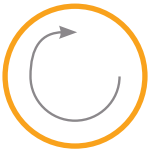
ADVERSE EVENT MANAGEMENT

INFORMATION FOR YOUR PATIENTS TREATED WITH BLINCYTO®

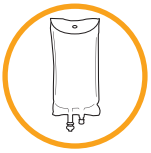
THIS SECTION CONTAINS SOME USEFUL INFORMATION FOR YOUR PATIENTS ABOUT THEIR TREATMENT WITH BLINCYTO®



TREATMENT CYCLES[1]

Treatment happens in cycles where 1 cycle consists of 4 weeks of continuous treatment. Each cycle is followed by a 2-week treatment-free interval. Patients with R/R B-ALL may receive up to a maximum of 5 cycles of BLINCYTO® treatment.

Patients with MRD+ B-ALL may receive up to a maximum of 4 cycles of BLINCYTO® treatment.



THE INFUSION[1]

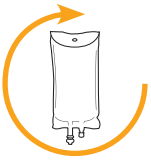
Treatment is given by cIV. This means it enters the body through a tube (often called a "line") that connects to a catheter, which is a special tube that goes into a vein. The medicine slowly enters the body 24 hours a day through this tube.

THE PUMP[2,3]

The pump pushes the treatment from the bag into the body at just the right speed so that the right amount prescribed by the doctor is given.

- ✓ Make sure the tubing stays connected to the pump at all times
- ✓ Do not let the tubing become tangled or twisted at any time
- ✓ Do not lie on the tubing
- ✓ Do not pull the tubing or unplug the pump at any time
- ✓ If there is blood in the tubing, speak to a doctor or nurse as soon as possible
- ✓ Keep the pump, the tubing, and the covering at the insertion site dry at all times

Advise patients that they should not attempt to change the settings on the pump, as this may cause too much or too little treatment to be given.[2]



IV BAG CHANGE OR CASSETTE

- The IV bag or cassette must be changed at least every 96 hours by a healthcare professional for sterility reasons[1]
- The IV bag change must occur within 4 hours of the designated time regardless of the remaining volume in the existing infusion bag[3]

References: 1. BLINCYTO® (blinatumomab) Product Information. www.amgen.com.au/Blincyto.PI. **2.** BLINCYTO® (blinatumomab) Consumer Medicine Information. www.amgen.com.au/Blincyto.CMI. **3.** Amgen Data on File.

ADVERSE EVENT MANAGEMENT

INFORMATION FOR YOUR PATIENTS TREATED WITH BLINCYTO®[1]

SIDE EFFECTS

Like all medicines, BLINCYTO® can cause side effects, although not everybody gets them. Some of these side effects may be serious. The doctor will decide what to do based on the type of side effect and how serious it is. If it is a serious side effect, the doctor may temporarily or permanently stop treatment.

Patients should tell their doctor immediately if they get any of the following or combination of the following side effects:

- Chills, shivering, fever, rapid heart rate, decreased blood pressure, aching muscles, feeling tired, coughing, difficulty breathing, confusion, redness, swelling or discharge in the affected area or at the site of the infusion line – these may be signs of an infection
- Neurologic events: shaking (or tremor), confusion, disturbances of brain function (encephalopathy), difficulty in communicating (aphasia), seizure (convulsion)
- Fever, swelling, chills, decreased or increased blood pressure and fluid in the lungs, which may become severe – these may be signs of a so-called cytokine release syndrome

Treatment with BLINCYTO® can cause a decrease in the levels of certain white blood cells with or without fever (febrile neutropenia or neutropenia) or can lead to increased blood levels of potassium, uric acid, and phosphate and decreased blood levels of calcium (tumour lysis syndrome). The doctor will take regular blood tests during treatment with BLINCYTO®.

For very common side effects, common side effects or uncommon side effects, please refer the patient to the Consumer Medicine Information.

Remind patients that if they experience any side effects, including any not mentioned here, they should talk to their doctor or nurse.

WHEN TO GET HELP

Patients should call their healthcare provider or get emergency medical help immediately if:[1]

- They have any side effects that bother them or do not go away
- They experience seizures, difficulty in speaking or slurred speech, confusion and disorientation, or loss of balance
- They develop chills or shivering, or feel warm; they should take their temperature as they may have a fever – these may be symptoms of an infection
- They develop a reaction at any time during the infusion. Symptoms may include dizziness, face swelling, difficulty breathing, wheezing or rash
- They develop severe and persistent stomach pain, with or without nausea and vomiting. These may be symptoms of a serious and potentially fatal condition known as pancreatitis (inflammation of the pancreas)
- They think they may have been given more treatment than they should, for example, the infusion bag empties before the scheduled bag change
- There is a problem with the pump or the pump alarm sounds
- The pump stops unexpectedly. Advise patients not to try to restart the pump. Their doctor will decide when the next dose should be given

Reference: 1. BLINCYTO® (blinatumomab) Consumer Medicine Information. www.amgen.com.au/Blincyto.CMI.

BLINCYTO®
(blinatumomab)

For more information on BLINCYTO® or to report any adverse events or product complaints involving BLINCYTO® please contact Australia Medical Information on 1800 803 638

PBS Information: Section 100 listed. Authority required.
Refer to PBS Schedule for full Authority listing.

***WARNING*:** *The following have occurred in patients receiving BLINCYTO®:*
• Cytokine Release Syndrome, which may be life-threatening or fatal • Neurological toxicities, which may be severe, life-threatening, or fatal • Reactivation of JC viral infection
Interrupt or discontinue BLINCYTO® as recommended if any of these adverse events occur
(See Section 4.4 Special warnings and precautions for use and Section 4.2 Dose and method of administration).

REFER TO FULL PRODUCT INFORMATION BEFORE PRESCRIBING; AVAILABLE FROM AMGEN AUSTRALIA PTY LTD, PH: 1800 803 638 OR AT WWW.AMGEN.COM.AU/BLINCYTO.PI

For more information about BLINCYTO® or to report an adverse event or product complaints about BLINCYTO®, please contact Amgen Medical Information on 1800 803 638.

BLINCYTO® Minimum Product Information: Indication: treatment of relapsed or refractory (R/R) B-cell precursor acute lymphoblastic leukaemia (ALL); treatment of minimal residual disease (MRD) positive ALL in patients in complete haematological remission. **Contraindications:** hypersensitivity to blinatumomab, CHO-derived proteins or any excipient. **Precautions:** neurologic events; increased risk for serious infections; cytokine release syndrome; infusion reactions; tumour lysis syndrome, pancreatitis. Management of these adverse reactions may require interruption or discontinuation of treatment. Neutropenia and febrile neutropenia; elevated liver enzymes; leukoencephalopathy; medication errors – strictly follow preparation and administration instructions. Pregnancy Category: C. Use contraception during and for 48 hours after treatment. Discontinue breast-feeding during and for at least 48 hours after treatment. Do not use recommended adult fixed dose in paediatric patients. No data in patients aged less than 28 days. **Interactions:** low potential of clinically meaningful drug interaction with BLINCYTO® mediated cytokine elevation. Vaccination with live viral vaccines not recommended 2 weeks prior to or during treatment, and until recovery of B lymphocytes to normal range following last treatment cycle. **Adverse Reactions:** Common: infections, pyrexia, infusion-related reactions, headache, anaemia, febrile neutropenia, neutropenia, thrombocytopenia, oedema, increased liver enzymes, fatigue, nausea, tremor, hypokalaemia, diarrhoea, chills. See also Precautions for serious adverse reactions. **Dosage & Administration:** R/R ALL: Single cycle is 4 weeks continuous intravenous (cIV) infusion then 2 week treatment free interval. *For patients greater than or equal to 45 kg (fixed dose)*: Cycle 1 – starting dose 9 micrograms/day for days 1-7, then 28 micrograms/day for days 8-28. All other cycles 28 micrograms/day for 4 weeks. For patients less than 45 kg (body surface area based dose): Cycle 1 – starting dose 5 micrograms/m^2/day for days 1-7 (do not exceed 9 micrograms/day), then 15 micrograms/m^2/day (do not exceed 28 micrograms/day); all other cycles, 15 micrograms/m^2/day (do not exceed 28 micrograms/day). For maintenance, 28 day cIV infusion, then 56 days treatment free. Hospitalise at least first 9 days of Cycle 1 and first 2 days of Cycle 2. Supervision or hospitalisation for other cycle starts and reinitiation. Adults: premedicate with 20 mg IV dexamethasone prior to initiation of each cycle. Intrathecal chemotherapy prophylaxis recommended before and during therapy. Treat with dexamethasone (≤ 24 mg/day) if high tumour burden. Paediatrics: premedicate with dexamethasone 10 mg/m2 (not to exceed 20 mg) oral or IV 6 to 12 hours prior to start of BLINCYTO® (Cycle 1 day 1), followed by premedication with dexamethasone 5 mg/m^2 oral or IV within 30 minutes of start of BLINCYTO® (Cycle 1 day 1). **MRD+ ALL:** 28 day cIV infusion then 14 days treatment free, for up to 4 cycles; premedicate with prednisone 100 mg IV or equivalent 1 hour prior to start of BLINCYTO® each cycle; hospitalise first 3 days Cycle 1 and first 2 days Cycle 2, supervise/hospital for subsequent cycle starts and reinitiation – see full PI. R/R & MRD+ ALL – Interrupt BLINCYTO® if grade 3 neurological events, Cytokine Release Syndrome or other clinically relevant adverse reactions occur see full PI.

BLINCYTO® (blinatumomab)

AMGEN®