](#) in the accompanying NINLARO (ixazomib) full [Prescribing Information](#).

Takeda Oncology: helping you get the support you need

At Takeda Oncology, we are committed to helping you get access to your treatment whenever possible.

FOR VELCADE® (BORTEZOMIB) PATIENTS: VELCADE REIMBURSEMENT ASSISTANCE PROGRAM (VRAP)

VRAP is a support program of Takeda Oncology. From finding financial assistance to understanding your disease, the Takeda Oncology Patient Support Program can provide the information you need throughout your treatment. Our case managers are your connection to personalized support. To learn more about the Takeda Oncology Patient Support Program, call to speak with a case manager at 1-844-817-6468, Option 2, or visit www.oncologypatientsupport.com. Let's Talk. We're available Monday-Friday, 8AM-8PM ET.

FOR NINLARO® (IXAZOMIB) PATIENTS: TAKEDA ONCOLOGY PATIENT SUPPORT PROGRAM

From finding financial assistance to understanding your disease, the Takeda Oncology Patient Support Program can provide the information you need throughout your treatment. Our case managers are your connection to personalized support.

To learn more about the Takeda Oncology Patient Support Program, call to speak with a case manager at 1-844-817-6468, Option 2, or visit www.oncologypatientsupport.com. Let's Talk. We're available Monday-Friday, 8AM-8PM ET.

Additional online resources

We hope you will use the resources below to find the people, tools, and education that will enable you to become an active participant in your care. Takeda Oncology is not affiliated with these organizations. By listing these resources, Takeda Oncology is not endorsing any particular service or group and we are not responsible for the content of these sites or services. They are provided here for informational purposes and are not meant to replace your healthcare provider's medical advice.

CancerCare

www.cancercares.org
1-800-813-HOPE (4673)

Good Days

pnp.mygooddays.org
1-877-968-7233

HealthWell Foundation

healthwellfoundation.org
1-800-675-8416

International Myeloma Foundation

www.myeloma.org
1-800-452-2873

Leukemia and Lymphoma Society

www.lls.org
1-800-955-4572

Multiple Myeloma Research Foundation

www.themmrf.org
1-203-229-0464

Patient Access Network Foundation

www.panfoundation.org
1-866-316-PANF (7263)

Patient Advocate Foundation

www.patientadvocate.org
1-800-532-5274

Please read the Important Safety Information on pages 7-9 and the accompanying VELCADE (bortezomib) full Prescribing Information.

Please read the Important Safety Information on page 11 and the Patient Information in the accompanying NINLARO (ixazomib) full Prescribing Information.

YOU HAVE OPTIONS IN MULTIPLE MYELOMA

Throughout your treatment journey, it is important to keep asking questions. Ask about your treatments, ask about their side effects, and ask about your available options. Being an active participant will help you get the most out of your treatment.



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