**INDICATION**

XGEVA® is a prescription medicine used to prevent fracture, spinal cord compression, or the need for radiation or surgery to bone in patients with multiple myeloma and in patients with bone metastases from solid tumors.

**SELECT IMPORTANT SAFETY INFORMATION**

Do not take XGEVA® if you have low blood calcium (hypocalcemia) or are allergic to denosumab or any of its ingredients. XGEVA® can significantly lower the calcium levels in your blood and some deaths have been reported. Severe jaw bone problems and unusual thigh bone fracture have been reported. Patients with Giant Cell Tumor of Bone and patients with bones that are not fully matured may develop high blood calcium levels after they stop taking XGEVA®, that can be serious. The risk of broken bones in the spine may increase after stopping XGEVA®. You should not become pregnant while taking XGEVA® because XGEVA® can harm your unborn baby.

Please see additional Important Safety Information on pages 18-19.
Welcome

As someone with multiple myeloma (pronounced my•uh•LOH•mah), it’s important to understand how the condition can affect your bones. This brochure explains the effect that multiple myeloma has on bones, how serious bone problems occur in multiple myeloma, and how XGEVA® can prevent serious bone problems.1,2

IMPORTANT SAFETY INFORMATION

Do not take XGEVA® if you have low blood calcium (hypocalcemia). Your low blood calcium must be treated before you receive XGEVA®. XGEVA® can significantly lower the calcium levels in your blood and some deaths have been reported. Take calcium and vitamin D as your doctor tells you to. Tell your doctor right away if you experience spasms, twitches, cramps, or stiffness in your muscles or numbness or tingling in your fingers, toes, or around your mouth.

Please see additional Important Safety Information on pages 18–19.
How can multiple myeloma impact my bones?

Multiple myeloma is a type of cancer that can cause “weak spots”—also called lesions (LEE•shuns)—in your bones.\(^3\) This can lead to serious bone problems:\(^1\)

- Broken bones (fractures)
- A need for surgery
- A need for radiation treatments to the bone
- Spinal cord compression

9 out of 10 people with **MULTIPLE MYELOMA** will develop bone lesions over time. Bone lesions are the main cause of serious bone problems.\(^4\)

Out of 10 people with multiple myeloma, about 6 out of 10 will develop a fracture.\(^5\)

Medicines like XGEVA® can help prevent serious bone problems if you have multiple myeloma.\(^1\)

**IMPORTANT SAFETY INFORMATION (CONT’D)**

Do not take XGEVA® if you are allergic to denosumab or any of the ingredients of XGEVA®. Serious allergic reactions have happened in people who take XGEVA®. Call your doctor or go to your nearest emergency room right away if you have any symptoms of a serious allergic reaction, including low blood pressure (hypotension), trouble breathing, throat tightness, swelling of the face, lips, or tongue, rash; itching, or hives.

Please see additional Important Safety Information on pages 18-19.
How does XGEVA® work?

Normally, your body is continually breaking down and rebuilding bone. This helps keep your bones strong.  

With multiple myeloma, the breakdown and rebuilding of your bones can become unbalanced. Over time, this can cause weak spots in the bones and can lead to serious bone problems.  

XGEVA® works by slowing the bone breakdown that occurs in multiple myeloma.

*Serious bone problems are defined as broken bones (fractures), the need for surgery to bones, the need for radiation treatments to the bone, and spinal cord compression.

IMPORTANT SAFETY INFORMATION (CONT’D)

What is the most important information you should know about XGEVA®?

Do not take XGEVA® if you take Prolia. XGEVA® contains the same medicine as Prolia® (denosumab).

Please see additional Important Safety Information on pages 18-19.
How can XGEVA® help protect me from serious bone problems?*

In the largest international trial ever done to evaluate the prevention of serious bone problems in multiple myeloma,2 XGEVA® was found to be no worse than a different drug called zoledronic acid (or ZA).1

The study included 1,718 adults with multiple myeloma and compared XGEVA® with ZA. In this study, XGEVA® was found to be no worse than ZA in delaying time to first on-study serious bone problem (median 22.8 months compared with 24 months for ZA).1

IMPORTANT SAFETY INFORMATION (CONT’D)

Severe jaw bone problems (osteonecrosis)

Severe jaw bone problems may happen when you take XGEVA®. Your doctor should examine your mouth before you start, and while you are taking XGEVA®. Tell your dentist that you are taking XGEVA®. It is important for you to practice good mouth care during treatment with XGEVA®. In studies of patients with bone involvement, the rate of severe jaw problems was higher the longer they were being treated with XGEVA®.

Please see additional Important Safety Information on pages 18-19.
What should I know before I start taking XGEVA®?

• Your doctor will check your blood calcium levels before you start XGEVA®. Low blood calcium must be corrected before you can start your XGEVA® treatments.

• While you are taking XGEVA®, you may be told to take vitamin D and calcium supplements to help prevent low calcium levels in the blood.

• Sticking to the treatment schedule your doctor prescribes will help give you the best chance of preventing serious bone problems.*

*Serious bone problems are defined as broken bones (fractures), the need for surgery to bones, the need for radiation treatments to the bone, and spinal cord compression.

How will I receive XGEVA®?

• XGEVA® is given as a shot once every 4 weeks at your doctor’s office.

• The shot is given under the skin and is not an infusion through a vein.

• XGEVA® can be injected into your upper arm, upper thigh, or stomach area.

It is important to take XGEVA® following the recommended treatment schedule. Ask your doctor if scheduling appointments in advance may help with your treatment regimen.
How long will I need to take XGEVA®?

Take XGEVA® as prescribed by your doctor

- Continuing to use XGEVA® as directed by your doctor is an important part of protecting yourself against serious bone problems.
- Do not stop treatment with XGEVA® without talking to your doctor first, as your risk for broken bones in your spine can increase. This risk is even higher if you have osteoporosis or have had a prior fracture.
- Talk to your doctor to see what’s right for you

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Staying on track with your treatment plan

It’s important that you take XGEVA® as prescribed by your doctor. Here are some tips to help you stay on track with your treatment:

- Record appointments in your calendar
- Schedule future appointments in advance
- Ask family or friends for help getting to your doctor’s office

What if I miss a dose of XGEVA®?

- If you have missed a dose, it is important to talk to your doctor and healthcare team for help getting back on track with XGEVA® treatment.
- Sticking to the treatment schedule your doctor provides will help give you the best chance of preventing serious bone problems.

IMPORTANT SAFETY INFORMATION (CONT’D)

Risk of high calcium levels in patients with Giant Cell Tumor of Bone and in patients who are still growing

Patients with a type of cancer called Giant Cell Tumor of Bone and patients with bones that are not fully matured are at a greater risk to develop high blood calcium levels after they stop taking XGEVA®, that can be serious.

Please see additional Important Safety Information on pages 18-19.
Helpful resources for more guidance

American Cancer Society
www.cancer.org

Cancer Support Community
www.cancersupportcommunity.org

National Cancer Institute
www.cancer.gov

Cancer Hope Network
www.cancerhopenetwork.org

Multiple Myeloma Research Foundation
www.themmrf.org

Myeloma Crowd
www.myelomacrowd.org

CancerCare
www.cancercare.org

National Coalition for Cancer Survivorship
www.canceradvocacy.org

Amgen does not endorse and is not responsible for the content included in these resources.
What financial resources are available?

The AMGEN FIRST STEP™ Program can help eligible commercially insured patients cover their out-of-pocket prescription costs, including deductible, co-insurance, and co-payment.*

- $0 out-of-pocket for first dose or cycle
- $5 out-of-pocket for subsequent doses or cycles, up to the brand program benefit maximum. See AmgenFIRSTSTEP.com for terms and conditions.
- No income eligibility requirement

The Amgen FIRST STEP™ Program Prepaid MasterCard® is issued by Comerica Bank pursuant to license by MasterCard International Incorporated. No cash or ATM access. MasterCard® is a registered trademark of MasterCard International Incorporated. This card can be used only to cover co-payment for eligible prescriptions covered under the program at participating merchant locations where Debit MasterCard® is accepted.

To enroll in the AMGEN FIRST STEP™ program, please call 1-888-65-STEP1 (1-888-657-8371).

* Terms, conditions, and program maximums apply. This program is not open to patients receiving prescription reimbursement under any federal, state, or government-funded healthcare program. Not valid where prohibited by law.
IMPORTANT SAFETY INFORMATION

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Do not take XGEVA® if you are allergic to denosumab or any of the ingredients of XGEVA®. Serious allergic reactions have happened in people who take XGEVA®. Call your doctor or go to your nearest emergency room right away if you have any symptoms of a serious allergic reaction, including low blood pressure (hypotension); trouble breathing; throat tightness; swelling of the face, lips, or tongue; rash; itching; or hives.

What is the most important information you should know about XGEVA®?

Do not take XGEVA® if you take Prolia®, XGEVA® contains the same medicine as Prolia® (denosumab).

Severe jaw bone problems (osteonecrosis) Severe jaw bone problems may happen when you take XGEVA®. Your doctor should examine your mouth before you start, and while you are taking XGEVA®. Tell your dentist that you are taking XGEVA®. It is important for you to practice good mouth care during treatment with XGEVA®. In studies of patients with bone involvement, the rate of severe jaw problems was higher the longer they were being treated with XGEVA®.

Unusual thigh bone fracture Unusual thigh bone fracture has been reported. Symptoms of a fracture include new or unusual pain in your hip, groin, or thigh.

Risk of high calcium levels in patients with Giant Cell Tumor of Bone and in patients who are still growing Patients with a type of cancer called Giant Cell Tumor of Bone and patients with bones that are not fully matured are at a greater risk to develop high blood calcium levels after they stop taking XGEVA®, that can be serious. Increased risk of broken bones in the spine after discontinuing XGEVA® After your treatment with XGEVA® is stopped, your risk for breaking bones in your spine can increase, especially if you have a history of risk factors such as osteoporosis or prior fractures.

Possible harm to your unborn baby You should not become pregnant while taking XGEVA®. Tell your doctor right away if you are pregnant, plan to become pregnant, or suspect you are pregnant: XGEVA® can harm your unborn baby.

Tell your doctor if you:

• Are taking a medicine called Prolia® (denosumab) because it contains the same medicine as XGEVA®
• Have symptoms of low blood calcium such as muscle stiffness or cramps
• Have symptoms of severe jaw bone problems such as pain or numbness
• Have ongoing pain or slow healing after dental surgery
• Have symptoms of high blood calcium such as nausea, vomiting, headache, and decreased alertness

Are pregnant, plan to become pregnant, suspect you are pregnant, or breastfeeding While taking XGEVA®, you should:

• Take good care of your teeth and gums and visit a dentist as recommended
• Tell your dentist that you are taking XGEVA®
• Tell your doctor if you plan to have dental surgery or teeth removed
• Talk to your doctor before you stop taking XGEVA® about your risk for broken bones in your spine
• Women of child bearing age should use highly effective contraception while taking XGEVA® and for at least 5 months after the last dose of XGEVA®

What are the possible side effects of XGEVA®?

In patients with bone metastases from solid tumors using XGEVA®, the most common side effects were tiredness/weakness, low phosphate levels in your blood, and nausea. The most common serious side effect of XGEVA® was shortness of breath. In multiple myeloma patients receiving XGEVA®, the most common side effects were diarrhea, nausea, low red blood cells, low blood platelets and calcium levels, back pain, swelling of the lower legs or hands, upper respiratory tract infection, rash, and headache. The most common serious adverse reaction in multiple myeloma patients was pneumonia. These are not all the possible side effects of XGEVA®. For more information, ask your doctor or pharmacist. Call your doctor for medical advice about side effects. 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.

Please see accompanying Prescribing Information.
What else should I know?

Your doctor is a good source of information about XGEVA®,. Below are some questions you can ask that will help get the conversation started with your doctor:

- What is my risk for serious bone problems?*
- What other risks do I face with multiple myeloma?
- What is XGEVA®?
- Why was I prescribed XGEVA®?
- How does XGEVA® work?
- How is XGEVA® given?
- What are possible side effects?
- How long should I be on XGEVA®?
- How often will I receive injections?
- How long will it take to inject XGEVA®?
- What should I know before I take XGEVA®?

For more information, visit www.XGEVA.com

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