



## NINLARO 1Point: One point of connection for access and support

NINLARO 1Point is a comprehensive support program that offers an array of access and coverage services for NINLARO® (ixazomib) patients and their healthcare providers. Our dedicated case management team can deliver personalized services that help patients and providers navigate coverage requirements for NINLARO, streamline product access, and connect to helpful resources.

### ▶ **Services include:**

- **Benefit verification** and **prior authorization** assistance
- **Assistance** with appealing a payer denial
- **NINLARO Co-Pay Assistance Program** enrollment for eligible, commercially insured patients
- **Specialty pharmacy** referral and coordination
- **Referral** to alternative funding sources and third-party foundations
- **Connection to support services**, including referrals for transportation services, legal support, and national and local organizations for counseling
- **NINLARO RapidStart Program** for patients with insurance-related coverage delays
- **Patient Assistance Program** application

### ▶ **To benefit from the wide range of services:**

- You and your patient need to enroll using the NINLARO 1Point Enrollment Form
- Fax the completed enrollment form, including original signatures, along with a copy of the patient's insurance card (if they have one) and prescription to NINLARO 1Point at 1-844-269-3038

For more information on access, coverage, and available support and services, contact a NINLARO 1Point case manager at 1-844-N1POINT (1-844-617-6468), Option 2, Monday-Friday, 8AM-8PM ET, or visit NINLARO 1Point at [NINLARO-hcp.com/1Point](http://NINLARO-hcp.com/1Point)

## INDICATION

NINLARO (ixazomib) is indicated in combination with lenalidomide and dexamethasone for the treatment of patients with multiple myeloma who have received at least one prior therapy.

## IMPORTANT SAFETY INFORMATION

### WARNINGS AND PRECAUTIONS

- **Thrombocytopenia** has been reported with NINLARO. During treatment, monitor platelet counts at least monthly, and consider more frequent monitoring during the first three cycles. Adjust dosing as needed. Platelet nadirs occurred between Days 14-21 of each 28-day cycle and recovered to baseline by the start of the next cycle.
- **Gastrointestinal Toxicities**, including diarrhea, constipation, nausea and vomiting, were reported with NINLARO and may occasionally require the use of antidiarrheal and antiemetic medications, and supportive care. Adjust dosing for severe symptoms.
- **Peripheral Neuropathy** (predominantly sensory) was reported with NINLARO. Monitor patients for symptoms of peripheral neuropathy and adjust dosing as needed.
- **Peripheral Edema** was reported with NINLARO. Monitor for fluid retention. Investigate for underlying causes when appropriate and provide supportive care as necessary. Adjust dosing as needed.
- **Cutaneous Reactions:** Rash, most commonly maculo-papular and macular rash, was reported with NINLARO. Manage rash with supportive care or with dose modification.
- **Hepatotoxicity** has been reported with NINLARO. Monitor hepatic enzymes regularly during treatment and adjust dosing as needed.
- **Embryo-fetal Toxicity:** NINLARO can cause fetal harm. Women should be advised of the potential risk to a fetus, to avoid becoming pregnant, and to use contraception during treatment and for an additional 90 days after the final dose of NINLARO.

### ADVERSE REACTIONS

The most common adverse reactions occurring in greater than or equal to 20% of patients treated with NINLARO were diarrhea, constipation, thrombocytopenia, peripheral neuropathy, nausea, peripheral edema, vomiting and back pain.

### SPECIAL POPULATIONS

- **Hepatic Impairment:** Reduce the NINLARO starting dose to 3mg in patients with moderate or severe hepatic impairment
- **Renal Impairment:** Reduce the NINLARO starting dose to 3 mg in patients with severe renal impairment or end-stage renal disease requiring dialysis. NINLARO is not dialyzable.
- **Lactation:** Advise women to discontinue nursing while on NINLARO.

**DRUG INTERACTIONS:** Avoid concomitant administration of NINLARO with strong CYP3A inducers

**Please see NINLARO [full Prescribing Information](#).**

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