# Use this calendar to keep track of your NINLARO® (ixazomib) regimen.

NINLARO is a prescription medicine used to treat multiple myeloma in combination with the medicines REVLIMID® (lenalidomide) and dexamethasone, in people who have received at least one prior treatment for their multiple myeloma.

It is not known if NINLARO is safe and effective in children.

NINLARO is a capsule that you take once a week for 3 weeks of a 4-week cycle. NINLARO is taken along with 2 other medications, lenalidomide and dexamethasone, in 4-week cycles. This dosing calendar is a snapshot of the NINLARO regimen for a 28-day cycle.

See the next page for more information on how to take NINLARO.

Start by filling in the dates from Day 1 up to Day 28. Then after you take your medication, check off the corresponding box to remember what you've taken that day.





### How should I take NINLARO® (ixazomib)?

- Take NINLARO, REVLIMID® (lenalidomide) and dexamethasone exactly as your healthcare provider tells you to take it
- Take each dose of NINLARO at about the same time of day each week
- Take each dose of NINLARO at least 1 hour before or at least 2 hours after food (swallow NINLARO whole with water)
- Do not take NINLARO at the same time as dexamethasone

Please read the <u>Patient Information</u> in the full <u>Prescribing Information</u> for more details on how to take NINLARO

#### **Important Safety Information for NINLARO**

## NINLARO may cause serious side effects, including:

- Low platelet counts (thrombocytopenia) are common with NINLARO and can sometimes be serious. You may need platelet transfusions if your counts are too low. Tell your healthcare provider if you have any signs of low platelet counts, including bleeding and easy bruising.
- Stomach and intestinal (gastrointestinal) problems. Diarrhea, constipation, nausea, and vomiting are common with NINLARO and can sometimes be severe. Call your healthcare provider if you get any of these symptoms and they do not go away during treatment with NINLARO. Your healthcare provider may prescribe medicine to help treat your symptoms.
- **Nerve problems** are common with NINLARO and may also be severe. Tell your healthcare provider if you get any new or worsening symptoms including: tingling, numbness, pain, a burning feeling in your feet or hands, or weakness in your arms or legs.
- **Swelling** is common with NINLARO and can sometimes be severe. Tell your healthcare provider if you develop swelling in your arms, hands, legs, ankles, or feet, or if you gain weight from swelling.
- Skin Reactions. Tell your healthcare provider if you get a new or worsening rash.
- Thrombotic microangiopathy (TMA). This is a condition involving blood clots and injury to small blood vessels that may cause harm to your kidneys, brain, and other organs, and may lead to death. Get medical help right away if you get any of the following signs or symptoms during treatment with NINLARO: fever, bruising, nose bleeds, tiredness, or decreased urination.
- Liver problems. Tell your healthcare provider if you get these signs of a liver problem: yellowing of your skin or the whites of your eyes; pain in your right upper-stomach area.

Other common side effects have occurred. Tell your healthcare provider if you get new or worsening back pain, skin rash and pain (shingles) as a result of reactivation of the chicken pox virus (herpes zoster), lowered white blood cells (neutropenia) that may increase the risk of infection, or vision conditions including blurred vision, dry eye, and pink eye (conjunctivitis).

These are not all the possible side effects of NINLARO. Talk to your healthcare provider for medical advice about side effects. You may report side effects to FDA at 1-800-FDA-1088.

# Before taking NINLARO, tell your healthcare provider about all your medical conditions, including if:

- You have liver problems or kidney problems or are on dialysis.
- You or your partner are pregnant or plan to become pregnant. NINLARO can harm your unborn baby. Avoid becoming pregnant during treatment with NINLARO. Both male and female patients on NINLARO should use effective birth control during treatment and for 90 days after the final dose of NINLARO. If using hormonal contraceptives (for example, the pill), an additional barrier method of contraception (for example, diaphragm or condom) must be used.
- You are breastfeeding or plan to breastfeed. Do not breastfeed during treatment with NINLARO and for 90 days after your final dose of NINLARO.

**Tell your healthcare provider about all the medicines you take**, including prescription and over-the-counter medicines, vitamins, and herbal supplements or before starting any new medicines.

Please read the Patient Information in the accompanying full Prescribing Information.

