RISK EVALUATION AND MITIGATION STRATEGY (REMS)

I. GOALS

The goals of the JUXTAPID REMS Program are:

- To educate prescribers about:
  - the risk of hepatotoxicity associated with the use of JUXTAPID; and
  - the need to monitor patients during treatment with JUXTAPID as per product labeling.

- To restrict access to therapy with JUXTAPID to patients with a clinical or laboratory diagnosis consistent with homozygous familial hypercholesterolemia (HoFH).

II. REMS ELEMENTS

A. Elements to Assure Safe Use

1. Healthcare Providers (HCP) who prescribe JUXTAPID are specially certified.

   a. Aegerion will ensure HCPs who prescribe JUXTAPID are specially certified.

      To become specially certified to prescribe JUXTAPID, prescribers must enroll in JUXTAPID REMS program. Prescribers must complete the following requirements:

      i. Review the Prescribing Information (PI)

      ii. Complete the Prescriber Training Module

      iii. Complete and sign the Prescriber Enrollment Form and submit it to the JUXTAPID REMS Program.
b. Aegerion will:

i. Ensure that the Prescriber Training Module and the Prescriber Enrollment Form are available on the JUXTAPID REMS Program website (www.JUXTAPIDREMSProgram.com), or can be obtained by contacting the JUXTAPID REMS Program by phone at 1-855-JUXTAPID (1-855-898-2743). Ensure that prescribers complete the Prescriber Training Module and Prescriber Enrollment Form before activating prescribers’ certification in the JUXTAPID REMS Program.

ii. Ensure that prescribers are notified when they have been successfully certified by the JUXTAPID REMS Program.

iii. Inform certified prescribers following substantial changes to the JUXTAPID REMS or JUXTAPID REMS Program. Substantial changes include: significant changes to the operation of the JUXTAPID REMS Program or changes to the Prescribing Information that affect the risk-benefit profile of JUXTAPID.

iv. To facilitate prescriber certification, Aegerion will communicate information to prescribers and professional societies through JUXTAPID REMS Program website and Dear Healthcare Provider and Dear Professional Society letters.

1) Dear Healthcare Provider letter - Aegerion will distribute a Dear Healthcare Provider letter within 60 days of JUXTAPID REMS approval to inform potential prescribers about the REMS and the REMS requirements. The Dear Healthcare Provider letter will be distributed by mass mailing to healthcare providers certified by the American Board of Clinical Lipidology, directors of apheresis centers, and to healthcare providers known to be experienced in treating patients with HoFH. The letter will be accompanied by the PI and will be available from the JUXTAPID REMS Program website (www.JUXTAPIDREMSProgram.com) at the time of the mailing and will remain on the website for 12 months after the mailing, or can be requested from the JUXTAPID REMS Program by phone at 1-85-JUXTAPID (1-855-898-2743).
2) **Dear Professional Society** letter - Aegerion will send a *Dear Professional Society* letter within 60 days of JUXTAPID REMS approval to the leadership of the following professional societies and will request that these societies disseminate the content of the letter to their professional membership:

   a) National Lipid Association
   b) The Endocrine Society
   c) The American Association of Clinical Endocrinologists
   d) American Heart Association
   e) American College of Cardiology
   f) American Society of Preventive Cardiology
   g) Preventive Cardiology Nurses Association
   h) American Society for Apheresis

   The letter will be provided to MedWatch at the same time it is provided to the professional organizations.

3) JUXTAPID REMS Program Website - A JUXTAPID REMS Program website (www.JUXTAPIDREMSProgram.com) will be available at the time of approval.

   The *Prescriber Training Module- downloadable PDF and online versions, Prescriber Enrollment Form- downloadable PDF and online versions, Dear Healthcare Provider and Dear Professional Society* letters, and JUXTAPID REMS Program website are part of the JUXTAPID REMS and are appended.

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2. **JUXTAPID will be dispensed only by specially certified pharmacies.**

   a. Aegerion will ensure that JUXTAPID will only be dispensed by certified pharmacies.
   b. To become certified to dispense JUXTAPID, each pharmacy representative must agree to the following:
i. To educate all pharmacy staff involved in the dispensing of JUXTAPID on the JUXTAPID REMS Program requirements.

ii. Put processes and procedures in place to verify, prior to dispensing JUXTAPID, that:

1) the prescriber is certified in the JUXTAPID REMS Program.

2) the JUXTAPID REMS Prescription Authorization Form is received for each new prescription.

iii. To be audited to ensure that all processes and procedures are in place and are being followed for the JUXTAPID REMS Program.

iv. To provide prescription data to the JUXTAPID REMS Program.

The JUXTAPID REMS Prescription Authorization Form is part of the REMS and is appended.

3. **JUXTAPID will be dispensed only to patients with evidence or other documentation of safe-use conditions.**

   a. JUXTAPID will only be dispensed to patients whose prescribers are specially certified in the JUXTAPID REMS Program and attest on the JUXTAPID REMS Prescription Authorization Form that:

   i. they understand that JUXTAPID is indicated as an adjunct to a low-fat diet and other lipid-lowering treatments, including LDL apheresis where available, to reduce low-density lipoprotein cholesterol (LDL-C), total cholesterol (TC), apolipoprotein B (apo B), and non-high-density lipoprotein cholesterol (non-HDL-C) in patients with homozygous familial hypercholesterolemia (HoFH);

   ii. they affirm that their patient has a clinical or laboratory diagnosis consistent with HoFH;

   iii. they understand that JUXTAPID has not been studied in patients less than 18 years of age; and

   iv. liver-related laboratory tests have been obtained as directed in the PI.
B. Implementation System

1. Aegerion will ensure that JUXTAPID is distributed to and dispensed only by certified pharmacies.

2. Aegerion will maintain, monitor, and evaluate the implementation of the JUXTAPID REMS program.
   a. Aegerion will develop and follow written procedures and scripts to implement the REMS.
   b. Aegerion will maintain a secure, validated database of all certified prescribers and pharmacies that is in compliance with 21 CFR Part 11 regulations.
   c. Aegerion will send confirmation of certification to each certified pharmacy.
   d. Aegerion will maintain a JUXTAPID REMS Program Coordinating Center with a Call Center to support patients, prescribers, and pharmacies in interfacing with the JUXTAPID REMS.
   e. Aegerion will ensure that all materials listed in or appended to the JUXTAPID REMS Program will be available through the JUXTAPID REMS Program website (www.JUXTAPIDREMSProgram.com) or by calling the JUXTAPID REMS Program Call Center at 1-85-JUXTAPID (1-855-898-2743).
   f. If there are substantive changes to the JUXTAPID REMS or JUXTAPID REMS Program, Aegerion will update all affected materials, and notify enrolled prescribers and certified pharmacies, as applicable. Substantive changes are defined as: significant changes to the operation of the JUXTAPID REMS Program or changes to the PI that affect the risk-benefit profile of JUXTAPID.
   g. Aegerion will monitor and audit the certified pharmacies to ensure that all processes and procedures are in place and functioning to support the requirements of the JUXTAPID REMS Program. Corrective action will be instituted by Aegerion if noncompliance is found.
   h. Based on monitoring and evaluation of the JUXTAPID REMS elements to assure safe use, Aegerion will take reasonable steps to improve implementation of these elements
and to maintain compliance with the JUXTAPID REMS Program requirements, as applicable.

C. Timetable for Submission of Assessments

Aegerion will submit REMS Assessments to the FDA 6 months, 12 months, and annually thereafter from the date of initial approval of this REMS. To facilitate inclusion of as much information as possible while allowing reasonable time to prepare the submission, the reporting interval covered by each assessment should conclude no earlier than 60 days before the submission date for that assessment. Aegerion will submit each assessment so that it will be received by the FDA on or before the due date.
APPENDIX 1

PRESCRIBER TRAINING MODULE

- Online Version
- Downloadable Version
Create Profile

Please complete the following information in order to register for and access the REMS program training module.

*Required Fields

First Name: 
Last Name: 
Email: 
Zip Code: 

Submit

Privacy Policy  |  Terms of Use  |  About Aegerion

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Indication and Important Safety Information

INDICATION

JUXTAPID is a microsomal triglyceride transfer protein (MTP) inhibitor indicated as an adjunct to a low-fat diet and other lipid-lowering treatments, including LDL apheresis where available, to reduce low-density lipoprotein cholesterol (LDL-C), total cholesterol (TC), apolipoprotein B (apo B) and non-high-density lipoprotein cholesterol (non-HDL-C) in patients with homozygous familial hypercholesterolemia (HoFH).

Limitations of Use

The safety and effectiveness of JUXTAPID have not been established in patients with hypercholesterolemia who do not have HoFH.

The effect of JUXTAPID on cardiovascular morbidity and mortality has not been determined.

IMPORTANT SAFETY INFORMATION

WARNING: RISK OF HEPATOTOXICITY

JUXTAPID can cause elevations in transaminases. In the JUXTAPID clinical trial, 10 (34%) of the 29 patients treated with JUXTAPID had at least one elevation in alanine aminotransferase (ALT) or aspartate aminotransferase (AST) ≥3x upper limit of normal (ULN). There were no concomitant clinically meaningful elevations of total bilirubin, international normalized ratio (INR), or alkaline phosphatase.

JUXTAPID also increases hepatic fat, with or without concomitant increases in transaminases. The median absolute increase in hepatic fat was 6% after both 26 and 78 weeks of treatment, from 1% at baseline, measured by magnetic resonance spectroscopy. Hepatic steatosis associated with JUXTAPID treatment may be a risk factor for progressive liver disease, including steatohepatitis and cirrhosis.

Measure ALT, AST, alkaline phosphatase, and total bilirubin before initiating treatment and then ALT and AST regularly as recommended. During treatment, adjust the dose of JUXTAPID if the ALT or AST are ≥3x ULN. Discontinue JUXTAPID for clinically significant liver toxicity.
Because of the risk of hepatotoxicity, JUXTAPID is available only through a restricted program under a Risk Evaluation and Mitigation Strategy (REMS) called the JUXTAPID REMS Program.

**CONTRAINDICATIONS**
- Pregnancy
- Concomitant administration of moderate or strong CYP3A4 inhibitors
- Moderate or severe hepatic impairment or active liver disease including unexplained persistent elevations of serum transaminases

**WARNINGS AND PRECAUTIONS**
JUXTAPID can cause elevations in transaminases and hepatic steatosis. Although cases of hepatic failure have not been reported, there is concern that JUXTAPID could induce steatohepatitis, which can progress to cirrhosis over several years. Modify the dose of JUXTAPID if elevations of transaminases are observed and discontinue JUXTAPID for persistent or clinically significant elevations. If transaminase elevations are accompanied by clinical symptoms of liver injury, such as nausea, vomiting, abdominal pain, fever, jaundice, lethargy, flu-like-symptoms, increases in bilirubin ≥2x ULN, or active liver disease, discontinue treatment with JUXTAPID and identify the probable cause. Use JUXTAPID with caution when co-administered with agents known to be hepatotoxic. Alcohol may increase levels of hepatic fat and induce or exacerbate liver injury.

Measure ALT, AST, alkaline phosphatase, and total bilirubin before initiating treatment. During the first year, measure liver-related tests (ALT and AST, at a minimum) prior to each increase in dose or monthly, whichever occurs first. After the first year, do these tests at least every 3 months and before any increase in dose.

Females of reproductive potential should have a negative pregnancy test before starting JUXTAPID and should use effective contraception during therapy with JUXTAPID.

Given its mechanism of action in the small intestine, JUXTAPID may reduce the absorption of fat-soluble nutrients. Patients treated with JUXTAPID should take daily supplements that contain 400 international units vitamin E and at least 200 mg linoleic acid, 210 mg alpha-linolenic
acid (ALA), 110 mg eicosapentaenoic acid (EPA), and 80 mg docosahexaenoic acid (DHA).

Gastrointestinal adverse reactions are common and may lead to treatment discontinuation. To reduce the risk of gastrointestinal adverse reactions, patients should adhere to a low-fat diet supplying less than 20% of energy from fat and the dosage of JUXTAPID should be increased gradually.

Combination with CYP3A4 inhibitors increases exposure to lomitapide. Strong and moderate CYP3A4 inhibitors should not be used with JUXTAPID. JUXTAPID dosage should not exceed 30 mg daily when used concomitantly with weak CYP3A4 inhibitors.

Due to risk of myopathy associated with simvastatin or lovastatin, doses of these agents should be limited when co-administered with JUXTAPID.

JUXTAPID increases the plasma concentrations of warfarin. Increases or decreases in the dose of JUXTAPID may lead to supra- or subtherapeutic anticoagulation, respectively. Patients taking warfarin should undergo regular monitoring of the INR, especially after any changes in JUXTAPID dosage.

Avoid use of JUXTAPID in patients with rare hereditary disorders of galactose intolerance.
ADVERSE REACTIONS

The most common adverse reactions were gastrointestinal, reported by 27 (93%) of 29 patients. Adverse reactions reported by 8 (28%) or more patients in the HoFH clinical trial included diarrhea, nausea, vomiting, dyspepsia and abdominal pain. Other common adverse reactions, reported by 5 to 7 (17-24%) patients, included weight loss, abdominal discomfort, abdominal distension, constipation, flatulence, increased ALT, chest pain, influenza, nasopharyngitis, and fatigue.

Reporting of Adverse Reactions

All healthcare professionals should report all suspected adverse reactions. Please contact Aegerion Pharmaceuticals, Inc. at 1-855-303-2347 or the FDA at 1-800-FDA-1088 or http://www.fda.gov/medwatch.

Please see Prescribing Information including BOXED WARNING.
INTRODUCTION

Reference ID: 3356376
Introduction

JUXTAPID is available only through a restricted program called the JUXTAPID REMS Program.

- Prescribers must complete this training module and enroll in the JUXTAPID REMS Program prior to prescribing JUXTAPID.

The purpose of this training module is to educate prescribers about the JUXTAPID REMS Program.

The goals of the JUXTAPID REMS Program are:

- To educate prescribers about:
  - The risk of hepatotoxicity associated with the use of JUXTAPID;
  - The need to monitor patients during treatment with JUXTAPID as per product labeling;
  - To restrict access to therapy with JUXTAPID to patients with a clinical or laboratory diagnosis consistent with homozygous familial hypercholesterolemia (HoFH).
Indication

JUXTAPID (lomitapide) is indicated as an adjunct to a low-fat diet and other lipid-lowering treatments, including LDL apheresis where available, to reduce low-density lipoprotein cholesterol (LDL-C), total cholesterol (TC), apolipoprotein B (apo B), and non-high-density lipoprotein cholesterol (non-HDL-C) in patients with homozygous familial hypercholesterolemia (HoFH).

Limitations of Use:

- The safety and effectiveness of JUXTAPID have not been established in patients with hypercholesterolemia who do not have HoFH.
- The effect of JUXTAPID on cardiovascular morbidity and mortality has not been determined.
Appropriate Patient Selection

Key considerations for appropriate patient selection:

- JUXTAPID is indicated for use in patients with HoFH.
- Patient must have a clinical or laboratory diagnosis consistent with HoFH.
- JUXTAPID has not been studied in pediatric patients less than 18 years.
Boxed Warning

WARNING: RISK OF HEPATOTOXICITY

- JUXTAPID (lomitapide) can cause elevations in transaminases. In the JUXTAPID clinical trial, 10 (34%) of the 29 patients treated with JUXTAPID had at least one elevation in alanine aminotransferase (ALT) or aspartate aminotransferase (AST) ≥5× upper limit of normal (ULN). There were no concomitant clinically meaningful elevations of total bilirubin, international normalized ratio (INR), or alkaline phosphatase.

- JUXTAPID also increases hepatic fat, with or without concomitant increases in transaminases. The median absolute increase in hepatic fat was 6% after both 26 and 78 weeks of treatment, from 1% at baseline, measured by magnetic resonance spectroscopy. Hepatic steatosis associated with JUXTAPID treatment may be a risk factor for progressive liver disease, including steatohepatitis and cirrhosis.

- Measure ALT, AST, alkaline phosphatase, and total bilirubin before initiating treatment and then ALT and AST regularly as recommended. During treatment, adjust the dose of JUXTAPID if the ALT or AST are ≥3× ULN. Discontinue JUXTAPID for clinically significant liver toxicity.
Risk of Hepatotoxicity

JUXTAPID can cause elevations in transaminases and hepatic steatosis. Although cases of hepatic failure have not been reported, there is concern that JUXTAPID could induce steatohepatitis, which can progress to cirrhosis over several years. If transaminase elevations are accompanied by clinical symptoms of liver injury, such as nausea, vomiting, abdominal pain, fever, jaundice, lethargy, flu-like-symptoms, increases in bilirubin ≥2x ULN, or active liver disease, discontinue treatment with JUXTAPID and identify the probable cause.

Clinical data suggest that hepatic fat accumulation is reversible after stopping treatment with JUXTAPID, but whether histological sequelae remain is unknown.

Alcohol may increase levels of hepatic fat and induce or exacerbate liver injury.

- Patients taking JUXTAPID should not consume more than 1 alcoholic drink per day.
Risk of Hepatotoxicity

Caution should be exercised when JUXTAPID is used with other medications known to have potential for hepatotoxicity, including:

- isotretinoin,
- amiodarone,
- acetaminophen (greater than >4 g/day for ≥3 days/week),
- methotrexate,
- tetracyclines, and
- tamoxifen.

The effect of concomitant administration of JUXTAPID with other hepatotoxic medications is unknown. More frequent monitoring of liver-related laboratories may be warranted.

JUXTAPID has not been studied concomitantly with other LDL-lowering agents that can also increase hepatic fat. Therefore, the combined use of such agents is not recommended.
Dosing and Administration

- JUXTAPID is a once-daily oral therapy.
- JUXTAPID should be taken in the evening, with a glass of water, without food, and at least 2 hours after dinner.
- The maintenance dosage of JUXTAPID should be individualized, taking into account patient characteristics such as goal of therapy and response to treatment, to a maximum of 60 mg daily.
- Prior to initiating JUXTAPID treatment, patients should follow a low-fat diet supplying less than 20% of energy from fat and should continue this diet during treatment.
- To reduce the risk of gastrointestinal adverse events, patients should adhere to a low-fat diet supplying less than 20% of energy from fat and the dosage of JUXTAPID should be increased gradually.

CONTINUED ON NEXT SLIDE
Dosing and Administration

CONTINUED FROM PREVIOUS SLIDE

- The recommended starting daily dose of JUXTAPID is 5 mg.
- The dose should be escalated gradually based on acceptable safety and tolerability.
  - After 2 weeks, increase the dose, based on acceptable safety and tolerability, to 10 mg daily.
  - Then, at a minimum of 4-week intervals, to daily 20 mg, 40 mg, and the maximum recommended dose of 60 mg.

<table>
<thead>
<tr>
<th>Dosage</th>
<th>Duration of Administration Before Considering Increase to Next Dosage</th>
</tr>
</thead>
<tbody>
<tr>
<td>5 mg daily</td>
<td>At least 2 weeks</td>
</tr>
<tr>
<td>10 mg daily</td>
<td>At least 4 weeks</td>
</tr>
<tr>
<td>20 mg daily</td>
<td>At least 4 weeks</td>
</tr>
<tr>
<td>40 mg daily</td>
<td>At least 4 weeks</td>
</tr>
<tr>
<td>60 mg daily</td>
<td>Maximum recommended dosage</td>
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</table>
## Patient Monitoring of Transaminases

<table>
<thead>
<tr>
<th>Timing</th>
<th>Recommendations</th>
</tr>
</thead>
<tbody>
<tr>
<td>Prior to initiating JUXTAPID</td>
<td>Screen for ALT, AST, alkaline phosphatase and total bilirubin elevations.</td>
</tr>
<tr>
<td>During dose escalation of JUXTAPID</td>
<td>Check ALT and AST (at a minimum) prior to each dose escalation.</td>
</tr>
</tbody>
</table>
| During maintenance therapy, once patient has been stabilized on an individualized dose | During the first year check ALT and AST (at a minimum) monthly.  
After the first year do these tests at least every 3 months and before any increase in dose. |
Patient Monitoring of Transaminases

In the event that ALT/AST elevations occur during therapy with JUXTAPID, the recommendations below should be followed:

<table>
<thead>
<tr>
<th>ALT OR AST</th>
<th>Treatment and Monitoring Recommendations</th>
</tr>
</thead>
</table>
| ≥3x and <5x ULN | - Confirm elevation with a repeat measurement within one week.  
|              | - If confirmed, reduce the dose and obtain additional liver-related tests if not already measured (such as alkaline phosphatase, total bilirubin, and INR).  
|              | - Repeat tests weekly and withhold dosing if there are signs of abnormal liver function (increase in bilirubin or INR), if transaminase levels rise above 5x ULN, or if transaminase levels do not fall below 3x ULN within approximately 4 weeks. In these cases of persistent or worsening abnormalities, also investigate to identify the probable cause.  
|              | - If resuming JUXTAPID after transaminases resolve to <3x ULN, consider reducing the dose and monitor liver-related tests more frequently. |

CONTINUED ON NEXT SLIDE
Patient Monitoring of Transaminases

CONTINUED FROM PREVIOUS SLIDE

In the event that ALT/AST elevations occur during therapy with JUXTAPID, the recommendations below should be followed:

<table>
<thead>
<tr>
<th>ALT OR AST</th>
<th>Treatment and Monitoring Recommendations</th>
</tr>
</thead>
</table>
| ≥5x ULN    | - Withhold dosing, obtain additional liver-related laboratories if not already measured (such as alkaline phosphatase, total bilirubin, and INR), and investigate to identify the probable cause.  
   - If resuming JUXTAPID after transaminases resolve to <3x ULN, reduce the dose and monitor liver-related laboratories more frequently. |

Stopping Treatment: If liver aminotransferase elevations are accompanied by clinical symptoms of liver injury (e.g., nausea, vomiting, abdominal pain, fever, jaundice, lethargy, flu-like symptoms) or increases in bilirubin ≥ 2 X ULN, or active liver disease, then stop treatment with JUXTAPID and investigate to identify the probable cause.
Adverse Reaction Reporting

To report SUSPECTED ADVERSE REACTIONS, contact Aegerion Pharmaceuticals at 1-855-303-2347 or FDA at 1-800-FDA-1088 or www.fda.gov/medwatch.
JUXTAPID REMS Program

Key program elements:

- Prescriber training on the risk of hepatotoxicity associated with the use of JUXTAPID, appropriate patient selection and the need to monitor patients during treatment.

- Prescribers of JUXTAPID must be certified.
  - Certification consists of reviewing training and enrolling into JUXTAPID REMS program.

- Documentation of safe use conditions required for dispensing JUXTAPID:
  - Prescribers must use a Prescription Authorization Form for each new prescription to ensure safe use of JUXTAPID.

- Controlled distribution of JUXTAPID through certified pharmacies.
JUXTAPIP REMS Program

Before prescribing JUXTAPIP, prescribers must complete the following steps:

1. Review the Prescribing Information and this Prescriber Training Module.
2. Complete, sign and submit the one-time JUXTAPIP REMS Program Prescriber Enrollment Form.
3. Complete, sign and submit the JUXTAPIP REMS Program Prescription Authorization Form for each patient.
Review Prescriber Education Materials

Review the following Prescriber Education Materials:

a. JUXTAPID Prescribing Information
b. This Prescriber Training Module

Materials can be accessed from the JUXTAPID REMS Program website at:
www.JUXTAPIDREMSProgram.com
Or request these materials by calling 1-85-JUXTAPID (1-855-898-2743).
Enroll in JUXTAPID REMS Program

In completing the one-time JUXTAPID REMS Program Prescriber Enrollment Form, prescribers will be required to attest to the following:

- I understand that JUXTAPID is indicated as an adjunct to a low-fat diet and other lipid-lowering treatments, including LDL apheresis where available, to reduce LDL-C, TC, apo B and non-HDL-C in patients with HoFH.
- I understand that JUXTAPID is only available through the JUXTAPID REMS Program and that I must comply with the program requirements in order to prescribe JUXTAPID.
- I have completed the JUXTAPID REMS Prescriber Training Module.
- I understand that there is a risk of hepatotoxicity associated with JUXTAPID.
Enroll in JUXTAPID REMS Program

CONTINUED FROM PREVIOUS SLIDE

2 Enroll

In completing the one-time JUXTAPID REMS Program Prescriber Enrollment Form, prescribers will be required to attest to the following:

Pressciber Attestation

- I understand that serum ALT, AST, alkaline phosphatase, and total bilirubin levels must be measured before initiating therapy with JUXTAPID.
- I understand that during the first year of treatment with JUXTAPID liver-related laboratory tests (ALT and AST at a minimum) must be measured prior to each increase in dose or monthly, whichever comes first.
- I understand that after the first year, these parameters must be measured at least every 3 months and before any increase in dose.
- I understand that JUXTAPID has not been studied in patients less than 18 years of age.

CONTINUED ON NEXT SLIDE

Reference ID: 3356376
Enroll in JUXTAPID REMS Program

Continued from previous slide

2  Enroll

In completing the one-time JUXTAPID REMS Program Prescriber Enrollment Form, prescribers will be required to attest to the following:

Prescriber Attestation

- I agree that personnel from the JUXTAPID REMS Program may contact me to gather further information or resolve discrepancies or to provide other information related to JUXTAPID or the JUXTAPID REMS Program.
- I will complete and submit a JUXTAPID REMS Program Prescription Authorization Form for each new prescription.
- I agree that Aegerion, its agents and contractors such as the pharmacy providers may contact me via phone, mail, or email to survey me on the effectiveness of the program requirements for the JUXTAPID REMS Program.

Continued on next slide

Back  Next
Enroll in JUXTAPID REMS Program

CONTINUED FROM PREVIOUS SLIDE

You can enroll in the JUXTAPID REMS program in two ways:

1. Online at enrollment.JUXTAPIDREMSProgram.com or
2. Download the JUXTAPID REMS Program Prescriber Enrollment Form at www.JUXTAPIDREMSProgram.com or request a copy by calling 1-855-JUXTAPID (1-855-989-2743)
   - Complete the Enrollment Form and return via fax or email
   - Fax to 1-855-898-2498 or
   - Scan and email to REMS@aegerion.com
Submit Prescription Authorization Form

When prescribing JUXTAPID, a prescriber must complete a Prescription Authorization Form for each new prescription. By completing the Prescription Authorization Form, the prescriber attests:

- I understand that JUXTAPID is indicated as an adjunct to a low-fat diet and other lipid-lowering treatments, including LDL apheresis where available, to reduce low-density lipoprotein cholesterol (LDL-C), total cholesterol (TC), apolipoprotein B (apo B) and non-high-density lipoprotein cholesterol (non-HDL-C) in patients with HoFH.
- I affirm that my patient has a clinical or laboratory diagnosis consistent with HoFH.
- I understand that JUXTAPID has not been studied in pediatric patients less than 18 years.
- I attest that I have obtained the liver-related laboratory tests for this patient as directed in the JUXTAPID prescribing information.

CONTINUED ON NEXT SLIDE
Submit Prescription Authorization Form

Prescribers must complete a Prescription Authorization Form and submit to a certified pharmacy:

- Download the Prescription Authorization Form at www.JUXTAPIDREMSProgram.com or request a copy by calling 1-855-898-2743
- Complete the Prescription Authorization Form
- Sign and submit the Prescription Authorization Form:
  - Fax to 1-855-898-2498
  - Scan and email to REMS@aegerion.com (Either will route directly to the certified pharmacy)

Note
For a list of certified pharmacies call: 1-855-JUXTAPID (1-855-898-2743)
Recommended Patient Counseling Information

Patients should be informed of the risk of hepatotoxicity and the need for regular blood tests.

**When counseling a patient on initiating JUXTAPID:**

- Advise the patient of the risk of hepatotoxicity and the need to have regular blood tests performed to monitor for evidence of liver injury or dysfunction.
- Inform the patient about the existence and purpose of a JUXTAPID REMS Program including dispensing only through certified pharmacies.
- For Females of Reproductive Potential: Confirm the absence of pregnancy and counsel the patient about the potential for fetal harm. Instruct her to use reliable methods of contraception and confirm use. Instruct patients to contact their prescriber immediately and stop taking JUXTAPID if pregnancy should occur.
Knowledge Assessment

The following questions about JUXTAPID are provided to reinforce learning.

Provide the correct answer to the following questions.

If you have difficulty answering these questions, please review the previous slides and refer to the Prescribing Information.
Knowledge Assessment

Question 1

Which of the following statements is TRUE?

- JUXTAPID is contraindicated in patients with moderate and severe hepatic impairment
- JUXTAPID can cause elevations in transaminases (ALT and AST)
- JUXTAPID increases hepatic fat with or without concomitant increases in transaminases
- All of the above

Submit
Knowledge Assessment

Which of the following statements is TRUE?

- JUXTAPID is contraindicated in patients with moderate and severe hepatic impairment
- JUXTAPID can cause elevations in transaminases (ALT and AST)
- JUXTAPID increases hepatic fat with or without concomitant increases in transaminases
- All of the above

Correct answer: JUXTAPID is associated with a risk of hepatotoxicity.
Knowledge Assessment

Which of the following statements is TRUE?

- JUXTAPID is contraindicated in patients with moderate and severe hepatic impairment
- JUXTAPID can cause elevations in transaminases (ALT and AST)
- JUXTAPID increases hepatic fat with or without concomitant increases in transaminases
- All of the above

Incorrect answer. Correct answer is All of the above

Answer

JUXTAPID is associated with a risk of hepatotoxicity.
Knowledge Assessment

In the first year of treatment, liver-related tests (ALT and AST at minimum) should be evaluated:

- A. Prior to an increase in dose
- B. Monthly
- C. Every three months
- Answers A and B
- Answers A and C

Submit
Knowledge Assessment

**Question 2**

In the first year of treatment, liver-related tests (ALT and AST at minimum) should be evaluated:
- A. Prior to an increase in dose
- B. Monthly
- C. Every three months

**Answers A and B**
- Answers A and C

**Correct answer**

ALT, AST, alkaline phosphatase, and total bilirubin should be measured before initiation of treatment with JUXTAPID. During the first year, measure liver-related tests (ALT and AST at minimum) prior to each increase in dose or monthly, whichever occurs first. After the first year, do these tests at least every 3 months and before any increase in dose.
Knowledge Assessment

Question 2

In the first year of treatment, liver-related tests (ALT and AST at minimum) should be evaluated:

A. Prior to an increase in dose
B. Monthly
C. Every three months

Answers A and B

Incorrect answer. Correct answer is Answers A and B

Answer

ALT, AST, alkaline phosphatase, and total bilirubin should be measured before initiation of treatment with JUXTAPID. During the first year, measure liver-related tests (ALT and AST at minimum) prior to each increase in dose or monthly, whichever occurs first. After the first year, do these tests at least every 3 months and before any increase in dose.
Knowledge Assessment

The goal(s) of the JUXTAPID REMS Program are:

- To educate prescribers about the risk of hepatotoxicity associated with the use of JUXTAPID.
- To educate prescribers about the need to monitor patients during treatment with JUXTAPID as per product labeling.
- To restrict access to therapy with JUXTAPID to patients with a clinical or laboratory diagnosis consistent with HoFH.
- All of the above
- None of the above

Submit
Knowledge Assessment

The goal(s) of the JUXTAPID REMS Program are:

- To educate prescribers about the risk of hepatotoxicity associated with the use of JUXTAPID.
- To educate prescribers about the need to monitor patients during treatment with JUXTAPID as per product labeling.
- To restrict access to therapy with JUXTAPID to patients with a clinical or laboratory diagnosis consistent with HoFH.

Correct answer: All of the above

Answer:

The goals of the JUXTAPID REMS Program are:
- To educate prescribers about the risk of hepatotoxicity associated with the use of JUXTAPID; and
- the need to monitor patients during treatment with JUXTAPID as per product labeling.
- To restrict access to therapy with JUXTAPID to patients with a clinical or laboratory diagnosis consistent with HoFH.
Knowledge Assessment

The goal(s) of the JUXTAPID REMS Program are:

- To educate prescribers about the risk of hepatotoxicity associated with the use of JUXTAPID.
- To educate prescribers about the need to monitor patients during treatment with JUXTAPID as per product labeling.
- To restrict access to therapy with JUXTAPID to patients with a clinical or laboratory diagnosis consistent with HoFH.

All of the above

Incorrect answer. Correct answer is All of the above

Answer

The goals of the JUXTAPID REMS Program are:

- To educate prescribers about:
  - the risk of hepatotoxicity associated with the use of JUXTAPID; and
  - the need to monitor patients during treatment with JUXTAPID as per product labeling.
- To restrict access to therapy with JUXTAPID to patients with a clinical or laboratory diagnosis consistent with HoFH.
Knowledge Assessment

At initiation of treatment, which of the following liver-related laboratories should be measured:
- ALT and AST
- Alkaline phosphatase
- Total bilirubin
- All of the above

Submit
Knowledge Assessment

At initiation of treatment, which of the following liver-related laboratories should be measured:
- ALT and AST
- Alkaline phosphatase
- Total bilirubin
- All of the above

Correct answer

Measure ALT, AST, alkaline phosphatase, and total bilirubin before initiation of treatment with JUXTAPID.
Knowledge Assessment

At initiation of treatment, which of the following liver-related laboratories should be measured:
- ALT and AST
- Alkaline phosphatase
- Total bilirubin
- All of the above

Incorrect answer. Correct answer is All of the above

Answer

Measure ALT, AST, alkaline phosphatase, and total bilirubin before initiation of treatment with JUXTAPID.
Knowledge Assessment

How often should the Prescription Authorization Form be completed:

- Each new prescription
- Only on the first prescription
- Every refill
- Once a year

Submit
**Knowledge Assessment**

**Question 5**

How often should the Prescription Authorization Form be completed:
- Each new prescription
- Only on the first prescription
- Every refill
- Once a year

**Correct answer**

**Answer**

For each new prescription, the prescriber must complete a Prescription Authorization Form.
Knowledge Assessment

How often should the Prescription Authorization Form be completed:
- Each new prescription
- Only on the first prescription
- Every refill
- Once a year

Incorrect answer. Correct answer is Each new prescription

Answer

For each new prescription, the prescriber must complete a Prescription Authorization Form.
Knowledge Assessment

A patient has an ALT value 4x ULN on treatment with JUXTAPID. The appropriate action is:

- Withhold treatment until ALT <3x ULN
- Reduce the dose and repeat ALT measurement weekly until ALT is <3x ULN
- Permanently discontinue treatment and investigate to identify probable cause
- Continue with the same dose of JUXTAPID and repeat ALT measurement monthly

Submit
Knowledge Assessment

A patient has an ALT value 4x ULN on treatment with JUXTAPID. The appropriate action is:
- Withhold treatment until ALT <3x ULN
- Reduce the dose and repeat ALT measurement weekly until ALT is <3x ULN
- Permanently discontinue treatment and investigate to identify probable cause
- Continue with the same dose of JUXTAPID and repeat ALT measurement monthly

Correct answer

Confirm elevation with a repeat measurement within one week. If confirmed, reduce the dose and obtain additional liver-related laboratories if not already measured (such as alkaline phosphatase, total bilirubin, and INR). Repeat transaminase measurements weekly, withhold dosing if transaminase levels do not fall below 3x ULN within 4 weeks, or if levels rise above 5x ULN, and investigate to identify the probable cause.
A patient has an ALT value 4x ULN on treatment with JUXTAPID. The appropriate action is:
- Withhold treatment until ALT <3x ULN
- Reduce the dose and repeat ALT measurement weekly until ALT is <3x ULN
- Permanently discontinue treatment and investigate to identify probable cause
- Continue with the same dose of JUXTAPID and repeat ALT measurement monthly

Incorrect answer. Correct answer is Reduce the dose and repeat ALT measurement weekly until ALT is <3x ULN

Confirm elevation with a repeat measurement within one week. If confirmed, reduce the dose and obtain additional liver-related laboratories if not already measured (such as alkaline phosphatase, total bilirubin, and INR). Repeat transaminase measurements weekly, withhold dosing if transaminase levels do not fall below 3x ULN within 4 weeks, or if levels rise above 5x ULN, and investigate to identify the probable cause.
Knowledge Assessment

Question 7

JUXTAPID is available only through certified pharmacies

- True
- False

Submit
Knowledge Assessment

Question 7

JUXTAPID is available only through certified pharmacies

- True
- False

Correct answer

Answer

JUXTAPID is available only through pharmacies that are specially certified and agree to follow the REMS requirements.

NOTE: For a list of certified pharmacies call: 1-855-JUXTAPID (1-855-898-2743)
Knowledge Assessment

<table>
<thead>
<tr>
<th>Question</th>
<th>Answer</th>
</tr>
</thead>
<tbody>
<tr>
<td>7</td>
<td>JUXTAPID is available only through certified pharmacies</td>
</tr>
<tr>
<td></td>
<td>True</td>
</tr>
<tr>
<td></td>
<td>False</td>
</tr>
<tr>
<td>Incorrect answer. Correct answer is True</td>
<td></td>
</tr>
</tbody>
</table>

NOTE: For a list of certified pharmacies call: 1-855-JUXTAPID (1-855-898-2743)
Completion of JUXTAPID REMS Program Training

You Have Completed the JUXTAPID REMS Program Training

You can enroll in the JUXTAPID REMS program in two ways:
1. Online at enrollment.JUXTAPIDREMSProgram.com or
2. Download the JUXTAPID REMS Program Prescriber Enrollment Form at www.JUXTAPIDREMSProgram.com or request a copy by calling 1-855-JUXTAPID (1-855-898-2743)
   - Complete the Enrollment Form and return via fax or email
   - Fax to 1-855-898-2498 or
   - Scan and email to REMS@aegerion.com

For more information on the JUXTAPID REMS Program, please call 1-86-JUXTAPID (1-855-898-2743) or visit www.JUXTAPIDREMSProgram.com

<< Go to Home

Reference ID: 3356376
INTRODUCTION
Introduction

JUXTAPID is available only through a restricted program called the JUXTAPID REMS Program.

• Prescribers must complete this training module and enroll in the JUXTAPID REMS Program prior to prescribing JUXTAPID.

The purpose of this training module is to educate prescribers about the JUXTAPID REMS Program.

The goals of the JUXTAPID REMS Program are:

• To educate prescribers about:
  • The risk of hepatotoxicity associated with the use of JUXTAPID;
  • The need to monitor patients during treatment with JUXTAPID as per product labeling.
• To restrict access to therapy with JUXTAPID to patients with a clinical or laboratory diagnosis consistent with homozygous familial hypercholesterolemia (HoFH).
Indication

JUXTAPID (lomitapide) is indicated as an adjunct to a low-fat diet and other lipid-lowering treatments, including LDL apheresis where available, to reduce low-density lipoprotein cholesterol (LDL-C), total cholesterol (TC), apolipoprotein B (apo B), and non-high-density lipoprotein cholesterol (non-HDL-C) in patients with homozygous familial hypercholesterolemia (HoFH).

Limitations of Use:

• The safety and effectiveness of JUXTAPID have not been established in patients with hypercholesterolemia who do not have HoFH.

• The effect of JUXTAPID on cardiovascular morbidity and mortality has not been determined.
Appropriate Patient Selection

Key considerations for appropriate patient selection:

• JUXTAVID is indicated for use in patients with HoFH.
• Patient must have a clinical or laboratory diagnosis consistent with HoFH.
• JUXTAVID has not been studied in pediatric patients less than 18 years.
Boxed Warning

WARNING: RISK OF HEPATOTOXICITY

• JUXTAPID (lomitapide) can cause elevations in transaminases. In the JUXTAPID clinical trial, 10 (34%) of the 29 patients treated with JUXTAPID had at least one elevation in alanine aminotransferase (ALT) or aspartate aminotransferase (AST) ≥3x upper limit of normal (ULN). There were no concomitant clinically meaningful elevations of total bilirubin, international normalized ratio (INR), or alkaline phosphatase.

• JUXTAPID also increases hepatic fat, with or without concomitant increases in transaminases. The median absolute increase in hepatic fat was 6% after both 26 and 78 weeks of treatment, from 1% at baseline, measured by magnetic resonance spectroscopy. Hepatic steatosis associated with JUXTAPID treatment may be a risk factor for progressive liver disease, including steatohepatitis and cirrhosis.

• Measure ALT, AST, alkaline phosphatase, and total bilirubin before initiating treatment and then ALT and AST regularly as recommended. During treatment, adjust the dose of JUXTAPID if the ALT or AST are ≥3x ULN. Discontinue JUXTAPID for clinically significant liver toxicity.

Reference ID: 3356376
Risk of Hepatotoxicity

JUXTAPID can cause elevations in transaminases and hepatic steatosis. Although cases of hepatic failure have not been reported, there is concern that JUXTAPID could induce steatohepatitis, which can progress to cirrhosis over several years. If transaminase elevations are accompanied by clinical symptoms of liver injury, such as nausea, vomiting, abdominal pain, fever, jaundice, lethargy, flu-like-symptoms, increases in bilirubin ≥2x ULN, or active liver disease, discontinue treatment with JUXTAPID and identify the probable cause.

Clinical data suggest that hepatic fat accumulation is reversible after stopping treatment with JUXTAPID, but whether histological sequelae remain is unknown.

Alcohol may increase levels of hepatic fat and induce or exacerbate liver injury.

- Patients taking JUXTAPID should not consume more than 1 alcoholic drink per day.

CONTINUED ON NEXT SLIDE
Caution should be exercised when JUXTAPID is used with other medications known to have potential for hepatotoxicity, including:

- isotretinoin,
- amiodarone,
- acetaminophen (greater than >4 g/day for ≥3 days/week),
- methotrexate,
- tetracyclines, and
- tamoxifen.

The effect of concomitant administration of JUXTAPID with other hepatotoxic medications is unknown. More frequent monitoring of liver-related laboratories may be warranted.

JUXTAPID has not been studied concomitantly with other LDL-lowering agents that can also increase hepatic fat. Therefore, the combined use of such agents is not recommended.
Dosing and Administration

- JUXTAPID is a once-daily oral therapy.
- JUXTAPID should be taken in the evening, with a glass of water, without food, and at least 2 hours after dinner.
- The maintenance dosage of JUXTAPID should be individualized, taking into account patient characteristics such as goal of therapy and response to treatment, to a maximum of 60 mg daily.
- Prior to initiating JUXTAPID treatment, patients should follow a low-fat diet supplying less than 20% of energy from fat and should continue this diet during treatment.
- To reduce the risk of gastrointestinal adverse events, patients should adhere to a low-fat diet supplying less than 20% of energy from fat and the dosage of JUXTAPID should be increased gradually.

CONTINUED ON NEXT SLIDE
Dosing and Administration

CONTINUED FROM PREVIOUS SLIDE

• The recommended starting daily dose of JUXTAPID is 5 mg.
• The dose should be escalated gradually based on acceptable safety and tolerability.
  – After 2 weeks, increase the dose, based on acceptable safety and tolerability, to 10 mg daily.
  – Then, at a minimum of 4-week intervals, to daily 20 mg, 40 mg, and the maximum recommended dose of 60 mg.

<table>
<thead>
<tr>
<th>Dosage</th>
<th>Duration of Administration Before Considering Increase to Next Dosage</th>
</tr>
</thead>
<tbody>
<tr>
<td>5 mg daily</td>
<td>At least 2 weeks</td>
</tr>
<tr>
<td>10 mg daily</td>
<td>At least 4 weeks</td>
</tr>
<tr>
<td>20 mg daily</td>
<td>At least 4 weeks</td>
</tr>
<tr>
<td>40 mg daily</td>
<td>At least 4 weeks</td>
</tr>
<tr>
<td>60 mg daily</td>
<td>Maximum recommended dosage</td>
</tr>
</tbody>
</table>
## Patient Monitoring of Transaminases

<table>
<thead>
<tr>
<th>Timing</th>
<th>Recommendations</th>
</tr>
</thead>
<tbody>
<tr>
<td>Prior to initiating JUXTAPID</td>
<td>Screen for ALT, AST, alkaline phosphatase and total bilirubin elevations.</td>
</tr>
<tr>
<td>During dose escalation of JUXTAPID</td>
<td>Check ALT and AST (at a minimum) prior to each dose escalation.</td>
</tr>
</tbody>
</table>
| During maintenance therapy, once patient has been stabilized on an individualized dose | During the first year check ALT and AST (at a minimum) monthly.  
After the first year do these tests at least every 3 months and before any increase in dose. |
Patient Monitoring of Transaminases

In the event that ALT/AST elevations occur during therapy with JUXTAPID, the recommendations below should be followed:

<table>
<thead>
<tr>
<th>ALT OR AST</th>
<th>Treatment and Monitoring Recommendations</th>
</tr>
</thead>
</table>
| ≥3x and <5x ULN | - Confirm elevation with a repeat measurement within one week.  
|             | - If confirmed, reduce the dose and obtain additional liver-related tests if not already measured (such as alkaline phosphatase, total bilirubin, and INR).  
|             | - Repeat tests weekly and withhold dosing if there are signs of abnormal liver function (increase in bilirubin or INR), if transaminase levels rise above 5x ULN, or if transaminase levels do not fall below 3x ULN within approximately 4 weeks. In these cases of persistent or worsening abnormalities, also investigate to identify the probable cause.  
|             | - If resuming JUXTAPID after transaminases resolve to <3x ULN, consider reducing the dose and monitor liver-related tests more frequently. |

CONTINUED ON NEXT SLIDE
Patient Monitoring of Transaminases

CONTINUED FROM PREVIOUS SLIDE

In the event that ALT/AST elevations occur during therapy with JUXTAPID, the recommendations below should be followed:

<table>
<thead>
<tr>
<th>ALT OR AST</th>
<th>Treatment and Monitoring Recommendations</th>
</tr>
</thead>
</table>
| ≥5x ULN    | • Withhold dosing, obtain additional liver-related laboratories if not already measured (such as alkaline phosphatase, total bilirubin, and INR), and investigate to identify the probable cause.  
• If resuming JUXTAPID after transaminases resolve to <3x ULN, reduce the dose and monitor liver-related laboratories more frequently. |

Stopping Treatment: If liver aminotransferase elevations are accompanied by clinical symptoms of liver injury (e.g., nausea, vomiting, abdominal pain, fever, jaundice, lethargy, flu-like symptoms) or increases in bilirubin ≥ 2 X ULN, or active liver disease, then stop treatment with JUXTAPID and investigate to identify the probable cause.

Reference ID: 3356376
Adverse Reaction Reporting

To report SUSPECTED ADVERSE REACTIONS, contact Aegerion Pharmaceuticals at 1-855-303-2347 or FDA at 1-800-FDA-1088 or www.fda.gov/medwatch.
JUXTAPID REMS Program

Key program elements:

• Prescriber training on the risk of hepatotoxicity associated with the use of JUXTAPID, appropriate patient selection and the need to monitor patients during treatment.

• Prescribers of JUXTAPID must be certified.
  – Certification consists of reviewing training and enrolling into JUXTAPID REMS program.

• Documentation of safe use conditions required for dispensing JUXTAPID:
  – Prescribers must use a Prescription Authorization Form for each new prescription to ensure safe use of JUXTAPID.

• Controlled distribution of JUXTAPID through certified pharmacies.
Before prescribing JUXTAPID, prescribers must complete the following steps:

1. Review the Prescribing Information and this Prescriber Training Module.
2. Complete, sign and submit the one-time JUXTAPID REMS Program Prescriber Enrollment Form.
3. Complete, sign and submit the JUXTAPID REMS Program Prescription Authorization Form for each patient.
Review Prescriber Education Materials

Review the following Prescriber Education Materials:

a. JUXTAPID Prescribing Information
b. This Prescriber Training Module

Materials can be accessed from the JUXTAPID REMS Program website at:
www.JUXTAPIDREMSProgram.com

Or request these materials by calling 1-85-JUXTAPID (1-855-898-2743).
In completing the one-time JUXTAPID REMS Program Prescriber Enrollment Form, prescribers will be required to attest to the following:

- I understand that JUXTAPID is indicated as an adjunct to a low-fat diet and other lipid-lowering treatments, including LDL apheresis where available, to reduce LDL-C, TC, apo B and non HDL-C in patients with HoFH.
- I understand that JUXTAPID is only available through the JUXTAPID REMS Program and that I must comply with the program requirements in order to prescribe JUXTAPID.
- I have completed the JUXTAPID REMS Prescriber Training Module.
- I understand that there is a risk of hepatotoxicity associated with JUXTAPID.
Enroll in JUXTAPID REMS Program

**CONTINUED FROM PREVIOUS SLIDE**

<table>
<thead>
<tr>
<th>2</th>
<th>Enroll</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>In completing the one-time JUXTAPID REMS Program Prescriber Enrollment Form, prescribers will be required to attest to the following:</strong></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Prescriber Attestation</th>
</tr>
</thead>
<tbody>
<tr>
<td>• I understand that serum ALT, AST, alkaline phosphatase, and total bilirubin levels must be measured before initiating therapy with JUXTAPID.</td>
</tr>
<tr>
<td>• I understand that during the first year of treatment with JUXTAPID liver-related laboratory tests (ALT and AST at a minimum) must be measured prior to each increase in dose or monthly, whichever comes first.</td>
</tr>
<tr>
<td>• I understand that after the first year, these parameters must be measured at least every 3 months and before any increase in dose.</td>
</tr>
<tr>
<td>• I understand that JUXTAPID has not been studied in patients less than 18 years of age.</td>
</tr>
</tbody>
</table>

**CONTINUED ON NEXT SLIDE**

Reference ID: 3356376
In completing the one-time JUXTAPID REMS Program Prescriber Enrollment Form, prescribers will be required to attest to the following:

- I agree that personnel from the JUXTAPID REMS Program may contact me to gather further information or resolve discrepancies or to provide other information related to JUXTAPID or the JUXTAPID REMS Program.
- I will complete and submit a JUXTAPID REMS Program Prescription Authorization Form for each new prescription.
- I agree that Aegerion, its agents and contractors such as the pharmacy providers may contact me via phone, mail, or email to survey me on the effectiveness of the program requirements for the JUXTAPID REMS Program.
You can enroll in the JUXTAPID REMS program in two ways:

1. Online at [enrollment.JUXTAPIDREMSProgram.com](http://enrollment.JUXTAPIDREMSProgram.com) or

2. Download the JUXTAPID REMS Program Prescriber Enrollment Form at [www.JUXTAPIDREMSProgram.com](http://www.JUXTAPIDREMSProgram.com) or request a copy by calling 1-855-JUXTAPID (1-855-898-2743)
   - Complete the Enrollment Form and return via fax or email
     - Fax to 1-855-898-2498 or
     - Scan and email to REMS@aegerion.com
Submit Prescription Authorization Form

When prescribing JUXTAPID, a prescriber must complete a Prescription Authorization Form for each new prescription. By completing the Prescription Authorization Form, the prescriber attests:

<table>
<thead>
<tr>
<th>Prescriber Attestation</th>
</tr>
</thead>
<tbody>
<tr>
<td>• I understand that JUXTAPID is indicated as an adjunct to a low-fat diet and other lipid-lowering treatments, including LDL apheresis where available, to reduce low-density lipoprotein cholesterol (LDL-C), total cholesterol (TC), apolipoprotein B (apo B) and non-high-density lipoprotein cholesterol (non-HDL-C) in patients with HoFH.</td>
</tr>
<tr>
<td>• I affirm that my patient has a clinical or laboratory diagnosis consistent with HoFH.</td>
</tr>
<tr>
<td>• I understand that JUXTAPID has not been studied in pediatric patients less than 18 years.</td>
</tr>
<tr>
<td>• I attest that I have obtained the liver-related laboratory tests for this patient as directed in the JUXTAPID prescribing information.</td>
</tr>
</tbody>
</table>
Prescribers must complete a Prescription Authorization Form and submit to a certified pharmacy:

• Download the Prescription Authorization Form at www.JUXTAPIDREMSProgram.com or request a copy by calling 1-855-JUXTAPID (1-855-898-2743)

• Complete the Prescription Authorization Form

• Sign and submit the Prescription Authorization Form:
  – Fax to 1-855-898-2498 or
  – Scan and email to REMS@aegerion.com
  (Either will route directly to the certified pharmacy)

For a list of certified pharmacies call: 1-85-JUXTAPID (1-855-898-2743)
Recommended Patient Counseling Information

Patients should be informed of the risk of hepatotoxicity and the need for regular blood tests.

When counseling a patient on initiating JUXTAPID:

- Advise the patient of the risk of hepatotoxicity and the need to have regular blood tests performed to monitor for evidence of liver injury or dysfunction.
- Inform the patient about the existence and purpose of a JUXTAPID REMS Program including dispensing only through certified pharmacies.
- For Females of Reproductive Potential: Confirm the absence of pregnancy and counsel the patient about the potential for fetal harm. Instruct her to use reliable methods of contraception and confirm use. Instruct patients to contact their prescriber immediately and stop taking JUXTAPID if pregnancy should occur.
Knowledge Assessment

The following questions about JUXTAPID are provided to reinforce learning.

Provide the correct answer to the following questions.

If you have difficulty answering these questions, please review the previous slides and refer to the Prescribing Information.
Knowledge Assessment

Question 1

Which of the following statements is TRUE?

- JUXTAPID is contraindicated in patients with moderate and severe hepatic impairment
- JUXTAPID can cause elevations in transaminases (ALT and AST)
- JUXTAPID increases hepatic fat with or without concomitant increases in transaminases
- All of the above
Knowledge Assessment

<table>
<thead>
<tr>
<th>Question 1</th>
<th>Which of the following statements is TRUE?</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>JUXTAPID is contraindicated in patients with moderate and severe hepatic impairment</td>
</tr>
<tr>
<td></td>
<td>JUXTAPID can cause elevations in transaminases (ALT and AST)</td>
</tr>
<tr>
<td></td>
<td>JUXTAPID increases hepatic fat with or without concomitant increases in transaminases</td>
</tr>
<tr>
<td></td>
<td><strong>All of the above</strong></td>
</tr>
</tbody>
</table>

Answer: JUXTAPID is associated with a risk of hepatotoxicity.

Reference ID: 3356376
Knowledge Assessment

In the first year of treatment, liver-related tests (ALT and AST at minimum) should be evaluated:

- A. Prior to an increase in dose
- B. Monthly
- C. Every three months
- Answers A and B
- Answers A and C
In the first year of treatment, liver-related tests (ALT and AST at minimum) should be evaluated:

- A. Prior to an increase in dose
- B. Monthly
- C. Every three months

**Answers A and B**

ALT, AST, alkaline phosphatase, and total bilirubin should be measured before initiation of treatment with JUXTAPID. During the first year, measure liver-related tests (ALT and AST at minimum) prior to each increase in dose or monthly, whichever occurs first. After the first year, do these tests at least every 3 months and before any increase in dose.
Knowledge Assessment

The goal(s) of the JUXTAPIR REMS Program are:

- To educate prescribers about the risk of hepatotoxicity associated with the use of JUXTAPIR.
- To educate prescribers about the need to monitor patients during treatment with JUXTAPIR as per product labeling.
- To restrict access to therapy with JUXTAPIR to patients with a clinical or laboratory diagnosis consistent with HoFH.
- All of the above
- None of the above
The goal(s) of the JUXTAPID REMS Program are:

- To educate prescribers about the risk of hepatotoxicity associated with the use of JUXTAPID.
- To educate prescribers about the need to monitor patients during treatment with JUXTAPID as per product labeling.
- To restrict access to therapy with JUXTAPID to patients with a clinical or laboratory diagnosis consistent with HoFH.

**All of the above**

None of the above
## Knowledge Assessment

<table>
<thead>
<tr>
<th>Question</th>
<th>4</th>
</tr>
</thead>
</table>

**At initiation of treatment, which of the following liver-related laboratories should be measured:**

- ALT and AST
- Alkaline phosphatase
- Total bilirubin
- All of the above
<table>
<thead>
<tr>
<th>Question</th>
<th>At initiation of treatment, which of the following liver-related laboratories should be measured:</th>
</tr>
</thead>
<tbody>
<tr>
<td>4</td>
<td>- ALT and AST</td>
</tr>
<tr>
<td></td>
<td>- Alkaline phosphatase</td>
</tr>
<tr>
<td></td>
<td>- Total bilirubin</td>
</tr>
<tr>
<td></td>
<td><strong>✓ All of the above</strong></td>
</tr>
</tbody>
</table>

Measure ALT, AST, alkaline phosphatase, and total bilirubin before initiation of treatment with JUXTAPID.
## Knowledge Assessment

<table>
<thead>
<tr>
<th>Question</th>
<th>5</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>How often should the Prescription Authorization Form be completed:</strong></td>
<td></td>
</tr>
<tr>
<td>❑ Each new prescription</td>
<td></td>
</tr>
<tr>
<td>❑ Only on the first prescription</td>
<td></td>
</tr>
<tr>
<td>❑ Every refill</td>
<td></td>
</tr>
<tr>
<td>❑ Once a year</td>
<td></td>
</tr>
</tbody>
</table>
Knowledge Assessment

Question 5

How often should the Prescription Authorization Form be completed:

- Each new prescription
- Only on the first prescription
- Every refill
- Once a year

Answer

For each new prescription, the prescriber must complete a Prescription Authorization Form.
A patient has an ALT value 4x ULN on treatment with JUXTAPID. The appropriate action is:

- Withhold treatment until ALT <3x ULN
- Reduce the dose and repeat ALT measurement weekly until ALT is <3x ULN
- Permanently discontinue treatment and investigate to identify probable cause
- Continue with the same dose of JUXTAPID and repeat ALT measurement monthly
### Question 6

A patient has an ALT value 4x ULN on treatment with JUXTAPID. The appropriate action is:

- Withhold treatment until ALT <3x ULN
- **Reduce the dose and repeat ALT measurement weekly until ALT is <3x ULN**
- Permanently discontinue treatment and investigate to identify probable cause
- Continue with the same dose of JUXTAPID and repeat ALT measurement monthly

### Answer

Confirm elevation with a repeat measurement within one week. If confirmed, reduce the dose and obtain additional liver-related laboratories if not already measured (such as alkaline phosphatase, total bilirubin, and INR). Repeat transaminase measurements weekly, withhold dosing if transaminase levels do not fall below 3x ULN within 4 weeks, or if levels rise above 5x ULN, and investigate to identify the probable cause.
<table>
<thead>
<tr>
<th>Question</th>
<th>JUXTAPID is available only through certified pharmacies</th>
</tr>
</thead>
<tbody>
<tr>
<td>7</td>
<td>True</td>
</tr>
<tr>
<td></td>
<td>False</td>
</tr>
</tbody>
</table>
JUXTAPID is available only through pharmacies that are specially certified and agree to follow the REMS requirements.

**Question 7**

**JUXTAPID is available only through certified pharmacies**

- True
- False

**Answer**

JUXTAPID is available only through pharmacies that are specially certified and agree to follow the REMS requirements.  
NOTE: For a list of certified pharmacies call: 1-85-JUXTAPID (1-855-898-2743)
You Have Completed the JUXTAPID REMS Program Training

You can enroll in the JUXTAPID REMS program in two ways:

1. Online at enrollment.JUXTAPIDREMSProgram.com or

2. Download the JUXTAPID REMS Program Prescriber Enrollment Form at www.JUXTAPIDREMSProgram.com or request a copy by calling 1-855-898-2743

   • Complete the Enrollment Form and return via fax or email
     • Fax to 1-855-898-2498 or
     • Scan and email to REMS@aegerion.com

For more information on the JUXTAPID REMS Program, please call 1-85-JUXTAPID (1-855-898-2743) or visit www.JUXTAPIDREMSProgram.com
APPENDIX 2

PRESCRIBER ENROLLMENT FORM

- Online Version
- Downloadable Version
Online JUXTAPID REMS Program Prescriber Enrollment Form

JUXTAPID will only be available through the JUXTAPID REMS Program. In order to prescribe JUXTAPID, a prescriber must:

1. Review the Prescribing Information (PI) and complete the Prescriber Training Module;
2. Complete this one-time JUXTAPID REMS Program Prescriber Enrollment Form; and
3. Complete and submit a JUXTAPID REMS Prescription Authorization Form for each new prescription.

Complete this enrollment form, sign the document per the instructions below, and click submit.

**PRESCRIBER INFORMATION**

- **First Name**: 
- **Middle Initial**: 
- **Last Name**: 
- **NPI**:
- **Fax Number**:
- **Email**: abergi@access-medical.com

**OFFICE CONTACT**

- **First Name**: 
- **Last Name**: 
- **Phone Number**
- **Fax Number**:

**PRESCRIBER ATTERTATION**

By completing this form, I attest that:

- I understand that JUXTAPID is indicated as an adjunct to a low-fat diet and other lipid-lowering treatments, including LDL apheresis where available, to reduce low-density lipoprotein cholesterol (LDL-C), triglycerides (TG), and apolipoprotein B (apo B) and non-high-density lipoprotein cholesterol (non-HDL-C) in patients with homozygous familial hypercholesterolemia (HoFH).
- I understand that JUXTAPID is only available through the JUXTAPID REMS Program and that I must comply with the program requirements in order to prescribe JUXTAPID.
- I have completed the JUXTAPID REMS Prescriber Training Module.
- I understand that there is a risk of hepatotoxicity associated with JUXTAPID.
- I understand that serum ALT, AST, alkaline phosphatase and total bilirubin must be measured before initiating therapy with JUXTAPID.
- I understand that during the first year of treatment with JUXTAPID, laboratory tests (ALT and AST at a minimum) must be determined prior to each increase in dose or monthly, whichever comes first.
- I understand that after the first year, these parameters should be measured at least every 3 months and before any increase in dose.
- I agree that prescribers from the JUXTAPID REMS Program may contact me to gather further information or resolve discrepancies or to provide other information related to JUXTAPID or the JUXTAPID REMS Program.
- I will complete and submit a JUXTAPID REMS Program Prescription Authorization Form for each new prescription.
- I agree that Aegerion, its agents and contractors such as the pharmacy providers may contact me via phone, mail, or email to survey me on the effectiveness of the program requirements for the JUXTAPID REMS Program.

Please enter your First and Last Name in the signature field below. Once you enter this information, the enrollment form will be considered signed.

**Signature**: ___________________________ 
**Date**: 8/27/2015

If you have any questions, please contact the JUXTAPID REMS Program.

Phone: 1-800-JUXTAPID (1-800-589-8243) | Fax: 1-855-909-2385 | www.JUXTAPIDREMSProgram.com

Reference ID: 3356376
Online JUXTAPID REMS Program Prescriber Enrollment Form

You have successfully submitted your online enrollment form. You will receive a confirmation email from Centric Health Resources who administers the JUXTAPID REMS Program on behalf of Aegeion Pharmaceuticals. Click here to view/print your Online Enrollment Form.

If you have any questions, please contact the JUXTAPID REMS Program.
JUXTAPID will only be available through the JUXTAPID REMS Program. In order to prescribe JUXTAPID, a prescriber must:

1) Review the Prescribing Information (PI) and complete the Prescriber Training Module;
2) Complete this one-time JUXTAPID REMS Program Prescriber Enrollment Form; and
3) Complete and submit a JUXTAPID REMS Prescription Authorization Form for each new prescription.

Complete this enrollment form and fax it to the JUXTAPID REMS Program at 1-855-898-2498 or scan and email to REMS@aegerion.com.

### PRESCRIBER INFORMATION

| First Name*: ________________________ | Middle Initial: _______ | Last Name*: ________________________ |
| Credentials*: MD | DO | NP | PA | Other: ____________________________________________________________________________ |
| Physician Specialty: Cardiology | Endocrinology | Internal Medicine | Other (specify) _____________________________ |
| Practice/Facility Name: __________________________________________________________________________________________________ |
| Address 1*: _____________________________________________________________________________________________________________ |
| Address 2: ______________________________________________________________________________________________________________ |
| City*: _____________________ | State*: _____ | Zip code*: ________ | Phone Number*: _______________ | Fax Number*: ____________ |
| Email*: ______________________________________________________________________ | NPI #: ____________________________________ |

### OFFICE CONTACT

| First Name: _________________________________________________ | Last Name: ____________________________________________________ |
| Phone Number (if different from above): _________________________ | Fax Number (if different from above): ____________________________ |
| Email* (if office contact is provided): ____________________________________________________________________________________ |

### PRESCRIBER ATTESTATION

By completing this form, I attest that:

- I understand that JUXTAPID is indicated as an adjunct to a low-fat diet and other lipid-lowering treatments, including LDL-apheresis where available, to reduce low-density lipoprotein cholesterol (LDL-C), total cholesterol (TC), apolipoprotein B (apo B) and non-high-density lipoprotein cholesterol (non-HDL-C) in patients with homozygous familial hypercholesterolemia (HoFH).
- I understand that JUXTAPID is only available through the JUXTAPID REMS Program and that I must comply with the program requirements in order to prescribe JUXTAPID.
- I have completed the JUXTAPID REMS Prescriber Training Module.
- I understand that there is a risk of hepatotoxicity associated with JUXTAPID.
- I understand that serum ALT, AST, alkaline phosphatase and total bilirubin must be measured before initiating therapy with JUXTAPID.
- I understand that during the first year of treatment with JUXTAPID liver-related laboratory tests (ALT and AST at a minimum) must be measured prior to each increase in dose or monthly, whichever comes first.
- I understand that after the first year, these parameters should be measured at least every 3 months and before any increase in dose.
- I agree that personnel from the JUXTAPID REMS Program may contact me to gather further information or resolve discrepancies or to provide other information related to JUXTAPID or the JUXTAPID REMS Program.
- I will complete and submit a JUXTAPID REMS Program Prescription Authorization Form for each new prescription.
- I agree that Aegerion, its agents and contractors such as the pharmacy providers may contact me via phone, mail, or email to survey me on the effectiveness of the program requirements for the JUXTAPID REMS Program.

Signature*: __________________________________________________________________________ | Date*: ____________________________

If you have any questions, please contact the JUXTAPID REMS Program.


Reference ID: 3356376
APPENDIX 3

DEAR HEALTHCARE PROVIDER (HCP) LETTER
Important Drug Warning

Subject: Risk of hepatotoxicity with JUXTAPID™ (lomitapide) capsules
Appropriate patient selection and monitoring
Prescriber Action: Training and enrollment as part of JUXTAPID REMS Program

January 11, 2013

Dear Healthcare Provider:

Aegerion Pharmaceuticals, Inc. would like to inform you about the approval of JUXTAPID™ (lomitapide) capsules, a microsomal triglyceride transfer protein (MTP) inhibitor indicated as an adjunct to a low-fat diet and other lipid-lowering treatments, including LDL apheresis where available, to reduce low-density lipoprotein cholesterol (LDL-C), total cholesterol (TC), apolipoprotein B (apo B) and non-high-density lipoprotein cholesterol (non-HDL-C) in patients with homozygous familial hypercholesterolemia (HoFH).

FDA has required a Risk Evaluation and Mitigation Strategy (REMS) for JUXTAPID. The purpose of the REMS is to help ensure that the benefits of treatment with JUXTAPID outweigh the risk of hepatotoxicity.

JUXTAPID has a Boxed Warning in the prescribing information.

WARNING: RISK OF HEPATOTOXICITY

- JUXTAPID can cause elevations in transaminases. In the JUXTAPID clinical trial, 10 (34%) of the 29 patients treated with JUXTAPID had at least one elevation in alanine aminotransferase (ALT) or aspartate aminotransferase (AST) ≥3x upper limit of normal (ULN). There were no concomitant clinically meaningful elevations of total bilirubin, international normalized ratio (INR), or alkaline phosphatase.
- JUXTAPID also increases hepatic fat, with or without concomitant increases in transaminases. The median absolute increase in hepatic fat was 6% after both 26 and 78 weeks of treatment, from 1% at baseline, measured by magnetic resonance spectroscopy. Hepatic steatosis associated with JUXTAPID treatment may be a risk factor for progressive liver disease, including steatohepatitis and cirrhosis.
- Measure ALT, AST, alkaline phosphatase, and total bilirubin before initiating treatment and then ALT and AST regularly as recommended. During treatment, adjust the dose of JUXTAPID if the ALT or AST are ≥3x ULN. Discontinue JUXTAPID for clinically significant liver toxicity.
- Because of the risk of hepatotoxicity, JUXTAPID is available only through a restricted program under a Risk Evaluation and Mitigation Strategy (REMS) called the JUXTAPID REMS PROGRAM.
Appropriate Patient Selection

- JUXTAPID is indicated for use in patients with HoFH.
- Patients must have a clinical or laboratory diagnosis consistent with HoFH.
- JUXTAPID has not been studied in pediatric patients less than 18 years.

Prescriber Action

JUXTAPID will only be available through the JUXTAPID REMS Program. In order to prescribe JUXTAPID, prescribers must:

- Review the JUXTAPID REMS Prescribing Information and Prescriber Training Module;
- Complete and submit the one-time JUXTAPID REMS Program Prescriber Enrollment Form;
- Complete and submit a JUXTAPID REMS Prescription Authorization Form for each new prescription; and
- Comply with the requirements of the JUXTAPID REMS Program.

Certified Pharmacies

- JUXTAPID is only dispensed through certified pharmacies.

More specific details about prescriber enrollment and the JUXTAPID REMS Program can be found at www.JUXTAPIDREMSProgram.com. For more information, you may also contact JUXTAPID REMS Program toll-free at 1-85-JUXTAPID (1-855-898-2743).

Reporting Adverse Events

HCPs should report all suspected adverse events associated with the use of JUXTAPID. Please contact Aegerion at 1-855-303-2347 or the FDA at 1-800-FDA-1088 or www.fda.gov/medwatch.

The information in this letter is not intended as a complete description of the benefits and risks associated with the use of JUXTAPID. Please see the accompanying Prescribing Information and Medication Guide.

Sincerely,

Dr. Mark Sumeray
Chief Medical Officer

Aegerion Pharmaceuticals, Inc.
APPENDIX 4

DEAR PROFESSIONAL SOCIETY LETTER
Important Drug Warning

Subject: Risk of hepatotoxicity with JUXTAPID™ (lomitapide) capsules

Appropriate patient selection and monitoring
Prescriber Action: Training and enrollment as part of REMS Program

January 11, 2013

Dear Professional Association:

This letter highlights important safety information your members need to know when prescribing JUXTAPID. To ensure the safe and appropriate use of JUXTAPID, it is important that you share the information included in this letter with your members who may treat patients with homozygous familial hypercholesterolemia (HoFH).

JUXTAPID™ (lomitapide) capsules, a microsomal triglyceride transfer protein (MTP) inhibitor is indicated as an adjunct to a low-fat diet and other lipid-lowering treatments, including LDL apheresis where available, to reduce low-density lipoprotein cholesterol (LDL-C), total cholesterol (TC), apolipoprotein B (apo B) and non-high-density lipoprotein cholesterol (non-HDL-C) in patients with homozygous familial hypercholesterolemia (HoFH).

FDA has required a Risk Evaluation and Mitigation Strategy (REMS) for JUXTAPID. The purpose of the REMS is to help ensure that the benefits of treatment with JUXTAPID outweigh the risk of hepatotoxicity.

JUXTAPID has a Boxed Warning in the prescribing information.

---

**WARNING: RISK OF HEPATOTOXICITY**

- JUXTAPID can cause elevations in transaminases. In the JUXTAPID clinical trial, 10 (34%) of the 29 patients treated with JUXTAPID had at least one elevation in alanine aminotransferase (ALT) or aspartate aminotransferase (AST) ≥3x upper limit of normal (ULN). There were no concomitant clinically meaningful elevations of total bilirubin, international normalized ratio (INR), or alkaline phosphatase.

- JUXTAPID also increases hepatic fat, with or without concomitant increases in transaminases. The median absolute increase in hepatic fat was 6% after both 26 and 78 weeks of treatment, from 1% at baseline, measured by magnetic resonance spectroscopy. Hepatic steatosis associated with JUXTAPID treatment may be a risk factor for progressive liver disease, including steatohepatitis and cirrhosis.

- Measure ALT, AST, alkaline phosphatase, and total bilirubin before initiating treatment and then ALT and AST regularly as recommended. During treatment, adjust the dose of JUXTAPID if the ALT or AST are ≥3x ULN. Discontinue JUXTAPID for clinically significant liver toxicity.

- Because of the risk of hepatotoxicity, JUXTAPID is available only through a restricted program under a Risk Evaluation and Mitigation Strategy (REMS) called the JUXTAPID REMS PROGRAM.
Appropriate Patient Selection
- JUXTAPID is indicated for use in patients with HoFH.
- Patients must have a clinical or laboratory diagnosis consistent with HoFH.
- JUXTAPID has not been studied in pediatric patients less than 18 years.

Prescriber Action
In order to prescribe JUXTAPID, prescribers must review the Prescribing Information and Prescriber Training Module, and enroll in the JUXTAPID REMS program.

Certified Pharmacies
JUXTAPID is only dispensed through certified pharmacies.

More specific details about prescriber responsibilities, enrollment and educational materials for JUXTAPID REMS Program can be found at www.JUXTAPIDREMSProgram.com. For more information, you may also contact JUXTAPID REMS Program toll-free at 1-85-JUXTAPID (1-855-898-2743).

The information in this letter is not intended as a complete description of the benefits and risks associated with the use of JUXTAPID. Please see accompanying Prescribing Information and Medication Guide.

Please share the information on the JUXTAPID REMS Program and the materials referenced above with your membership in order to ensure the safe and appropriate use of JUXTAPID. Thank you for your consideration of this request.

Sincerely,

Dr. Mark Sumeray
Chief Medical Officer

Aegerion Pharmaceuticals, Inc.
APPENDIX 5

PRESCRIPTION AUTHORIZATION FORM
Instructions: This form should be completed for each new prescription. Please print – all fields are required. This form consists of 3 parts: (1) Patient Information; (2) Prescription; and (3) Prescriber Information and Attestation of REMS Requirements.

Please FAX completed form to JUXTAPID REMS Program at 1-855-898-2498 or scan and email to REMS@aegerion.com; either will route directly to the certified pharmacy.

PATIENT INFORMATION

First Name: _____________________________________ Last Name: ____________________________ Date of Birth: _______________________
Address: _____________________________________________________________ City: _________________________ State: _____  Zip: _______

JUXTAPID PRESCRIPTION

Dose: _________ mg po q hs (recommended starting dosage is 5 mg daily). Quantity to dispense: _____________ Refills:____________
Additional Instructions:_____________________________________________________________________________________________________

PRESCRIBER INFORMATION and ATTESTATION OF REMS REQUIREMENTS

Prescriber Information:

First Name: ________________________________________________ Last Name: ___________________________________________________
Practice/Group Name: __________________________________________ Office Contact Person: _____________________________________
Address 1: ________________________________________________________________________________________________________________
Address 2: ___________________________________________________________________________________________ Suite: ______________
City: ______________________________________________________________________State: __________________ Zip: ___________________
Office Phone: ____________________________________________________ Office Fax: _____________________________________________
License #: ______________________________________________________________________ NPI #: __________________________________

Attestation of REMS Requirements:

• I understand that JUXTAPID is indicated as an adjunct to a low-fat diet and other lipid-lowering treatments, including LDL apheresis where available, to reduce low-density lipoprotein cholesterol (LDL-C), total cholesterol (TC), apolipoprotein B (apo B) and non-high-density lipoprotein cholesterol (non-HDL-C) in patients with homozygous familial hypercholesterolemia (HoFH).
• I affirm that my patient has a clinical or laboratory diagnosis consistent with HoFH.
• I understand that JUXTAPID has not been studied in pediatric patients less than 18 years.
• I attest that I have obtained the liver-related laboratory tests for this patient as directed in JUXTAPID’s prescribing information.

Prescriber Signature ________________________________ Substitution Permitted Dispense as Written Date __________________

JUXTAPID REMS Program information may be found at www.JUXTAPIDREMSProgram.com or by calling 1-85-JUXTAPID (1-855-898-2743).

Reference ID: 3356376
APPENDIX 6

REMS WEB PAGES
JUXTAPID REMS Program

Program Requirements | Training & Enrollment | Initiating Treatment | Important Safety Information

A Risk Evaluation and Mitigation Strategy (REMS) is a strategy to manage known or potential serious risks associated with a drug and is required by the US Food and Drug Administration (FDA) to ensure that the benefits of the drug outweigh its risks.

Aegerion Pharmaceuticals, Inc. (Aegerion) has worked with the FDA to develop the JUXTAPID REMS Program:

- to educate prescribers about:
  - the risk of hepatotoxicity associated with the use of JUXTAPID; and
  - the need to monitor patients during treatment with JUXTAPID as per product labeling.
- to restrict access to therapy with JUXTAPID to patients with a clinical or laboratory diagnosis consistent with homozygous familial hypercholesterolemia (HoFH).

Program Requirements

JUXTAPID is only available through the JUXTAPID REMS Program. The JUXTAPID REMS Program requirements include:

- For Prescribers
  - **Training** on the risk of hepatotoxicity associated with the use of JUXTAPID; appropriate patient selection and monitoring; and the REMS requirements
  - **Certification** by completion of training, and enrollment in the JUXTAPID REMS Program
  - **Attestation** of patient safe use for each new prescription by completing a Prescription Authorization Form

Find out more about Training and Enrollment

For Pharmacies

- Certification and enrollment in the REMS Program in order to dispense JUXTAPID
Steps to Prescriber Certification

1. **Review the Prescriber Education Materials**
   - JUXTAPID Prescribing Information
   - Prescriber Training Module
     - Online
     - For Download (PDF)

2. **Complete and Submit the JUXTAPID REMS Program Prescriber Enrollment Form**
   You can do this in two ways:
   1. Online
   2. Download the JUXTAPID REMS Program Prescriber Enrollment Form or request a copy by calling 1-855-JUXTAPID (1-855-898-2743)
     - Complete the Enrollment Form and return via fax or email:
       - Fax to 1-855-898-2498 or
       - Scan and email to REMS@aegerion.com

   By completing the Prescriber Enrollment Form, the prescriber agrees to comply with the JUXTAPID REMS Program requirements. A confirmation of your certification in the JUXTAPID REMS Program will be sent to you so you can begin to prescribe JUXTAPID.

Initiating Treatment

Before starting a patient on JUXTAPID, enrolled prescribers must:

- Affirm that the patient has a clinical or laboratory diagnosis consistent with HoFH.
- Obtain liver-related laboratory tests as directed in the JUXTAPID prescribing information.
- Confirm the absence of pregnancy and counsel the patient about the potential for fetal harm, if the patient is a woman of reproductive potential. Instruct her to use reliable methods of contraception and confirm use. Instruct patients to contact their prescriber immediately and
JUXTAPID REMS Program – Contact Us
Phone: 1-85-JUXTAPID (1-855-898-2743)
Fax: 1-855-898-2498
E-mail: REMS@aegerion.com
Hours of Operation: Monday-Friday: 8 AM-7 PM ET

To learn more about the risk of hepatotoxicity associated with the use of JUXTAPID, please refer to the Prescribing Information. Before initiating treatment with JUXTAPID, prescribers must discuss the risks of JUXTAPID with their patients.

Reporting of Adverse Reactions
All healthcare professionals should report all suspected adverse reactions. Please contact Aegerion Pharmaceuticals, Inc. at 1-855-303-2347 or the FDA at 1-800-FDA-1088 or www.fda.gov/medwatch.
Indication and Important Safety Information

INDICATION

JUXTAPID is a microsomal triglyceride transfer protein (MTP) inhibitor indicated as an adjunct to a low-fat diet and other lipid-lowering treatments, including LDL apheresis where available, to reduce low-density lipoprotein cholesterol (LDL-C), total cholesterol (TC), apolipoprotein B (apo B) and non-high-density lipoprotein cholesterol (non-HDL-C) in patients with homozygous familial hypercholesterolemia (HoFH).

Limitations of Use

The safety and effectiveness of JUXTAPID have not been established in patients with hypercholesterolemia who do not have HoFH.

The effect of JUXTAPID on cardiovascular morbidity and mortality has not been determined.

IMPORTANT SAFETY INFORMATION

WARNING: RISK OF HEPATOTOXICITY

JUXTAPID can cause elevations in transaminases. In the JUXTAPID clinical trial, 10 (34%) of the 29 patients treated with JUXTAPID had at least one elevation in alanine aminotransferase (ALT) or aspartate aminotransferase (AST) ≥3x upper limit of normal (ULN). There were no concomitant clinically meaningful elevations of total bilirubin, international normalized ratio (INR), or alkaline phosphatase.

JUXTAPID also increases hepatic fat, with or without concomitant increases in transaminases. The median absolute increase in hepatic fat was 6% after both 26 and 78 weeks of treatment, from 1% at baseline, measured by magnetic resonance spectroscopy. Hepatic steatosis associated with JUXTAPID treatment may be a risk factor for progressive liver disease, including steatohepatitis and cirrhosis.
Measure ALT, AST, alkaline phosphatase, and total bilirubin before initiating treatment and then ALT and AST regularly as recommended. During treatment, adjust the dose of JUXTAPID if the ALT or AST are ≥3x ULN. Discontinue JUXTAPID for clinically significant liver toxicity.

Because of the risk of hepatotoxicity, JUXTAPID is available only through a restricted program under a Risk Evaluation and Mitigation Strategy (REMS) called the JUXTAPID REMS Program.

**CONTRAINDICATIONS**
- Pregnancy
- Concomitant administration of moderate or strong CYP3A4 inhibitors
- Moderate or severe hepatic impairment or active liver disease including unexplained persistent elevations of serum transaminases

**WARNINGS AND PRECAUTIONS**
JUXTAPID can cause elevations in transaminases and hepatic steatosis. Although cases of hepatic failure have not been reported, there is concern that JUXTAPID could induce steatohepatitis, which can progress to cirrhosis over several years. Modify the dose of JUXTAPID if elevations of transaminases are observed and discontinue JUXTAPID for persistent or clinically significant elevations. If transaminase elevations are accompanied by clinical symptoms of liver injury, such as nausea, vomiting, abdominal pain, fever, jaundice, lethargy, flu-like-symptoms, increases in bilirubin ≥2x ULN, or active liver disease, discontinue treatment with JUXTAPID and identify the probable cause. Use JUXTAPID with caution when co-administered with agents known to be hepatotoxic. Alcohol may increase levels of hepatic fat and induce or exacerbate liver injury.

Measure ALT, AST, alkaline phosphatase, and total bilirubin before initiating treatment. During the first year, measure liver-related tests (ALT and AST, at a minimum) prior to each increase in dose or monthly, whichever occurs first. After the first year, do these tests at least every 3 months and before any increase in dose.
Females of reproductive potential should have a negative pregnancy test before starting JUXTAPID and should use effective contraception during therapy with JUXTAPID.

Given its mechanism of action in the small intestine, JUXTAPID may reduce the absorption of fat-soluble nutrients. Patients treated with JUXTAPID should take daily supplements that contain 400 international units vitamin E and at least 200 mg linoleic acid, 210 mg alpha-linolenic acid (ALA), 110 mg eicosapentaenoic acid (EPA), and 80 mg docosahexaenoic acid (DHA).

Gastrointestinal adverse reactions are common and may lead to treatment discontinuation. To reduce the risk of gastrointestinal adverse reactions, patients should adhere to a low-fat diet supplying less than 20% of energy from fat and the dosage of JUXTAPID should be increased gradually.

Combination with CYP3A4 inhibitors increases exposure to lomitapide. Strong and moderate CYP3A4 inhibitors should not be used with JUXTAPID. JUXTAPID dosage should not exceed 30 mg daily when used concomitantly with weak CYP3A4 inhibitors.

Due to risk of myopathy associated with simvastatin or lovastatin, doses of these agents should be limited when co-administered with JUXTAPID.

JUXTAPID increases the plasma concentrations of warfarin. Increases or decreases in the dose of JUXTAPID may lead to supra- or subtherapeutic anticoagulation, respectively. Patients taking warfarin should undergo regular monitoring of the INR, especially after any changes in JUXTAPID dosage.

Avoid use of JUXTAPID in patients with rare hereditary disorders of galactose intolerance.
This is a representation of an electronic record that was signed electronically and this page is the manifestation of the electronic signature.

/s/

AMY G EGAN
08/13/2013