REBLOZYL: Your road to fewer transfusions

Find your way through anemia in B-thalassemia

What is **REBLOZYL**?

REBLOZYL is a prescription medicine for injection, and is used to treat anemia (low red blood cells) in adults with:

β (beta) thalassemia who need regular red blood cell (RBC) transfusions.

REBLOZYL is not a substitute for RBC transfusions in people who need immediate treatment for anemia.
 It is not known if REBLOZYL is safe or effective in children under 18 years of age.

What should I discuss with my healthcare team before starting treatment?



Talk to your healthcare team about all of your health problems and risk factors, including if you:

- have or have had blood clots
- take hormone replacement therapy or birth control pills (oral contraceptives)
- have had your spleen removed (splenectomy)
- smoke
- have or have had high blood pressure (hypertension)
- have a history of extramedullary hematopoietic (EMH) masses
- have or have had enlarged spleen or liver



Talk to your healthcare team about all the medicines you are taking, including:



These are not all the topics you should discuss with your healthcare team. Ask your healthcare team about anything you may be unsure about before starting treatment.

Please see additional Important Safety Information on pages 8-10.

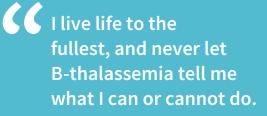


2

It's time to take the next step

Even though living with beta-thalassemia (B-thalassemia) can be challenging, you do whatever it takes to stay on top of your health. For one, you're about to take REBLOZYL (REB-low-zil), which your healthcare provider believes may be the right treatment to manage your anemia in B-thalassemia.

This guide is one more tool to help you manage your treatment.



- PATIENT LIVING WITH B-THALASSEMIA

What you'll find in this guide:

Page 3	Understanding B-thalassemia and anemia	
Page 4	What is REBLOZYL?	
Page 5	How will you receive REBLOZYL?	
Page 6	Results in transfusion-dependent patients	
Page 8	Important Safety Information	
Page 11	Resources to support you along the way	
Page 12	Your goals	
Page 13	Treatment tracking	
Page 14	Notes	
Page 16	Get the most from your treatment	
Page 17	Patient information	



Anemia plays a role in B-thalassemia

Anemia is one of the most common symptoms of B-thalassemia and one that you may feel the most. Your anemia may make you feel tired or weak. It can also have long-term impacts on your health and well-being.



3

How does anemia in B-thalassemia happen?

Anemia is a condition where you don't have enough healthy red blood cells (RBC). This means your blood has lower-than-normal hemoglobin (Hb) levels. Hb is an important part of an RBC. It is the part of the cell that brings oxygen to your body and organs.

In B-thalassemia, ineffective erythropoiesis (IE) leads to immature RBCs piling up in your bone marrow.

RBCs pile up when they are not able to fully mature and enter the bloodstream to do their job. This can lead to your body making too few mature, working RBCs that also may not live as long. This can lead to anemia.



How is anemia in B-thalassemia treated?

Understanding the options available to help manage the symptoms can help prepare you to talk to your doctor.

Anemia is usually treated with red blood cell (RBC) transfusions. People with B-thalassemia are either:

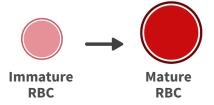
- Transfusion dependent (TD): rely on regular transfusions
- Nontransfusion dependent (NTD): only need transfusions at certain times

You may require more or fewer RBC transfusions, depending on the severity of your B-thalassemia. If you have questions about this, be sure to talk to your healthcare team. They can help you identify next steps and potential treatment options.



What is **REBLOZYL**?

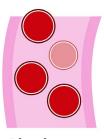
REBLOZYL (REB-low-zil) is a prescription medicine used to treat anemia in adults with B-thalassemia who need regular RBC transfusions. REBLOZYL is called an **erythroid maturation agent (EMA).** It is the first and only EMA. An EMA helps immature RBCs (called erythroid cells) develop and become mature, working RBCs. This may result in more healthy RBCs and improve anemia.



How does **REBLOZYL** work?

It's important that you learn about how REBLOZYL works before starting treatment. This can help you better understand why your doctor prescribed REBLOZYL. It can also make you feel more confident when talking with your healthcare team.

REBLOZYL works by developing more mature, working RBCs. REBLOZYL allows more immature cells to mature and work the right way. In preclinical models, the amount of hemoglobin increased and the quality of red blood cells improved with REBLOZYL. This means that there are more mature red blood cells in the bloodstream.



Bloodstream





How will I receive REBLOZYL?

REBLOZYL is an injection given under your skin by your healthcare team at their office.

- Injections are given in your upper arm, thigh, or stomach
- Needles are used for injections that go under your skin and are smaller than those used for injections that go into your muscle, such as those used for most vaccines



You will receive a REBLOZYL injection once every 3 weeks.

Before each REBLOZYL injection, your healthcare team will:



Do a blood test to check your Hb levels



Discuss the number of transfusions you've had since your last REBLOZYL dose



Your healthcare team may also talk about any symptoms you've been experiencing. This information helps your healthcare team see how your anemia is responding to REBLOZYL. It's important to talk about how you're feeling with your healthcare team to help them understand how you're doing and if you're meeting your treatment goals.

What if I delayed or missed a dose?

Sometimes things come up and you are unable to make a scheduled doctor's appointment. **If your scheduled REBLOZYL dose is delayed or missed, call your healthcare team as soon as possible to reschedule your next appointment.** Your doctor will give you your dose of REBLOZYL as soon as possible. Your treatment with REBLOZYL will continue as prescribed, with at least 3 weeks between doses.



What are the possible benefits of REBLOZYL?

Starting a medicine is a lot to take in. You may feel uncertain at first. Knowing how REBLOZYL has impacted other people can help you understand what to expect from your treatment.

A clinical study was done to determine the safety and effectiveness of REBLOZYL



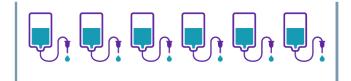
* Set 12-week period was weeks 13-24

Percent of people who reduced their need for transfusions by at least one-third (33%) during a set 12-week period*



*48 out of 224 (21.4%) patients receiving **REBLOZYL** versus 5 out of 112 (4.5%) patients receiving **placebo**. Set 12-week period was weeks 13-24.

Example patient: What this might look like



For example, if a patient needed 6 RBC units every 12 weeks before starting REBLOZYL...



...this patient may only need 4 (or less) RBC units during weeks 13 to 24 after starting REBLOZYL



REBLOZYL was studied in:



7

336 people with B-thalassemia who were transfusion dependent.



224 people received 1 REBLOZYL injection every 3 weeks

112 people received 1 placebo injection every 3 weeks All patients in both groups were allowed to receive best supportive care as needed, which included:

- Red blood cell transfusions
- Iron-chelating agents
- Antibiotics, antivirals, antifungals
- Nutritional support

Everyone in the study regularly received 6 to 20 units of packed RBCs and had not been transfusion-free for more than 35 days within 24 weeks before the study started.

Patients could not be part of the study if they were under 18 or had:

- Hemoglobin S/BT or alpha (a)-thalassemia
- Major organ damage (liver, heart, or lung disease, poor kidney function)
- Recent deep vein thrombosis, stroke, or use of erythropoiesis-stimulating agent, immunosuppressant, or hydroxyurea therapy

Characteristics of the 336 patients in the clinical trial



Age range: 18 to 66 years 30 years was the **median** age *Median is the middle of a range of numbers*



Mutation type: 31% of patients **(103 out of 336 patients)** had a β0/β0 **mutation** This means that their bodies produced no normal adult hemoglobin



Gender: 58% of patients (195 out of 336 patients) were women and 42% of patients (141 out of 336 patients) were men



Splenectomy: 58% of patients (194 out of 336 patients) had their spleen removed



Transfusion burden at the start of trial Patients received approximately 6 red blood cell units every 12 weeks (median transfusion burden; range 3-14 units every 12 weeks)



Everyone reacts to REBLOZYL differently. To learn about the side effects of REBLOZYL, see pages 8-10.

REBLOZYL could lower the number of transfusions

While on REBLOZYL, you may lower the number of transfusions needed, which can look different from person to person. This is why it's so important to talk about your treatment goals with your healthcare team. Together, you can make sure you're tracking toward the same expectation.



Important Facts About **REBLOZYL®**

(luspatercept-aamt)

This is a summary of important information that you need to know about REBLOZYL. Your healthcare team can work with you to help answer any guestions you may have about this medication. Keep this information in a safe place so you can refer to it before and during your treatment.



What is REBLOZYL?

REBLOZYL is a prescription medicine for injection, and is used to treat anemia (low red blood cells) in adults with:

β (beta) thalassemia who need regular red blood cell (RBC) transfusions.

X REBLOZYL is not a substitute for RBC transfusions in people who need immediate treatment for anemia.

X It is not known if REBLOZYL is safe or effective in children under 18 years of age.

What should I discuss with my healthcare team before starting treatment?



8

Talk to your healthcare team about all of your health problems and risk factors, including if you:

- have or have had blood clots
- take hormone replacement therapy or birth control pills (oral contraceptives)
- have had your spleen removed (splenectomy)
- smoke
- have or have had high blood pressure (hypertension)
- have a history of extramedullary hematopoietic (EMH) masses
- have or have had enlarged spleen or liver



Talk to your healthcare team about all the medicines you are taking, including:

- prescription medicines
- over-the-counter medicines
- vitamins
- herbal supplements

These are not all the topics you should discuss with your healthcare team. Ask your healthcare team about anything you may be unsure about before starting treatment.



What should I discuss with my healthcare team about pregnancy, birth control, and breastfeeding?



9

Talk to your healthcare team if:

You are pregnant or plan to become pregnant — REBLOZYL may harm your unborn baby If you are able to become pregnant, your healthcare team should do a pregnancy test before you start receiving REBLOZYL. You should use an effective method of birth control during treatment and for at least 3 months after your last dose of REBLOZYL. Talk to your healthcare team about birth control methods that you can use with REBLOZYL.



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

REBLOZYL may affect your ability to become pregnant. Talk to your healthcare team if fertility problems are a concern for you.



You are breastfeeding or plan to breastfeed

Do not breastfeed during treatment and for 3 months after the last dose of REBLOZYL. It is not known if REBLOZYL passes into your breast milk. Talk to your healthcare team about the best way to feed your baby during this time.

What are the serious side effects of REBLOZYL?

A **serious side effect** is a side effect that can sometimes become life-threatening and can lead to death. They may happen any time during treatment or even after your treatment has ended. You may experience more than one side effect at the same time.

Blood clots (thrombosis/thromboembolism) — Blood clots in the arteries, veins, brain, and lungs have happened in people with B-thalassemia during treatment with REBLOZYL. The risk of blood clots may be higher in people who have had their spleen removed or who take hormone replacement therapy or birth control pills.



Call your healthcare provider or get medical help right away if you have any of these symptoms:

- chest pain
- a cold or pale arm or leg
- trouble breathing or shortness of breath

• pain in your leg, with

or without swelling

- sudden numbness or weakness that is short-term or continues to happen over a long period of time, especially on one side of the body
- severe headache or confusion
- sudden trouble with seeing, speaking, balancing, walking, or dizziness

High blood pressure (hypertension) — REBLOZYL may cause an increase in your blood pressure. Your healthcare provider will check your blood pressure before you receive your REBLOZYL dose. Your healthcare provider may prescribe you medicine to treat high blood pressure or increase the dose of medicine you already take to treat high blood pressure, if you develop high blood pressure during treatment with REBLOZYL.



Extramedullary Hematopoietic (EMH) Masses. EMH masses have happened in people with beta thalassemia during treatment with REBLOZYL. You may have a higher risk for developing EMH masses if you have a history of EMH masses, have had your spleen removed, have or have had enlarged spleen or liver, or have low hemoglobin levels. Your healthcare provider will monitor you before you start and during treatment with REBLOZYL. Call your healthcare provider or get medical help right away if you get any of these symptoms:

- severe pain in the back
- numbness or weakness or loss of voluntary movement in feet, legs, hands or arms

• joint pain (arthralgia)

What are the most common side effects of REBLOZYL?

The most common side effects of REBLOZYL include:

diarrhea

- feeling tired
- muscle or bone pain
- stomach (abdominal) pain
- headache
- cough
- trouble breathing

- dizziness
- allergic reactions
- nausea
- These are not all of the possible side effects.

Talk to your healthcare team for more information about side effects. You are encouraged to report negative side effects of prescription drugs to the FDA by visiting www.fda.gov/medwatch or calling 1-800-FDA-1088.

How will I receive REBLOZYL?

REBLOZYL is given as an subcutaneous injection (under your skin) in the upper arm, thigh, or stomach by your healthcare provider. The recommended starting dose of REBLOZYL is 1 mg/kg, once every 3 weeks. Work with your healthcare team to determine the right treatment plan for you.

REBLOZYL is a type of medicine called an erythroid maturation agent (EMA), and comes in single-dose vials that need to be prepared for injection by a healthcare professional.

Active ingredients: luspatercept-aamt Inactive ingredients: citric acid monohydrate, polysorbate 80, sucrose, and tri-sodium citrate dihydrate

Before each REBLOZYL injection, your healthcare provider will do a blood test to check your hemoglobin and review your transfusion record to see how your anemia is responding to REBLOZYL. Your healthcare provider may adjust your dose or stop treatment depending on how you respond to REBLOZYL.

What if I delayed or missed a dose?

Ŀ

Call your healthcare provider as soon as possible to reschedule your next appointment if you delayed or missed a dose. Your healthcare provider will give your dose of REBLOZYL as soon as possible. Your treatment with REBLOZYL will continue as prescribed, with at least 3 weeks between doses.



For more information, please see accompanying <u>Full Prescribing Information</u> and <u>Medication Guide</u> for REBLOZYL. Talk to your healthcare team for more information about this medication.



11

Resources and support

What financial support exists for REBLOZYL?

Patient Access, Reimbursement, and Co-Pay Support *Available Through*

Histol Myers Squibb[™] Access Support[®] >

Bristol Myers Squibb is committed to helping patients gain access to their prescribed BMS medications. That's why we offer the BMS Access Support[®] program, which provides resources to help patients understand their insurance coverage and find information on sources of financial support, including co-pay assistance for eligible commercially insured patients. For more information, ask your doctor, visit BMSAccessSupport.com, or call BMS Access Support[®] at 1-800-861-0048, 8 AM to 8 PM ET, Monday-Friday

Are there other resources I can explore to learn more about B-thalassemia?

You may find it helpful to learn more about B-thalassemia and anemia. For more disease education and support, check out these organizations:



Cooley's AnemiaFoundation www.thalassemia.org Thalassaemia International Federation (TIF) www.thalassaemia.org.cy/about

This list of independent organizations is provided as an additional resource for obtaining information related to B-thalassemia. This list does not indicate endorsement by Bristol Myers Squibb or an organization or its communications.



Set goals and track your progress with REBLOZYL®

No matter where you are in your treatment journey, goal setting can help you stay focused and motivated.

Your Goals

Think about what you hope to get from treatment, such as lessening your need for red blood cell (RBC) units and/or transfusions.

				vith your health	
rite down and talk to		e team about an	y symptoms o	side effects that	at you
otice while taking REB	LOZYL.				



Treatment tracking

Use the space below to write down your REBLOZYL injection dates, your hemoglobin levels, and details about your RBC transfusions. Tracking these things can help you see if you are progressing toward your goals.

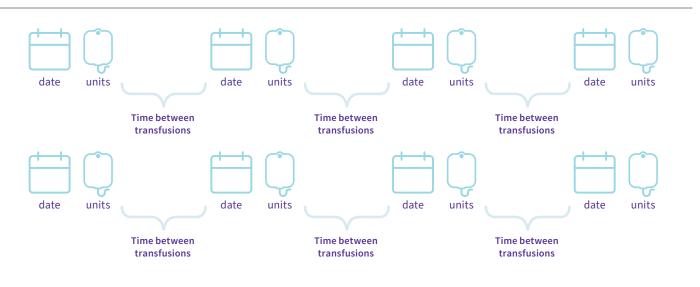
REBLOZYL Injection Date

REBLOZYL Injection Date

Hemoglobin Level



Red Blood Cell Transfusions





My NOTES	
Date / /	Date / /
Date / /	Date / /
Date / /	Date / /



My NOTES

Date / /	Date / /
Date / /	Date / /
Date / /	Date / /



Get the most from your treatment

Follow these tips to help you work with your healthcare team.

Tips to keep you organized:

- Use the "My Notes" section to write down any questions or concerns as soon as they come up.
- Bring the completed worksheet portions of this brochure with you to your healthcare visits.
- Invite a caregiver to go with you to healthcare visits.

- Set calendar reminders to help you keep track of healthcare visits and monitoring tests.
- Ask your healthcare team for more information about necessary monitoring tests, which may include:
 - Frequent blood tests to check complete blood counts and iron levels
 - Imaging tests for heart function, liver function, and iron overload
 - Tests to detect viral infections

Visit **www.REBLOZYL.com** to learn more about B-thalassemia, how REBLOZYL works, and the support available to you.





Patient Information REBLOZYL[®] (REB-low-zil) (luspatercept-aamt) for injection, for subcutaneous use

What is REBLOZYL?

REBLOZYL is a prescription medicine used to treat anemia (low red blood cells) in adults with:

- beta thalassemia who need regular red blood cell (RBC) transfusions.
- myelodysplastic syndromes with ring sideroblasts (MDS-RS) or myelodysplastic/myeloproliferative neoplasms with ring sideroblasts and thrombocytosis (MDS/MPN-RS-T) who need regular RBC transfusion and have not responded well to or cannot receive an erythropoiesis stimulating agent (ESA).

REBLOZYL is not for use as a substitute for RBC transfusions in people who need immediate treatment for anemia. It is not known if REBLOZYL is safe or effective in children.

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

- have or have had blood clots
- take hormone replacement therapy or birth control pills (oral contraceptives)
- have had your spleen removed (splenectomy)
- smoke
- have or have had high blood pressure (hypertension)
- have a history of extramedullary hematopoietic (EMH) masses
- have or have had enlarged spleen or liver
- are pregnant or plan to become pregnant. REBLOZYL may harm your unborn baby. Tell your healthcare provider right away if you become pregnant or think you may be pregnant during treatment with REBLOZYL.
 Females who are able to become pregnant:
 - Your healthcare provider should do a pregnancy test before you start treatment with REBLOZYL.
 - You should use effective birth control (contraception) during treatment with REBLOZYL and for at least 3 months after the last dose.
- are breastfeeding or plan to breastfeed. It is not known if REBLOZYL passes into your breast milk.
 - Do not breastfeed during treatment with REBLOZYL and for 3 months after the last dose. Talk to your healthcare
 provider about the best way to feed your baby during this time.

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

How will I receive REBLOZYL?

- Your healthcare provider will prescribe REBLOZYL in a dose that is right for you.
- REBLOZYL is given as an injection under your skin (subcutaneous) in the upper arm, thigh or stomach (abdomen) by your healthcare provider.
- Your healthcare provider will do regular blood tests to check your hemoglobin to monitor if your anemia is getting better before each injection and during your treatment with REBLOZYL.
- Your healthcare provider may adjust your dose or stop treatment depending on how you respond to REBLOZYL.
- If your scheduled REBLOZYL dose is delayed or missed, your healthcare provider will give your dose of REBLOZYL as soon as possible and continue your treatment as prescribed with at least 3 weeks between doses.



What are the possible side effects of REBLOZYL?

REBLOZYL may cause serious side effects, including:

- Blood clots. Blood clots in the arteries, veins, brain, and lungs have happened in people with beta thalassemia during treatment with REBLOZYL. The risk of blood clots may be higher in people who have had their spleen removed or who take hormone replacement therapy or birth control (oral contraceptives). Call your healthcare provider or get medical help right away if you get any of these symptoms:
 - chest pain 0
 - trouble breathing or shortness of breath 0
 - pain in your leg, with or without swelling 0
 - a cold or pale arm or leg 0
 - sudden numbness or weakness that are both short-term or continue to happen over a long period of time. 0 especially on one side of the body
 - severe headache or confusion 0
 - sudden problems with vision, speech, or balance (such as trouble speaking, difficulty walking, or dizziness) 0
- High blood pressure. REBLOZYL may cause an increase in your blood pressure. Your healthcare provider will check your blood pressure before you receive your REBLOZYL dose. Your healthcare provider may prescribe you medicine to treat high blood pressure or increase the dose of medicine you already take to treat high blood pressure. if you develop high blood pressure during treatment with REBLOZYL.
- Extramedullary Hematopoietic (EMH) Masses. EMH masses have happened in people with beta thalassemia ٠ during treatment with REBLOZYL. You may have a higher risk for developing EMH masses if you have a history of EMH masses, have had your spleen removed, have or have had enlarged spleen or liver, or have low hemoglobin levels. Your healthcare provider will monitor you before you start and during treatment with REBLOZYL. Call your healthcare provider or get medical help right away if you get any of these symptoms:
 - severe pain in the back 0
 - numbness, weakness or loss of voluntary movement in feet, legs, hands or arms 0
 - loss of bowel and bladder control 0

The most common side effects of REBLOZYL include:

- tiredness
- muscle or bone pain
- dizziness
- diarrhea
- stomach (abdominal) pain
- allergic reactions

- headache
- joint pain (arthralgia)
- nausea
- cough
- trouble breathing

REBLOZYL may cause fertility problems in females. This could affect your ability to become pregnant. Talk to your healthcare provider if this is a concern for you.

These are not all of the possible side effects of REBLOZYL.

Call your doctor for medical advice about side effects. You may report side effects to FDA at 1-800-FDA-1088.

General information about the safe and effective use of REBLOZYL.

Medicines are sometimes prescribed for purposes other than those listed in a Patient Information leaflet. You can ask your healthcare provider or pharmacist for information about REBLOZYL that is written for healthcare professionals.

What are the ingredients in REBLOZYL?

Active ingredient: luspatercept-aamt

Inactive ingredients: citric acid monohydrate, polysorbate 80, sucrose, and tri-sodium citrate dihydrate. For more information, go to www.REBLOZYL.com or call 1-888-423-5436.

Manufactured by: Celgene Corporation, a Bristol-Myers Squibb Company, 86 Morris Avenue, Summit, NJ 07901 REBLOZYL® is a registered trademark of Celgene Corporation, a Bristol-Myers Squibb Company.

REBPPI V4 09/2022

This Patient Information has been approved by the U.S. Food and Drug Administration.

Please see additional Important Safety Information on pages 8-10 and Patient Information for REBLOZYL on pages 17-18, access and print full Prescribing Information

REBLOZYL is a trademark of Celgene Corporation, a Bristol-Myers Squibb Company. Access Support is a registered trademark of Bristol-Myers Squibb Company. REBLOZYL is licensed from Merck & Co., Inc., Rahway, NJ, USA and its affiliates.

Revised: September 2022

