FDA-REQUIRED REMS SAFETY INFORMATION

Risk of:
- Cytokine Release Syndrome (CRS), which may be life-threatening or fatal
- Neurological toxicities, which may be severe, life threatening or fatal
- Preparation and Administration Errors

BOXED WARNING

Cytokine Release Syndrome
- Cytokine Release Syndrome (CRS), which may be life-threatening or fatal, occurred in patients receiving BLINCYTO™.
- Infusion reactions have occurred with the BLINCYTO infusion and may be clinically indistinguishable from manifestations of CRS.
- Serious adverse events that may be associated with CRS included pyrexia, headache, nausea, asthenia, hypotension, increased alanine aminotransferase, increased aspartate aminotransferase, and increased total bilirubin; these events infrequently led to BLINCYTO discontinuation.
- In some cases, disseminated intravascular coagulation (DIC), capillary leak syndrome (CLS), and hemophagocytic lymphohistiocytosis/macrophage activation syndrome (HLH/MAS) have been reported in the setting of CRS.
- The highest elevation of cytokines was observed in the first 2 days following start of BLINCYTO infusion.

Neurological Toxicities
- In patients receiving BLINCYTO in clinical trials, neurological toxicities have occurred in approximately 50% of patients.
- The median time to onset of any neurological toxicity was 7 days.
- Grade 3 or higher (severe, life-threatening or fatal) neurological toxicities following initiation of BLINCYTO administration occurred in approximately 15% of patients and included encephalopathy, convulsions, speech disorders, disturbances in consciousness, confusion and disorientation, and coordination and balance disorders. The majority of events resolved following interruption of BLINCYTO, but some resulted in treatment discontinuation.

Monitor patients closely for signs or symptoms of these events and interrupt or discontinue BLINCYTO dosing.
OTHER SERIOUS RISKS:
Preparation and Administration Errors

- Preparation and administration errors have occurred with BLINCYTO treatment.
- It is very important that the instructions for preparation (including admixing) and administration are strictly followed to minimize medication errors (including underdose and overdose).
- Hospitalization is recommended for the first 9 days of the first cycle and the first 2 days of the second cycle.
- See Dosage and Administration section of Prescribing Information for detailed safety information.

MORE INFORMATION

For detailed information regarding BLINCYTO including storage, preparation, and administration, it is essential that you read the Prescribing Information for BLINCYTO.

INDICATION

BLINCYTO is a bispecific CD19-directed CD3 T-cell engager indicated for the treatment of Philadelphia chromosome-negative relapsed or refractory B-cell precursor acute lymphoblastic leukemia (ALL).

WHAT IS THE BLINCYTO™ REMS?

A REMS (Risk Evaluation and Mitigation Strategy) is a program required by the FDA to manage known or potential serious risks associated with a drug product. The FDA has determined that a REMS is necessary to ensure that the benefits of BLINCYTO outweigh its risks. The purpose of the BLINCYTO REMS is to inform Healthcare Providers of the risks of serious neurological toxicities, cytokine release syndrome, and preparation and administration errors. This Fact Sheet is required by the FDA as part of the BLINCYTO REMS program.

Please visit www.blincytorems.com for further information and resources.

This fact sheet does not contain the complete safety profile for BLINCYTO. Please refer to the full Prescribing Information, including BOXED WARNINGS and Medication Guide.

REPORTING ADVERSE EVENTS

You are encouraged to report negative side effects of prescription drugs to the FDA. Visit www.fda.gov/medwatch or call 1-800-FDA-1088. Healthcare Providers should report all suspected adverse events associated with BLINCYTO to the FDA or to Amgen at 1-800-77-AMGEN (1-800-772-6436).