Zydelig REMS

FDA REQUIRED UPDATED REMS SAFETY INFORMATION

Boxed Warning Risk of:
• Fatal and/or serious hepatotoxicity – updated
• Fatal and/or serious and severe diarrhea or colitis – updated
• Fatal and/or serious pneumonitis
• Fatal and/or serious infections – updated
• Fatal and serious intestinal perforation

January 2018

Dear <Name>:

The FDA has required Gilead Sciences to distribute this safety notice to the [Professional Organization] as part of the Zydelig REMS (Risk Evaluation and Mitigation Strategy). The incidence rates of fatal and serious toxicities have been updated in the Boxed Warning for Zydelig. We request that you distribute this information to your members about the following serious risks of Zydelig:

<table>
<thead>
<tr>
<th>WARNING: FATAL AND SERIOUS TOXICITIES: HEPATIC, SEVERE DIARRHEA, COLITIS, PNEUMONITIS, INFECTIONS and INTESTINAL PERFORATION</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Fatal and/or serious hepatotoxicity occurred in 16% to 18% of ZYDELIG-treated patients. Monitor hepatic function prior to and during treatment. Interrupt and then reduce or discontinue ZYDELIG.</td>
</tr>
<tr>
<td>• Fatal and/or serious and severe diarrhea or colitis occurred in 14% to 20% of ZYDELIG-treated patients. Monitor for the development of severe diarrhea or colitis. Interrupt and then reduce or discontinue ZYDELIG.</td>
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<tr>
<td>• Fatal and/or serious pneumonitis occurred in 4% of ZYDELIG-treated patients. Monitor for pulmonary symptoms and bilateral interstitial infiltrates. Interrupt or discontinue ZYDELIG.</td>
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<tr>
<td>• Fatal and/or serious infections occurred in 21% to 48% of ZYDELIG-treated patients. Monitor for signs and symptoms of infection. Interrupt ZYDELIG if infection is suspected.</td>
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<tr>
<td>• Fatal and serious intestinal perforation can occur in ZYDELIG-treated patients across clinical trials. Discontinue ZYDELIG if intestinal perforation is suspected.</td>
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</tbody>
</table>

The updated incidence rates of fatal and serious toxicities in the Zydelig Boxed Warning reflect data from patients treated with Zydelig in combination with rituximab or with unapproved combination therapies.

Please see the enclosed Zydelig REMS Fact Sheet, a non-promotional fact sheet reviewed by the FDA, for more detailed safety information. Please encourage your members to provide the Zydelig Patient Safety Information Card to all patients. This card, additional copies of the fact sheet, and other important information are available at: www.ZydeligREMS.com.

Zydelig is a kinase inhibitor indicated for the treatment of patients with:

• Relapsed chronic lymphocytic leukemia (CLL) in combination with rituximab, in patients for whom rituximab alone would be considered appropriate therapy due to other co-morbidities

Reference ID: 4238482
Zydelig REMS

- Relapsed follicular B-cell non-Hodgkin lymphoma (FL) in patients who have received at least two prior systemic therapies
- Relapsed small lymphocytic lymphoma (SLL) in patients who have received at least two prior systemic therapies

Limitation of use:
Zydelig is not indicated and is not recommended for first-line treatment of any patient. Zydelig is not indicated and is not recommended in combination with bendamustine and/or rituximab for the treatment of FL.

This letter does not contain the complete safety profile for Zydelig. Please review the enclosed Prescribing Information.

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 Zydelig to the FDA or to Gilead at 1-800-445-3235.

Sincerely,

William Guyer, Pharm.D.
Senior Vice President, Medical Affairs
FDA REQUIRED UPDATED REMS SAFETY INFORMATION

Boxed Warning includes the Risk of:
- Fatal and/or serious hepatotoxicity - updated
- Fatal and/or severe diabetes or colitis - updated
- Fatal and/or serious proinflammation
- Fatal and/or serious infections - updated
- Fatal and serious intestinal perforation

January 15, 2018

IMPORTANT SAFETY NOTICE

Dear Healthcare Providers:

The FDA has required an updated Boxed Warning for Zydelig® (idelalisib) tablets, a small-molecule phosphatidylinositol-3-kinase (PI3K) delta-selective inhibitor, in combination with rituximab for the treatment of relapsed or refractory CD20-positive follicular lymphoma when patients have progressed during or after rituximab-containing therapy.

Increased risk of liver toxicity:
- Increased risk of serious or fatal hepatotoxicity (see Boxed Warning).
- Increased risk of fatal and serious colitis.
- Increased risk of fatal and serious infections.
- Increased risk of fatal and serious proinflammation.

Zydelig is a small molecule inhibitor for the treatment of relapsed or refractory follicular lymphoma. When used in combination with rituximab, it is used to treat patients who have not responded to or who have relapsed after treatment with a rituximab-containing regimen.

Please review the full Prescribing Information for important safety information.

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Please review the full Prescribing Information for important safety information.
FDA REQUIRED UPDATED REMS SAFETY INFORMATION

Board Warning includes the Risk of:

- Fatal and/or serious hepatotoxicity
- Fetal alcohol syndrome
- Fetal and/or severe hyperbilirubinemia
- Fetal and/or serious interstitial fibrosis

January 2016: FDA’s Drug Safety Plan: Life cycle management of Fetal and Serious Toxicities

WARNING: FATAL AND SERIOUS TOXICITIES: HEPATIC, SERIOUS DERMAL, COLITIS, PHLEGMONOUS, INFECTIONS, AND INTESTINAL PERFORATION

- Fetal and/or severe hepatotoxicity occurred in 1/10,000 in pregnant patients. Monitor hepatic enzymes prior to and during treatment. Monitor for development of jaundice or discontinuise ZYDELIG.

- Fetal and/or severe dermatitis or colitis occurred in 1/100 in pregnant patients. Monitor for development of dermatitis or colitis. Discontinue ZYDELIG if dermatitis or colitis continues.

- Fetal and/or serious pneumonitis occurred in 1/1000 in ZYDELIG-treated patients. Monitor for signs and symptoms of pneumonitis. Discontinue ZYDELIG if pneumonitis occurs.

- Fetal and/or serious infections occurred in 1/100 in ZYDELIG-treated patients. Monitor for signs and symptoms of infection. Discontinue ZYDELIG if infection occurs.

- Fetal and/or serious interstitial fibrosis occurred in 1/100 in ZYDELIG-treated patients. Monitor for signs and symptoms of interstitial fibrosis. Discontinue ZYDELIG if interstitial fibrosis occurs.

If you need help identifying the relevant sections, please let me know.
Safety information updates were made to the Boxed Warning, including incidence rates of fatal and serious toxicities.

BOXED WARNING For Zydelig (Idelalisib)

Risk of:
- Fatal and/or serious hepatotoxicity - updated
- Fatal and/or serious and severe diarrhea or colitis - updated
- Fatal and/or serious pneumonitis
- Fatal and/or serious infections - updated
- Fatal and serious intestinal perforation

Fatal and/or Serious Hepatotoxicity
- Fatal and/or serious hepatotoxicity occurred in 18% of patients treated with Zydelig monotherapy and 16% of patients treated with Zydelig in combination with rituximab or with unapproved combination therapies.
- Elevations in ALT or AST greater than 5 times the upper limit of normal have occurred. These findings were generally observed within the first 12 weeks of treatment and were reversible with dose interruption. After resumption of treatment at a lower dose, 26% of patients had recurrence of ALT and AST elevations. Discontinue Zydelig for recurrent hepatotoxicity.
- Avoid concurrent use of Zydelig with other drugs that may cause liver toxicity.
- Monitor ALT and AST in all patients every 2 weeks for the first 3 months of treatment, every 4 weeks for the next 3 months, then every 1 to 3 months thereafter. Monitor weekly for liver toxicity if the ALT or AST rises above 3 times the upper limit of normal until resolved. Withhold Zydelig if the ALT or AST is greater than 5 times the upper limit of normal, and continue to monitor AST, ALT and total bilirubin weekly until the abnormality is resolved.

Fatal and/or Serious and Severe Diarrhea or Colitis
- Severe diarrhea or colitis (Grade 3 or higher) occurred in 14% of patients treated with Zydelig monotherapy and 20% of patients treated with Zydelig in combination with rituximab or with unapproved combination therapies. Diarrhea can occur at any time.
- Avoid concurrent use of Zydelig and other drugs that cause diarrhea. Diarrhea due to Zydelig responds poorly to antimotility agents. Median time to resolution ranged between one week and one month across trials, following interruption of Zydelig therapy and in some instances, use of corticosteroids.

Fatal and/or Serious Pneumonitis
- Fatal and serious pneumonitis occurred in patients treated with Zydelig. Clinical manifestations included interstitial infiltrates and organizing pneumonia.
- In randomized clinical trials of combination therapies, pneumonitis occurred in 4% of patients treated with Zydelig compared to 1% on the comparator arms. Time to onset of pneumonitis ranged from <1 to 15 months. Monitor patients on Zydelig for pulmonary symptoms.
- In patients taking Zydelig who present with pulmonary symptoms such as cough, dyspnea, hypoxia, interstitial infiltrates on a radiologic exam, or a decline by more than 5% in oxygen saturation, interrupt Zydelig until the etiology has been determined.
- If symptomatic pneumonitis or organizing pneumonia is diagnosed, initiate appropriate treatment with corticosteroids and permanently discontinue Zydelig.
Fatal and/or Serious Infections

- Fatal and/or serious infections occurred in 21% of patients treated with Zydelig monotherapy and 48% of patients treated with Zydelig in combination with rituximab or with unapproved combination therapies. The most common infections were pneumonia, sepsis, and febrile neutropenia. Treat infections prior to initiation of Zydelig therapy.
- Monitor patients on Zydelig for signs and symptoms of infection and interrupt Zydelig for Grade 3 or higher infection.
- Serious or fatal Pneumocystis jirovecii pneumonia (PJP) or cytomegalovirus (CMV) occurred in <1% of patients treated with Zydelig. Provide PJP prophylaxis during treatment with Zydelig. Interrupt Zydelig in patients with suspected PJP infection of any grade, and permanently discontinue Zydelig if PJP infection of any grade is confirmed. Regular clinical and laboratory monitoring for CMV infection is recommended in patients with history of CMV infection or positive CMV serology at the start of treatment with Zydelig. Interrupt Zydelig in the setting of positive CMV PCR or antigen test until the viremia has resolved. If Zydelig is subsequently resumed, patients should be monitored by PCR or antigen test for CMV reactivation at least monthly.

Fatal and Serious Intestinal Perforation

- Fatal and serious intestinal perforation occurred in Zydelig-treated patients.
- At the time of perforation, some patients had moderate to severe diarrhea.
- Advise patients to promptly report any new or worsening abdominal pain, chills, fever, nausea, or vomiting.
- Discontinue Zydelig permanently in patients who experience intestinal perforation.

INDICATION

Zydelig is a kinase inhibitor indicated for the treatment of patients with:

- Relapsed chronic lymphocytic leukemia (CLL) in combination with rituximab, in patients for whom rituximab alone would be considered appropriate therapy due to other co-morbidities.
- Relapsed follicular B-cell non-Hodgkin lymphoma (FL) in patients who have received at least two prior systemic therapies.
- Relapsed small lymphocytic lymphoma (SLL) in patients who have received at least two prior systemic therapies.

Limitations of use:
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You are encouraged to report negative side effects of Zydelig to Gilead at 1-800-445-3235 and/or the FDA at www.fda.gov/medwatch or call 1-800-FDA-1088.

This journal piece is part of the FDA-required Zydelig REMS. Visit www.ZydeligREMS.com for more information. For complete safety information, see the Prescribing Information available at www.ZydeligREMS.com.