

# ONBOARDING GUIDE **Getting started with FABHALTA and available support** for you and your patients

#### INDICATION

FABHALTA is indicated for the treatment of adults with paroxysmal nocturnal hemoglobinuria (PNH).

**IMPORTANT SAFETY INFORMATION** 

#### WARNING: SERIOUS INFECTIONS CAUSED BY ENCAPSULATED BACTERIA

FABHALTA, a complement inhibitor, increases the risk of serious infections, especially those caused by encapsulated bacteria, such as Streptococcus pneumoniae, Neisseria meningitidis, and Haemophilus influenzae type b. Life-threatening and fatal infections with encapsulated bacteria have occurred in patients treated with complement inhibitors. These infections may become rapidly life-threatening or fatal if not recognized and treated early.

- vaccinations against encapsulated bacteria in patients receiving a complement inhibitor.

Because of the risk of serious infections caused by encapsulated bacteria, FABHALTA is available only through a restricted program under a Risk Evaluation and Mitigation Strategy (REMS) called the FABHALTA REMS.

Please click here for additional Important Safety Information. Please click here for full Prescribing Information, including Boxed WARNING and Medication Guide.





Getting REMS Certified



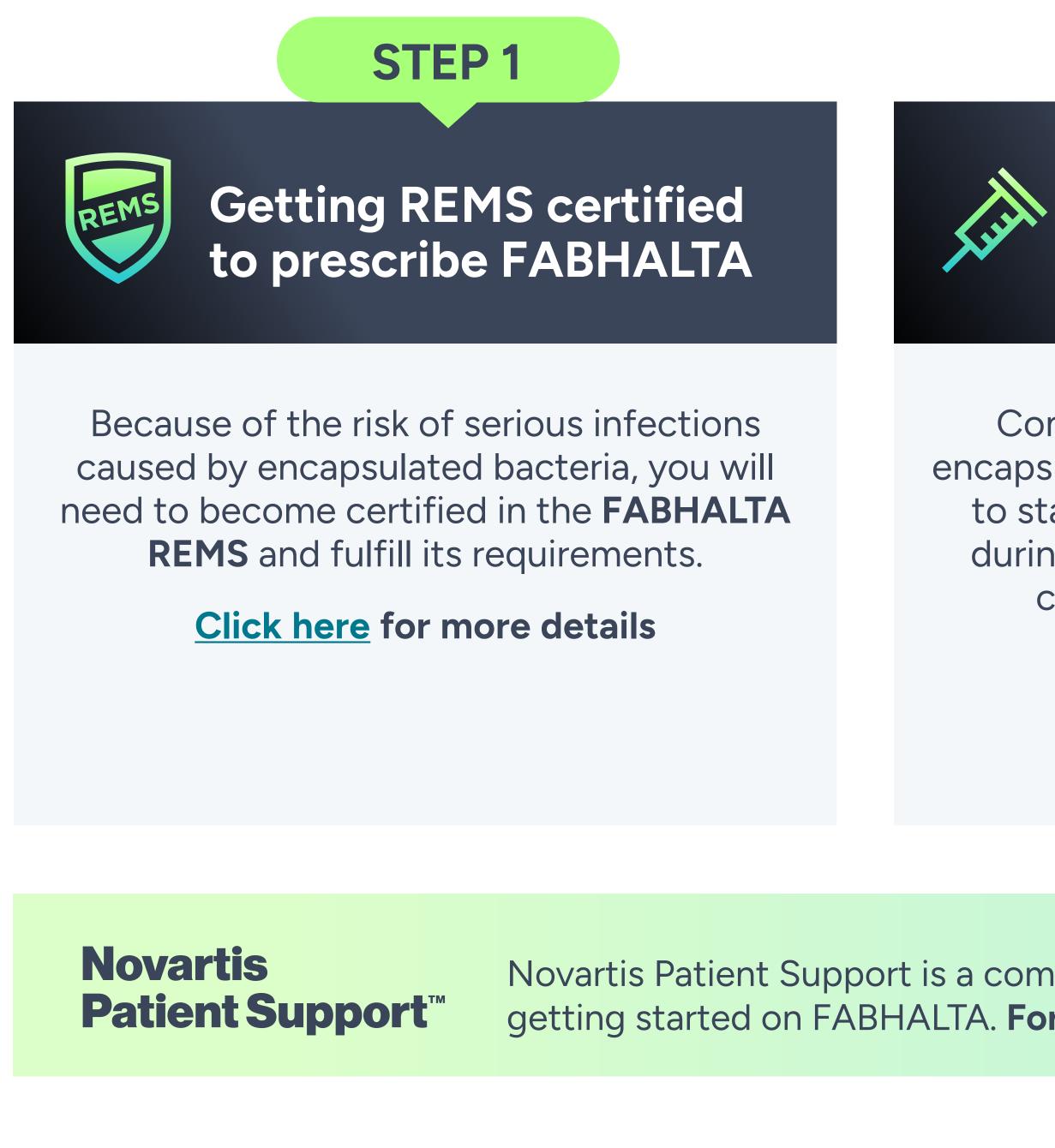
• Complete or update vaccinations for encapsulated bacteria at least 2 weeks prior to the first dose of FABHALTA, unless the risks of delaying therapy with FABHALTA outweigh the risk of developing a serious infection. Comply with the most current Advisory Committee on Immunization Practices (ACIP) recommendations for

• Patients receiving FABHALTA are at increased risk for invasive disease caused by encapsulated bacteria, even if they develop antibodies following vaccination. Monitor patients for early signs and symptoms of serious infections and evaluate immediately if infection is suspected.

Prescribing FABHALTA Important Safety Information

# Help your patients start their journey with FABHALTA

## Get your patients started on FABHALTA with these 3 steps<sup>1</sup>



ACIP, Advisory Committee on Immunization Practices; REMS, Risk Evaluation and Mitigation Strategy.

#### **IMPORTANT SAFETY INFORMATION (continued)** CONTRAINDICATIONS

- Patients with serious hypersensitivity to FABHALTA or any of the excipients.
- or Haemophilus influenzae type b.

#### Please click here for additional Important Safety Information. Please click here for full Prescribing Information, including Boxed WARNING and Medication Guide.







## **STEP 2**

**Complete or update** vaccinations before starting treatment with FABHALTA



Complete or update vaccinations for encapsulated bacteria at least 2 weeks prior to starting FABHALTA, and readminister during treatment according to the most current ACIP recommendations.

**Click here for more details** 

**Click here for more details** 

Novartis Patient Support is a comprehensive program that offers assistance to health care professionals and patients for getting started on FABHALTA. For more information, please click here.

• For initiation in patients with unresolved serious infection caused by encapsulated bacteria, including Streptococcus pneumoniae, Neisseria meningitidis,

Vaccination Requirements Prescribing FABHALTA Support Important Safety Information

## **STEP 3**

**Prescribing FABHALTA** through a limited network of specialty pharmacies

Once you are ready to prescribe FABHALTA, inform your patient which specialty pharmacy will be dispensing their FABHALTA prescription.

**Get started** on **REMS** 

Get REMS certified





# **Getting REMS certified to prescribe FABHALTA**

Because of the risk of serious infections caused by encapsulated bacteria, you will need to become certified in the FABHALTA REMS and fulfill its requirements before you can prescribe FABHALTA.<sup>1</sup>

FABHALTA, a complement inhibitor, increases a patient's susceptibility to serious, life-threatening, or fatal infections caused by encapsulated bacteria, including Streptococcus pneumoniae, Neisseria meningitidis (caused by any serogroup, including nongroupable strains), and Haemophilus influenzae type b. Life-threatening and fatal infections with encapsulated bacteria have occurred in both vaccinated and unvaccinated patients treated with complement inhibitors. These infections may become rapidly life-threatening or fatal if not recognized and treated early. The initiation of FABHALTA is contraindicated in patients with unresolved serious infections caused by encapsulated bacteria.<sup>1</sup>

#### To enroll in the REMS:

## Review

the FABHALTA Prescribing Information, Health Care Provider Brochure, Patient Safety Guide, and Patient Safety Card.

## Submit

the completed Prescriber Enrollment form to the FABHALTA REMS at www.FABHALTA-REMS.com, or by fax to 1-877-206-3255.

For more information, view the full REMS program details and requirements at <u>www.FABHALTA-REMS.com</u>. For any certification questions, contact the REMS Coordinating Center at 1-833-99FABHA.

#### **IMPORTANT SAFETY INFORMATION (continued)** WARNINGS AND PRECAUTIONS **Serious Infections Caused by Encapsulated Bacteria**

Please click here for additional Important Safety Information. Please click here for full Prescribing Information, including Boxed WARNING and Medication Guide.





Getting REMS Certified Vaccination Requirements Prescribing FABHALTA Important Safety Information Support

#### **After enrollment**<sup>1</sup>:

## Counsel

patients about the risk of serious infections caused by encapsulated bacteria, the need for vaccinations, and the early signs and symptoms of serious infections.

At all times during your patient's journey, a health care provider should report suspected adverse reactions, including cases of serious bacterial infection, and the patient's clinical outcomes, to Novartis Pharmaceuticals Corporation at 1-888-669-6682 or FDA at 1-800-FDA-1088 or www.fda.gov/medwatch.

• FABHALTA, a complement inhibitor, increases a patient's susceptibility to serious, life-threatening, or fatal infections caused by encapsulated bacteria, including Streptococcus pneumoniae, Neisseria meningitidis (caused by any serogroup, including nongroupable strains), and Haemophilus influenzae type b. Life-threatening and fatal infections with encapsulated bacteria have occurred in both vaccinated and unvaccinated patients treated with complement inhibitors. The initiation of FABHALTA is contraindicated in patients with unresolved serious infections caused by encapsulated bacteria.

### Provide

patients with REMS educational materials and the Patient Safety Card. Instruct patients to always carry this card with them during treatment and for 2 weeks following the last dose of FABHALTA.

Get started on REMS

**Get REMS** certified





FABHALTA, a complement inhibitor, increases a patient's susceptibility to serious, life-threatening, or fatal infections caused by encapsulated bacteria. Comply with the most current ACIP recommendations for vaccinations against encapsulated bacteria in patients receiving a complement inhibitor.<sup>1</sup>

## It is REQUIRED that you vaccinate your patients against<sup>1</sup>:

Streptococcus pneumoniae

Complete or update vaccination against encapsulated bacteria at least 2 weeks prior to starting FABHALTA, unless the risks of delaying FABHALTA outweigh the risk of developing a serious infection.<sup>1</sup>

If urgent FABHALTA therapy is indicated in a patient who is not up to date with vaccines against encapsulated bacteria, provide the patient with antibacterial drug prophylaxis and administer these vaccines as soon as possible. For additional details on antibacterial drug prophylaxis, please see the FABHALTA Prescribing Information, Warnings and Precautions (Section 5.1)

For more information, refer to the most current ACIP guidelines at <u>www.cdc.gov/acip-recs/hcp/vaccine-specific/</u>.

#### **IMPORTANT SAFETY INFORMATION (continued)** WARNINGS AND PRECAUTIONS (continued) **Serious Infections Caused by Encapsulated Bacteria (continued)**

prescribing information.







# **Complete or update vaccinations before starting treatment with FABHALTA**

Neisseria meningitidis (serogroups A, C, W, Y, and B)

## **During treatment with FABHALTA<sup>1</sup>**:

As vaccination does not eliminate the risk of serious encapsulated bacterial infections, closely monitor patients for early signs and symptoms. Inform patients of these signs and symptoms, and instruct patients to seek immediate medical care if they occur.

- infection may rapidly become life-threatening or fatal if not
- treatment for serious infections, depending on the risks of interrupting treatment for PNH
- While on therapy, patients are required to be revaccinated as needed

• Complete or update vaccination against encapsulated bacteria at least 2 weeks prior to the start of FABHALTA, according to the current ACIP recommendations for patients receiving a complement inhibitor. Revaccinate patients in accordance with ACIP recommendations considering the duration of therapy with FABHALTA. Note that ACIP recommends an administration schedule in patients receiving complement inhibitors that differs from the administration schedule in the vaccine

#### Please click here for additional Important Safety Information. Please click here for full Prescribing Information, including Boxed WARNING and Medication Guide.

**Vaccination Requirements** Prescribing FABHALTA Important Safety Information Support

• Evaluate and treat immediately if infection is suspected, as serious recognized and treated early. Promptly treat known infections

Consider interruption of FABHALTA in patients who are receiving

#### Required vaccinations before starting FABHALTA

ACIP pneumococcal vaccination recommendations

ACIP meningococcal vaccination recommendations





## Pneumococcal vaccination in adults with an immunocompromising condition ( $\geq$ 19-49 years of age)<sup>2,\*</sup> **REQUIRED VACCINATIONS WHILE ON FABHALTA**

Vaccine received at any age	CAPVAXIVE <sup>™</sup> (PCV21)
None/unknown or PREVNAR <sup>®</sup> (PCV7) only	1 dose
Prior PNEUMOVAX® 23 (PPSV23) only	<b>dose</b> at least 1 year since last PNEUMOVAX® 23 (PPSV23
Prior PREVNAR® 13 (PCV13) only	1 dose
Prior PREVNAR® 13 (PCV13) + 1 dose of PNEUMOVAX® 23 (PPSV23) <sup>‡</sup>	<b>1</b> dose at least 5 years after the last pneumococcal vacci
Prior PREVNAR® 13 (PCV13) + 2 doses of PNEUMOVAX® 23 (PPSV23) <sup>§,II</sup>	<b>1</b> dose at least 5 years after the last pneumococcal vacci

\*Review the pneumococcal vaccine recommendations again for patients turning 50 years of age. <sup>+</sup>For adults who have received PCV15 but have not completed their recommended pneumococcal vaccine series with PPSV23, 1 dose of PCV21 or PCV20 may be used if PPSV23 is not available. <sup>‡</sup>PPSV23 given at age  $\geq$ 19 and <65 years.

<sup>§</sup>Received at  $\geq 65$  years of age, or 2 doses of PPSV23 for individuals between 19 and 64 years of age. **IMPORTANT SAFETY INFORMATION (continued)** 

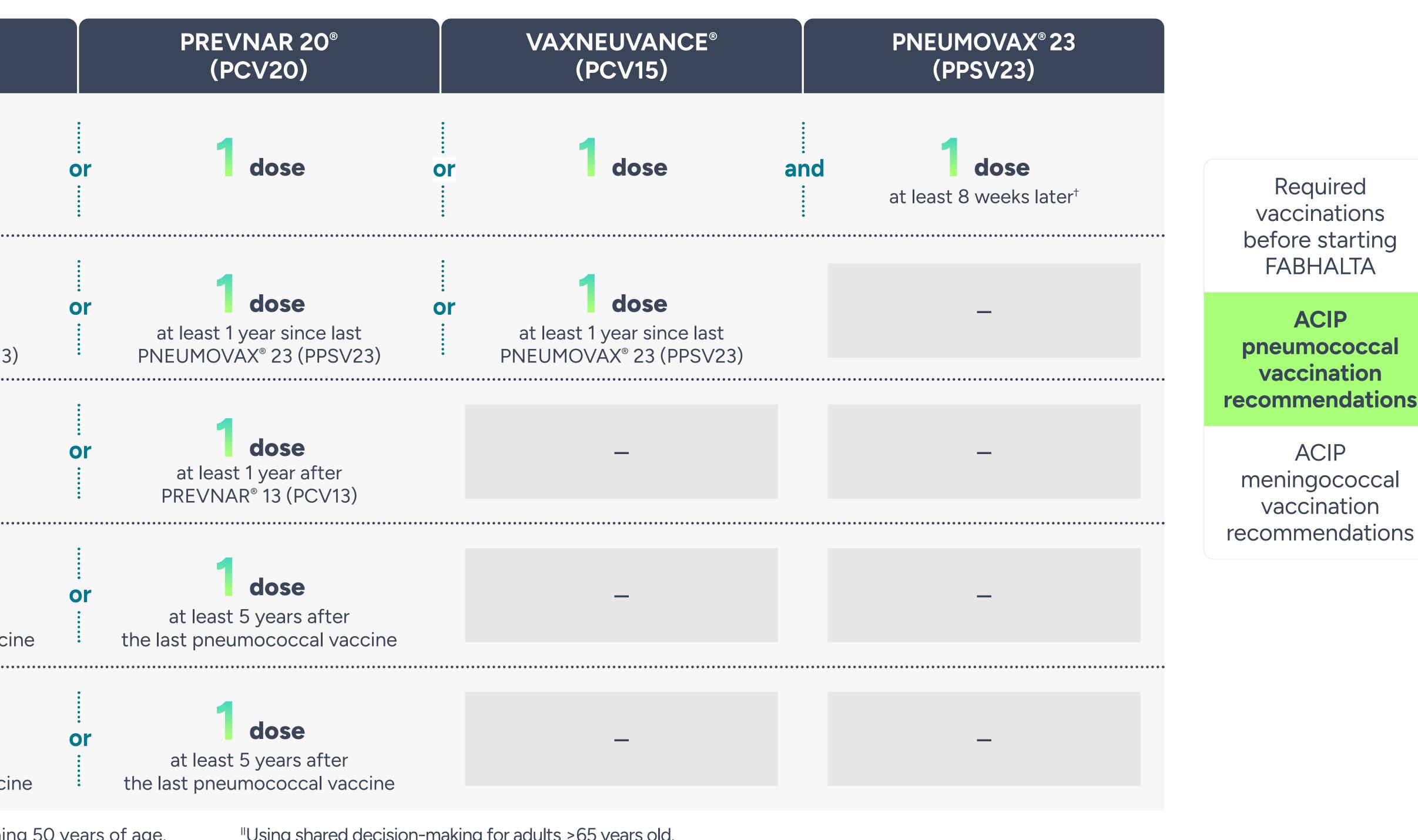
WARNINGS AND PRECAUTIONS (continued) **Serious Infections Caused by Encapsulated Bacteria (continued)** 

If urgent FABHALTA therapy is indicated in a patient who is not up to date with vaccines against encapsulated bacteria according to ACIP recommendations, provide the patient with antibacterial drug prophylaxis and administer these vaccines as soon as possible.









"Using shared decision-making for adults ≥65 years old. PCV7, 7-valent pneumococcal conjugate vaccine; PCV13, 13-valent pneumococcal conjugate vaccine; PCV15, 15-valent pneumococcal conjugate vaccine; PCV20, 20-valent pneumococcal conjugate vaccine; PCV21, 21-valent pneumococcal conjugate vaccine; PPSV23, 23-valent pneumococcal polysaccharide vaccine. The brand names mentioned on this page are the property of their respective trademark owners.

Please click here for additional Important Safety Information. Please click here for full Prescribing Information, including Boxed WARNING and Medication Guide.

Prescribing FABHALTA Vaccination Requirements Support Important Safety Information





## Meningococcal vaccination in adults with complement deficiencies<sup>3,4,5</sup> **REQUIRED VACCINATIONS WHILE ON FABHALTA**

#### MENACTRA<sup>®</sup>, MENVEO<sup>®</sup>, or MENQUADFI<sup>®</sup> (MenACWY)<sup>3</sup>



Single-dose booster every 5 years if the patient is still at increased risk while on FABHALTA

#### Note: BEXSERO<sup>®</sup> (MenB-4C) and TRUMENBA<sup>®</sup> (MenB-FHbp) are not interchangeable (use same product for all doses in series).<sup>3</sup>

\*If Dose 2 was administered at least 6 months after Dose 1, then Dose 3 is not needed. If Dose 3 is administered earlier than 4 months after Dose 2, then Dose 4 should be administered at least 4 months after Dose 3.<sup>3</sup>

MenACWY, serogroups A, C, W, and Y meningococcal; MenB, serogroup B meningococcal. The brand names mentioned on this page are the property of their respective trademark owners.

#### **IMPORTANT SAFETY INFORMATION (continued)** WARNINGS AND PRECAUTIONS (continued) **Serious Infections Caused by Encapsulated Bacteria (continued)**

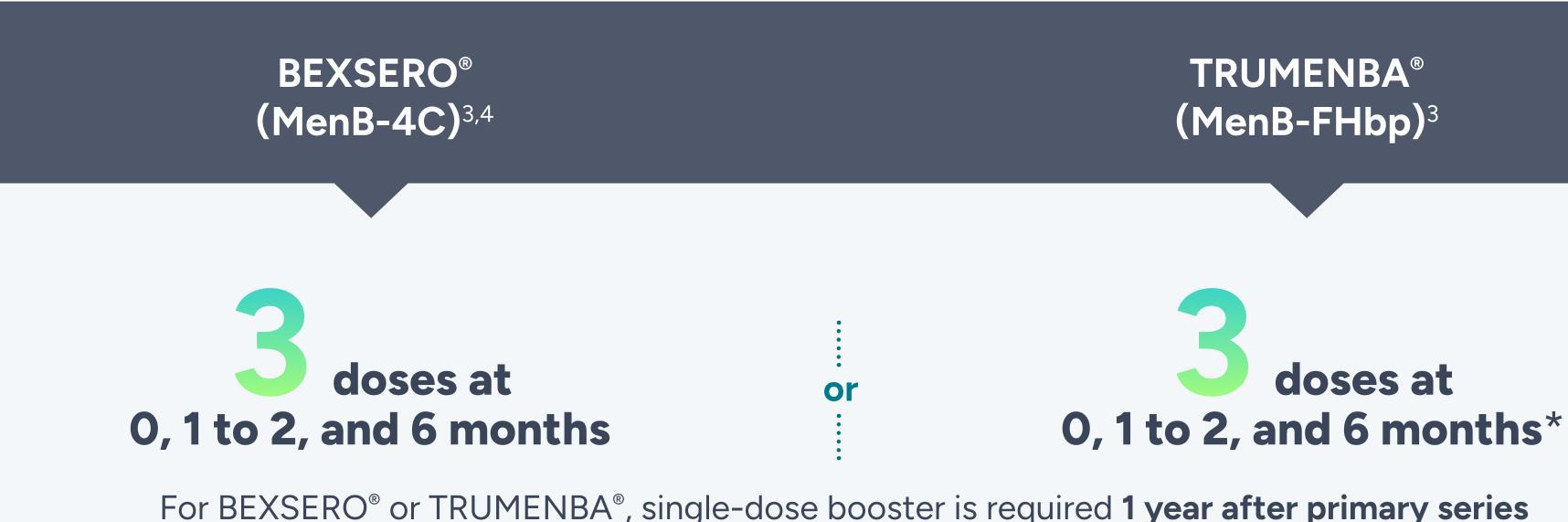
The benefits and risks of treatment with FABHALTA, as well as the benefits and risks of antibacterial drug prophylaxis in unvaccinated or vaccinated patients, must be considered against the known risks for serious infections caused by encapsulated bacteria.







# **ACIP vaccination recommendations (continued)**



For BEXSERO<sup>®</sup> or TRUMENBA<sup>®</sup>, single-dose booster is required **1 year after primary series** and every 2 to 3 years thereafter if the patient is still at increased risk while on FABHALTA

**PENBRAYA<sup>™</sup> (MenACWY-TT/MenB-FHbp)** may be administered when MenACWY and MenB vaccinations are indicated at the same visit, provided the patient has not previously received MenB-4C and is not within 6 months of prior PENBRAYA<sup>™</sup> vaccination.<sup>5,†</sup>

> <sup>+</sup>PENBRAYA<sup>M</sup> (MenACWY-TT/MenB-FHbp) may be administered to people aged  $\geq$ 10 years when both a quadrivalent meningococcal conjugate vaccine (MenACWY) and meningococcal B vaccine (MenB) are indicated at the same visit. Persons at increased risk for meningococcal disease who have received a dose of PENBRAYA<sup>™</sup> (MenACWY-TT/MenB-FHbp) and are recommended to receive additional doses of MenACWY and MenB within 6 months should receive separate MenACWY and MenB-FHbp vaccines, rather than an additional dose of PENBRAYA<sup>™</sup> (MenACWY-TT/MenB-FHbp). If PENBRAYA<sup>™</sup> (MenACWY-TT/MenB-FHbp) is administered and subsequent doses of MenB are required within 6 months, TRUMENBA<sup>®</sup> should be administered.<sup>5</sup>

Please click here for additional Important Safety Information. Please click here for full Prescribing Information, including Boxed WARNING and Medication Guide.

Vaccination Requirements

Support

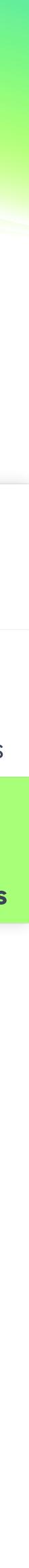
Prescribing FABHALTA Important Safety Information



Required vaccinations before starting treatment

ACIP pneumococcal vaccination recommendations

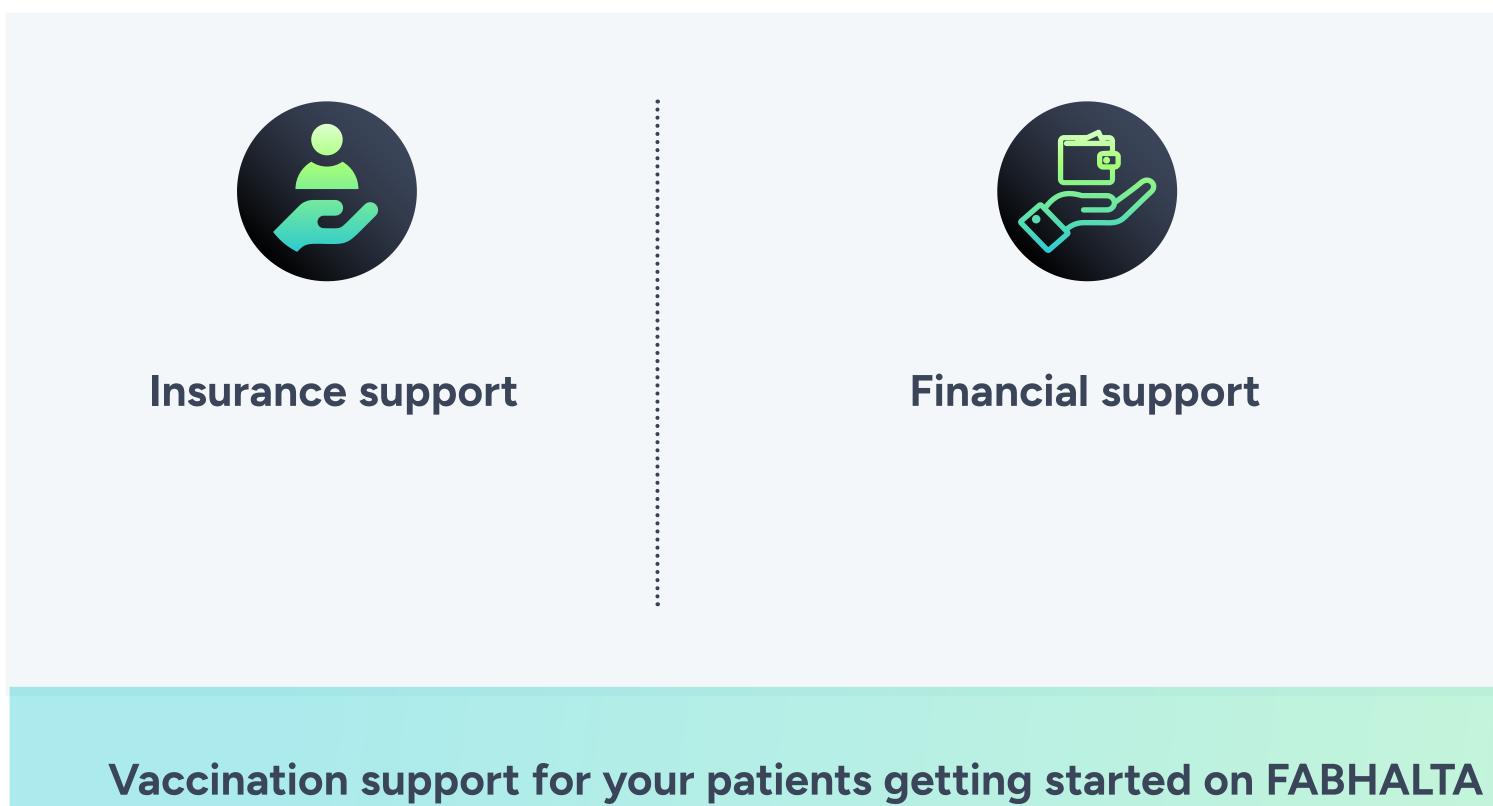
ACIP meningococcal vaccination recommendations



## **NOVARTIS PATIENT SUPPORT**<sup>TM</sup> A dedicated team for you and your patients

Novartis Patient Support is a comprehensive program that offers assistance to health care professionals and patients for getting started on FABHALTA. Support is available through a dedicated Novartis Patient Support team to help patients starting on FABHALTA.

## Novartis Patient Support can help support your eligible patients every step of the way



- with a dedicated Novartis Patient Support team
- through Friday, 8:00 AM-8:00 PM ET, excluding holidays for more information

#### **IMPORTANT SAFETY INFORMATION (continued)** WARNINGS AND PRECAUTIONS (continued) **Serious Infections Caused by Encapsulated Bacteria (continued)**









#### Vaccination support

Our dedicated Novartis Patient Support team offers support to help your patients locate vaccinations.

Our dedicated Novartis Patient Support team offers support to help your patients locate vaccinations You can opt-in to Vaccination Support on the FABHALTA (iptacopan) Start Form to further understand what your patient may be eligible for

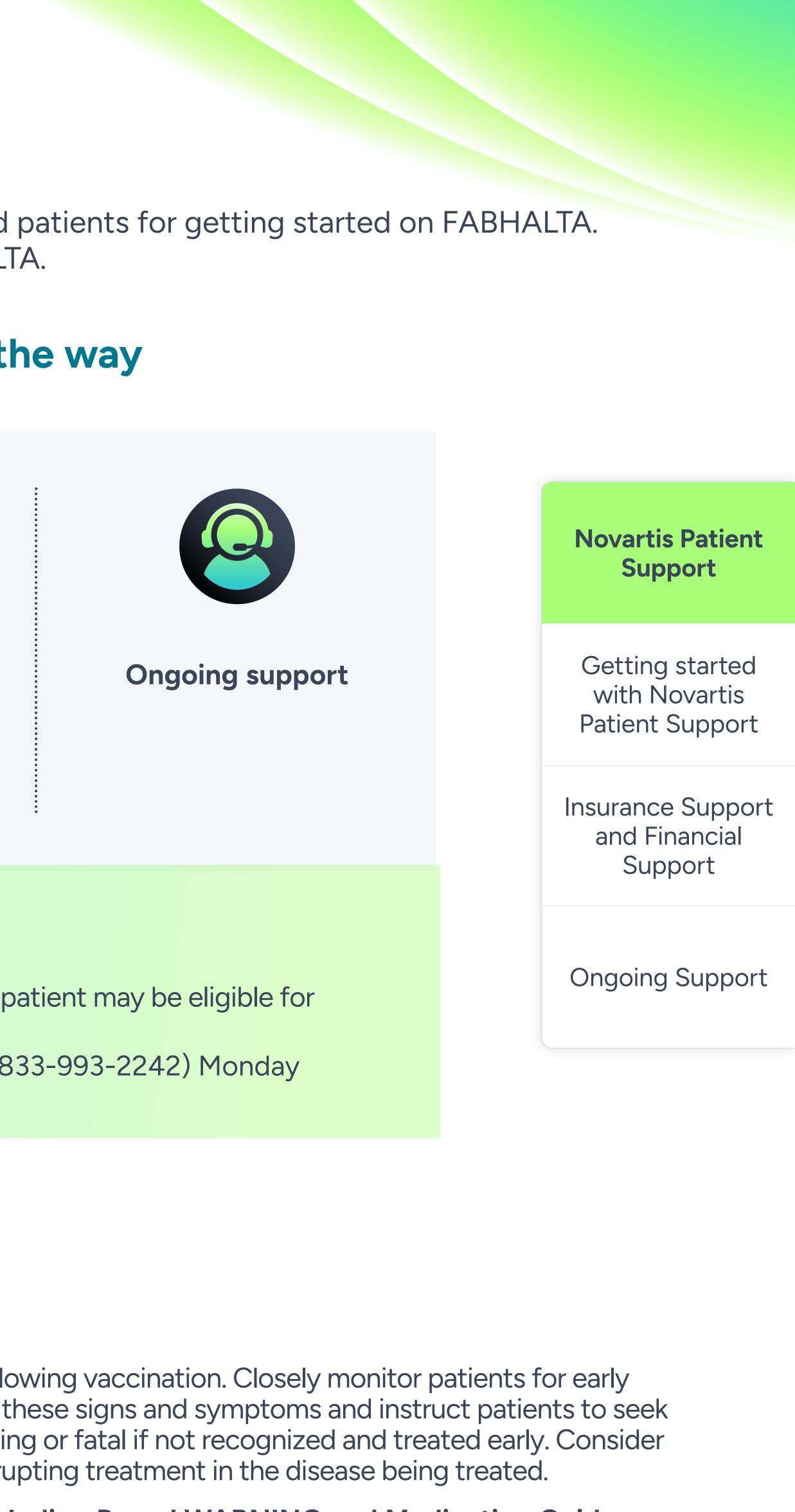
Vaccination Support T&Cs Limitations Apply. Please contact Novartis Patient Support at 1-833-99FABHA (1-833-993-2242) Monday

• Vaccination does not eliminate the risk of serious encapsulated bacterial infections, despite development of antibodies following vaccination. Closely monitor patients for early signs and symptoms of serious infection and evaluate patients to seek inform patients of these signs and symptoms and instruct patients to seek immediate medical care if they occur. Promptly treat known infections. Serious infections. Serious infections. Serious infections. interruption of FABHALTA in patients who are undergoing treatment for serious infections, depending on the risks of interrupting treatment in the disease being treated.

Please click here for additional Important Safety Information. Please click here for full Prescribing Information, including Boxed WARNING and Medication Guide.

Vaccination Requirements Support





## **3 steps for getting patients started with Novartis Patient Support**

## How to enroll:



**Download the Start Form at** www.fabhalta-hcp.com

## **Questions?**

For more information, call Novartis Patient Support at 1-833-99FABHA (1-833-993-2242), Monday through Friday, 8:00 AM-8:00 PM ET.

#### **IMPORTANT SAFETY INFORMATION (continued)** WARNINGS AND PRECAUTIONS (continued) FABHALTA REMS

- and for 2 weeks following last dose of FABHALTA.

Please click here for additional Important Safety Information. Please click here for full Prescribing Information, including Boxed WARNING and Medication Guide.





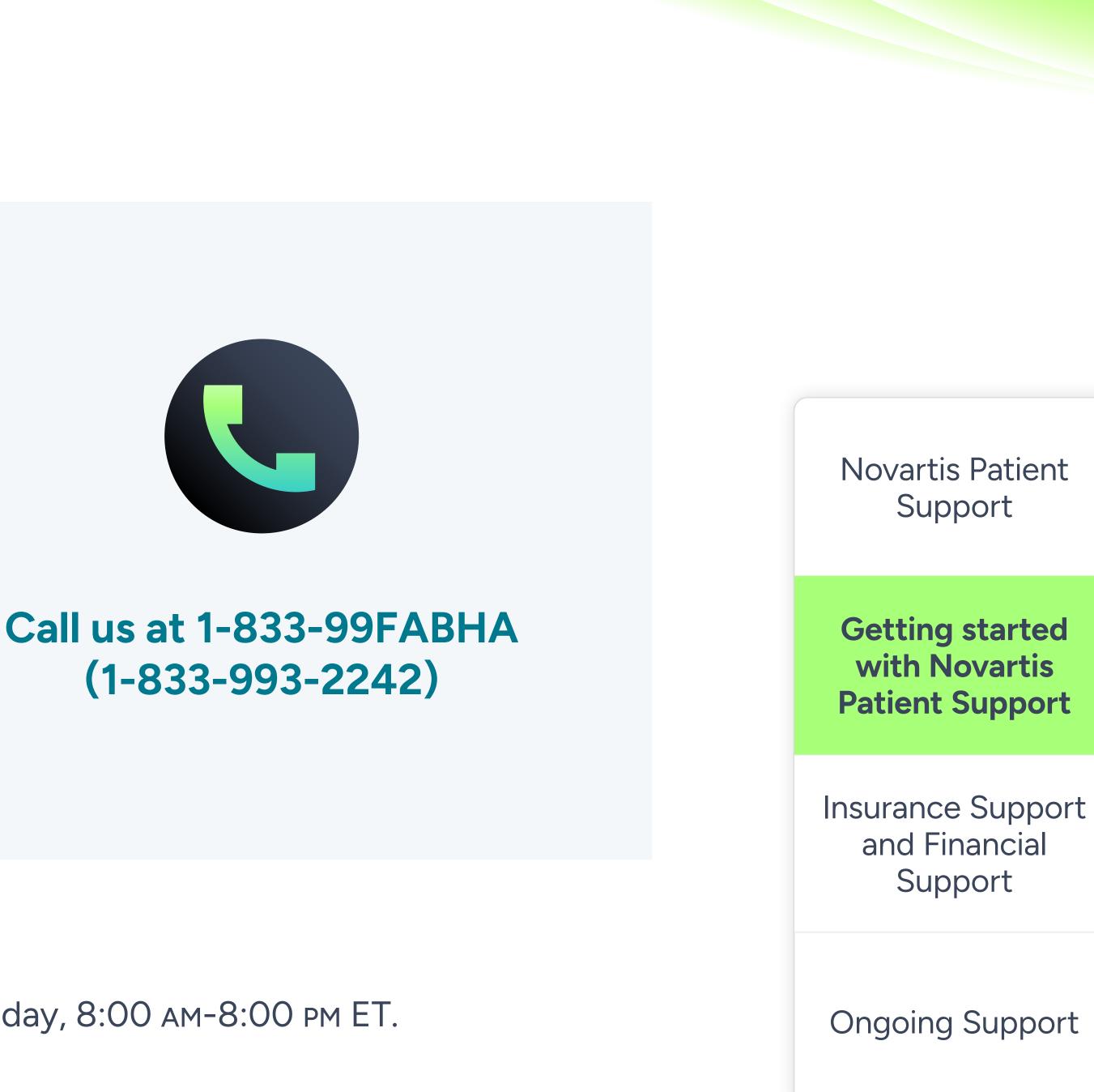




**Complete the Start Form,** capture consent, and submit

• FABHALTA is available only through a restricted program under a REMS, because of the risk of serious infections caused by encapsulated bacteria. • Under the FABHALTA REMS, prescribers must enroll in the program. Prescribers must counsel patients about the risks, signs, and symptoms of serious infections caused by encapsulated bacteria, provide patients with the REMS educational materials, ensure patients are vaccinated against encapsulated bacteria, prescribe antibacterial drug prophylaxis if patients' vaccine status is not up to date and treatment must be started urgently, and provide instructions to always carry the Patient Safety Card during treatment

> Prescribing FABHALTA Vaccination Requirements Support Important Safety Information







Your dedicated Novartis Patient Support team will work with you to help identify financial support options.

## **Bridge Program**

#### Your patients may be eligible for up to 12 months of FABHALTA (iptacopan) for free while coverage is pursued.

- Novartis reserves the right to rescind, revoke, or amend this Program without notice

## **Co-Pay Plus**

#### Inform your eligible patients about Co-Pay Plus. Privately insured patients may pay as little as \$0 for FABHALTA.

- in a calendar year
- including applicable co-payments, coinsurance, and deductibles
- their health plan related to the use of the Program
- the right to rescind, revoke, or amend the Program and discontinue support at any time without notice

#### **IMPORTANT SAFETY INFORMATION (continued)** WARNINGS AND PRECAUTIONS (continued) **FABHALTA REMS (continued)**

Further information is available by telephone: 1-833-993-2242 or online at www.FABHALTA-REMS.com.

#### Please click here for additional Important Safety Information. Please click here for full Prescribing Information, including Boxed WARNING and Medication Guide.







# **Insurance support and financial support**

• Limitations apply. Patients with commercial insurance, a valid prescription for FABHALTA, and a denial of insurance coverage based on a prior authorization requirement may receive a monthly maintenance dose for up to 12 months or until insurance coverage approval, whichever occurs first

• Not available to patients whose medications are reimbursed in whole or in part by Medicare, Medicaid, TRICARE, VA, DoD, or any other federal or state program, or where prohibited by law. A prior authorization and/or appeal of coverage denial must be submitted within 90 days to remain in the program

• No purchase necessary. Program is not health insurance, nor is participation a guarantee of insurance coverage. Additional restrictions may apply.

• Limitations apply. Patients with commercial insurance coverage for FABHALTA may receive up to \$20,000 in annual co-pay benefits for the cost of FABHALTA and up to \$1,000 for qualifying vaccination costs (excluding administrative fees). Patient is responsible for any costs once limit is reached

• Program not valid (i) under Medicare, Medicaid, TRICARE, VA, DoD, or any other federal or state health care program, (ii) where patient is not using insurance coverage at all, (iii) where the patient's insurance plan reimburses for the entire cost of the drug, or (iv) where product is not covered by patient's insurance. The value of this program is exclusively for the benefit of patients and is intended to be credited towards patient out-of-pocket obligations and maximums,

• Patient may not seek reimbursement for the value received from this program from other parties, including any health insurance program or plan, flexible spending account, or health care savings account. Patient is responsible for complying with any applicable limitations and requirements of

• Valid only in the United States, Puerto Rico, and select territories. Void where prohibited by law. Additional restrictions may apply. This Program is not health insurance. Program may not be combined with any third-party rebate, coupon, or offer. Proof of purchase may be required. Novartis reserves

Prescribing FABHALTA Vaccination Requirements Support Important Safety Information

#### Novartis Patient Support

Getting started with Novartis Patient Support

**Insurance Support** and Financial Support

Ongoing Support





## **Novartis Patient Support**

#### Novartis Patient Support provides patients with ongoing help to start, stay, and save on their FABHALTA treatment plan, including:

- Information on financial support options
- Help navigating health care changes
- Tips for setting up a routine that can help patients stay on track with their medication dosing
- Resources about living with PNH, taking FABHALTA, and finding supportive communities
- Support to answer lifestyle questions

#### **IMPORTANT SAFETY INFORMATION (continued)** WARNINGS AND PRECAUTIONS (continued) Monitoring of PNH Manifestations After FABHALTA Discontinuation

- FABHALTA is necessary, consider alternative therapy.

#### Please click here for additional Important Safety Information. Please click here for full Prescribing Information, including Boxed WARNING and Medication Guide.





Getting REMS Certified Vaccination Requirements Prescribing FABHALTA Important Safety Information Support

• After discontinuing FABHALTA, closely monitor patients for at least 2 weeks after the last dose for signs and symptoms of hemolysis. These signs include elevated lactate dehydrogenase (LDH) levels along with sudden decrease in hemoglobin or PNH clone size, fatigue, hemoglobinuria, abdominal pain, dyspnea, major adverse vascular events (such as thrombosis, stroke, and myocardial infarction), dysphagia, or erectile dysfunction. If discontinuation of

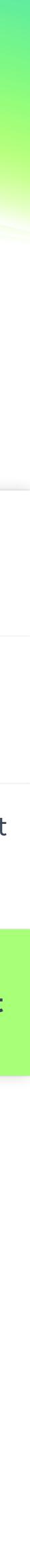
• If hemolysis occurs after discontinuation of FABHALTA, consider restarting treatment with FABHALTA, if appropriate, or initiating another treatment for PNH.

Novartis Patient Support

Getting started with Novartis Patient Support

Insurance Support and Financial Support

**Ongoing Support** 



# **Prescribing FABHALTA through a limited network of specialty pharmacies** R

Once you are ready to prescribe FABHALTA, inform your patient which specialty pharmacy will be dispensing their FABHALTA prescription, and tell them to expect a phone call to arrange delivery of their prescription. Pharmacies that dispense FABHALTA must be certified in the FABHALTA REMS and must verify that prescribers are certified.<sup>1</sup>



## Onco360®

- WEBSITE onco360.com
- PHONE 1-877-662-6633
- FAX
- **HOURS OF OPERATION** 24/7

#### **IMPORTANT SAFETY INFORMATION (continued)** WARNINGS AND PRECAUTIONS (continued) Hyperlipidemia

- FABHALTA may increase total cholesterol, LDL cholesterol, and serum triglycerides.
- and 1 patient worsened from baseline grade 1 to grade 2.







# **ONCOLOGY PHARMACY**

1-877-662-6355

# Biologics By McKesson

## **Biologics by McKesson**

- PHONE
- FAX
- **HOURS OF OPERATION** 24/7

Novartis does not recommend or require the use of any particular pharmacy.

• Of 88 FABHALTA-treated patients who had normal total cholesterol at baseline, 31 developed grade 1 hypercholesterolemia during the randomization or core treatment period

Please click here for additional Important Safety Information. Please click here for full Prescribing Information, including Boxed WARNING and Medication Guide.

Vaccination Requirements **Prescribing FABHALTA** Important Safety Information Support



WEBSITE <u>biologics.mckesson.com</u>

1-800-850-4306

1-800-823-4506

# Indication and Important Safety Information

#### INDICATION

FABHALTA is indicated for the treatment of adults with paroxysmal nocturnal hemoglobinuria (PNH).

#### **IMPORTANT SAFETY INFORMATION**

#### WARNING: SERIOUS INFECTIONS CAUSED BY ENCAPSULATED BACTERIA

FABHALTA, a complement inhibitor, increases the risk of serious infections, especially those caused by encapsulated bacteria, such as Streptococcus pneumoniae, Neisseria meningitidis, and Haemophilus influenzae type b. Life-threatening and fatal infections with encapsulated bacteria have occurred in patients treated with complement inhibitors. These infections may become rapidly life-threatening or fatal if not recognized and treated early.

- vaccinations against encapsulated bacteria in patients receiving a complement inhibitor.

Because of the risk of serious infections caused by encapsulated bacteria, FABHALTA is available only through a restricted program under a Risk Evaluation and Mitigation Strategy (REMS) called the FABHALTA REMS.

#### **CONTRAINDICATIONS**

- Patients with serious hypersensitivity to FABHALTA or any of the excipients.
- *influenzae* type b.

#### WARNINGS AND PRECAUTIONS **Serious Infections Caused by Encapsulated Bacteria**

- with unresolved serious infections caused by encapsulated bacteria.

#### **ADDITIONAL IMPORTANT SAFETY INFORMATION**

#### Please <u>click here</u> for full Prescribing Information, including Boxed WARNING and Medication Guide.





Getting REMS Certified

• Complete or update vaccinations for encapsulated bacteria at least 2 weeks prior to the first dose of FABHALTA, unless the risks of delaying therapy with FABHALTA outweigh the risk of developing a serious infection. Comply with the most current Advisory Committee on Immunization Practices (ACIP) recommendations for

• Patients receiving FABHALTA are at increased risk for invasive disease caused by encapsulated bacteria, even if they develop antibodies following vaccination. Monitor patients for early signs and symptoms of serious infections and evaluate immediately if infection is suspected.

• For initiation in patients with unresolved serious infection caused by encapsulated bacteria, including Streptococcus pneumoniae, Neisseria meningitidis, or Haemophilus

• FABHALTA, a complement inhibitor, increases a patient's susceptibility to serious, life-threatening, or fatal infections caused by encapsulated bacteria, including Streptococcus pneumoniae, Neisseria meningitidis (caused by any serogroup, including nongroupable strains), and Haemophilus influenzae type b. Life-threatening and fatal infections with encapsulated bacteria have occurred in both vaccinated and unvaccinated with complement inhibitors. The initiation of FABHALTA is contraindicated in patients

• Complete or update vaccination against encapsulated bacteria at least 2 weeks prior to the start of FABHALTA, according to the current ACIP recommendations for patients receiving a complement inhibitor. Revaccinate patients in accordance with ACIP recommendations considering the duration of therapy with FABHALTA. Note that ACIP recommends an administration schedule in patients receiving complement inhibitors that differs from the administration schedule in the vaccine prescribing information. If urgent FABHALTA therapy is indicated in a patient who is not up to date with vaccines against encapsulated bacteria according to ACIP recommendations, provide the patient with antibacterial drug prophylaxis and administer these vaccines as soon as possible. The benefits and risks of antibacterial drug prophylaxis in unvaccinated or vaccinated bacteria.

• Vaccination does not eliminate the risk of serious encapsulated bacterial infections, despite development of antibodies following vaccination. Closely monitor patients for early signs and symptoms of serious infection and evaluate patients immediately if an infection is suspected. Inform patients of these signs and symptoms and instruct patients to seek immediate medical care if they occur. Promptly treat known infections. Serious infections. Serious infections. Serious infections. interruption of FABHALTA in patients who are undergoing treatment for serious infections, depending on the risks of interrupting treatment in the disease being treated.

**Prescribing FABHALTA** 

Important Safety Information

# Important Safety Information (continued)

#### WARNINGS AND PRECAUTIONS (continued) FABHALTA REMS

- treatment and for 2 weeks following last dose of FABHALTA.
- Further information is available by telephone: 1-833-993-2242 or online at <u>www.FABHALTA-REMS.com</u>.
- Monitoring of PNH Manifestations After FABHALTA Discontinuation

#### Hyperlipidemia

- FABHALTA may increase total cholesterol, LDL cholesterol, and serum triglycerides.
- period and 1 patient worsened from baseline grade 1 to grade 2.
- patients experienced an increase in triglycerides from grade 1 to grade 2.

#### **ADVERSE REACTIONS**

infection, nausea, and rash.

#### **DRUG INTERACTIONS**

- response and discontinue use of the CYP2C8 inducer if loss of efficacy of FABHALTA is evident.
- Coadministration with a strong CYP2C8 inhibitor is not recommended.

#### **USE IN SPECIFIC POPULATIONS**

- moderate (Child-Pugh class B) hepatic impairment.

#### Please <u>click here</u> for full Prescribing Information, including Boxed WARNING and Medication Guide.







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• After discontinuing FABHALTA, closely monitor patients for at least 2 weeks after the last dose for signs and symptoms of hemolysis. These signs include elevated lactate dehydrogenase (LDH) levels along with sudden decrease in hemoglobinuria, abdominal pain, dyspnea, major adverse vascular events (such as thrombosis, stroke, and myocardial infarction), dysphagia, or erectile dysfunction. If discontinuation of FABHALTA is necessary, consider alternative therapy. • If hemolysis occurs after discontinuation of FABHALTA, consider restarting treatment with FABHALTA, if appropriate, or initiating another treatment for PNH.

• Of 88 FABHALTA-treated patients who had normal total cholesterol at baseline, 31 developed grade 1 hypercholesterolemia during the randomization or core treatment

• Of 96 FABHALTA-treated patients with LDL cholesterol  $\leq$  130 mg/dL at baseline during the randomization or core treatment period, 14 patients developed LDL cholesterol > 130-160 mg/dL, 6 patients developed LDL cholesterol > 160-190 mg/dL and 4 patients developed LDL cholesterol > 190 mg/dL.

• Of 89 FABHALTA-treated patients with normal triglycerides during the randomization or core treatment period, 22 patients developed grade 1 elevated triglycerides. Three

• Of the 102 FABHALTA-treated patients in APPLY-PNH and APPOINT-PNH, 2 patients required cholesterol-lowering medications. • Monitor serum lipid parameters periodically during treatment with FABHALTA and initiate cholesterol-lowering medications, if indicated.

• The most common adverse reactions (>10%) in adults with PNH receiving FABHALTA were headache, nasopharyngitis, diarrhea, abdominal pain, bacterial infection, viral

• Concomitant use of CYP2C8 inducers (eg, rifampin) may decrease iptacopan exposure, which may result in loss of or reduced efficacy of FABHALTA. Monitor the clinical

• Concomitant use of strong CYP2C8 inhibitors (eg, gemfibrozil) may increase iptacopan exposure, which may result in increased risk for adverse reactions with FABHALTA.

• Because of the potential for serious adverse reactions in a breastfeeding should be discontinued during treatment and for 5 days after the final dose. • FABHALTA is not recommended in patients with severe hepatic impairment (Child-Pugh class C). No dose adjustment is required for patients with mild (Child-Pugh class A) or

**Prescribing FABHALTA** 

Important Safety Information



## HELP PATIENTS GET STARTED ON FABHALTA<sup>1</sup>



#### LEARN MORE ABOUT FABHALTA at www.Fabhalta-hcp.com

#### Please <u>click here</u> for Important Safety Information. Please <u>click here</u> for full Prescribing Information, including Boxed WARNING and Medication Guide.

References: 1. Fabhalta. Prescribing information. Novartis Pharmaceuticals Corp. 2. Kobayashi M, Leidner AJ, Gierke R JL, et al. Expanded recommendations for use of pneumococcal conjugate vaccines among adults aged ≥50 years: recommendations of the Advisory Committee on Immunization Practices - United States, 2024. MMWR Morb Mortal Wkly Rep. 2025;74(1):1-8. Accessed January 28, 2024. doi:10.15585/mmwr.mm7401a1 3. Mbaeyi SA, Bozio CH, Duffy J, et al. Meningococcal vaccination: recommendations of the Advisory Committee on Immunization Practices, United States, 2020. MMWR Recomm Rep. 2020;69(9): 1-41. Accessed October 25, 2024. doi:10.15585/mmwr.rr6909a1 4. Schillie S, Loehr J, Chen WH, et al. New dosing interval and schedule for the Bexsero MenB-4C vaccine: updated recommendations of the Advisory Committee on Immunization Practices - United States, October 2024. MMRW Morb Mortal Wkly Rep. 2024;73(49):1124-1128. 5. Collins JP, Crowe SJ, Ortega-Sanchez IR, et al. Use of the Pfizer pentavalent meningococcal vaccine among persons aged ≥10 years: recommendations of the Advisory Committee on Immunization Practices - United States, 2023. MMWR Morb Mortal Wkly Rep. 2024;73(15):345-350. Accessed January 28, 2024. doi:10.15585/mmwr.mm7315a4

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