



TRODELVY®

sacituzumab govitecan-hziy

180 mg for injection

Getting Started

With TRODELVY

Please see Important Safety Information on pages 9-10 and click to see [Important Facts](#) about TRODELVY, including Important Warning.

WHAT IS TRODELVY?

TRODELVY® (sacituzumab govitecan-hziy) is a prescription medicine used to treat adults with hormone receptor (HR)-positive and human epidermal growth factor receptor 2 (HER2)-negative breast cancer that has spread to other parts of the body (metastatic) or cannot be removed by surgery, and who previously received endocrine therapy and at least two additional treatments for metastatic disease.

It is not known if TRODELVY is safe and effective in people with moderate or severe liver problems or in children.

IMPORTANT SAFETY INFORMATION

TRODELVY can cause serious side effects, including low white blood cell count and diarrhea:

- **Low white blood cell count (neutropenia)** which is common and can sometimes be severe and lead to infections that can be life-threatening or cause death. Your healthcare provider should check your blood cell counts during treatment. If your white blood cell count is too low, your healthcare provider may need to lower your dose, give you a medicine to help prevent low blood cell count with future doses of TRODELVY, or in some cases may stop TRODELVY. Your healthcare provider may need to give you antibiotic medicines if you develop fever while your white blood cell count is low. **Call your healthcare provider right away if you develop any of the following signs of infection:** fever, chills, cough, shortness of breath, or burning or pain when you urinate.
- **Severe diarrhea.** Diarrhea is common and can be severe. Severe diarrhea can lead to loss of too much body fluid (dehydration) and kidney problems. Your healthcare provider should monitor you for diarrhea and give you medicine as needed to help control it. If you lose too much body fluid, your healthcare provider may need to give you fluids and electrolytes to replace body salts. If you develop diarrhea during your treatment with TRODELVY, your healthcare provider should check to see if it may be caused by an infection. Your healthcare provider may decrease your dose or stop TRODELVY if your diarrhea is severe and cannot be controlled with anti-diarrheal medicines.
 - **Call your healthcare provider right away** the first time that you get diarrhea during treatment with TRODELVY; if you have black or bloody stools; if you have symptoms of dehydration, such as lightheadedness, dizziness, or faintness; if you are unable to take fluids by mouth due to nausea or vomiting; or if you are not able to get your diarrhea under control within 24 hours.

Do not receive TRODELVY if you have had a severe allergic reaction to TRODELVY. Ask your healthcare provider if you are not sure.



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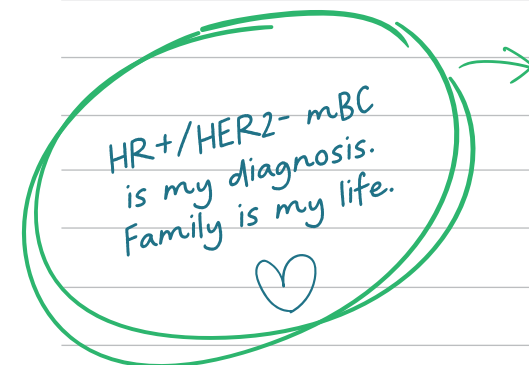
Beginning my next step with TRODELVY

HR+/HER2- mBC
When the cancer had progressed on prior treatments, I didn't know if there were other treatment options for HR-positive, HER2-negative metastatic breast cancer. Then, my healthcare provider told me about a different type of treatment called TRODELVY. It's an antibody-drug conjugate *ADC*, and it's the only one that seeks out Trop-2 proteins (more on that in a bit). I made some notes about TRODELVY, so I can tell others to discuss it with their healthcare provider too.



It's great knowing that my healthcare provider is there when I need help deciding which options are best for me based on my needs. I have to take treatment at my own pace, but knowing that I was a part of the decision to begin TRODELVY feels like I have some control as I move forward with HR+/HER2- mBC.

HR+/HER2- mBC is my diagnosis. Family is my life.



Not an actual patient.

I really like that

TRODELVY is designed for patients like me

So my doctor said that TRODELVY is a type of treatment called an antibody-drug conjugate. It's designed to work differently than traditional chemotherapy.

pronounced like "trope"

You'll want to know about Trop-2

If I don't mention Trop-2, the rest is hard to explain, so I'll tell you what I learned. Certain types of cancers have tumor cells that often contain more Trop-2 proteins than normal cells (or noncancer cells).

TRODELVY is designed to seek out Trop-2.

My healthcare provider mentioned this, so I feel like I should mention it too.



Information from laboratory studies suggest that this is how TRODELVY works. The clinical benefit of these observations is unknown.

IMPORTANT SAFETY INFORMATION (cont'd)

Allergic and infusion-related reactions which can be serious and life-threatening. Tell your healthcare provider or nurse right away if you get any of the following symptoms during your infusion of TRODELVY or within 24 hours after: swelling of your face, lips, tongue, or throat; hives; skin rash, itching, or flushing of your skin; fever; difficulty breathing or wheezing; lightheadedness, dizziness, feeling faint, or pass out; or chills or shaking chills (rigors).



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Seeks out, breaks in, and destroys



Seeks out

The antibody in TRODELVY finds and attaches to the Trop-2 protein.



Breaks in

Once attached, TRODELVY enters the cancer cell.



Destroys

Once TRODELVY enters, the anticancer medicine is released, killing the cell.

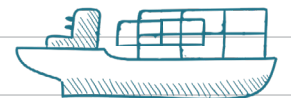
This video explains it all.



I know, that's a lot of science. To help you remember, think of TRODELVY as a cargo ship. Might seem odd, but it will make sense after you watch the video.

Click it!

TRODELVY is like a cargo ship.



IMPORTANT SAFETY INFORMATION (cont'd)

Nausea and vomiting are common with TRODELVY and can sometimes be severe. Before each dose of TRODELVY, you will receive medicines to help prevent nausea and vomiting along with medicines to take home with instructions about how to take them. Call your healthcare provider right away if you have nausea or vomiting that is not controlled with the medicines prescribed for you. Your healthcare provider may decide to decrease your dose or stop TRODELVY if your nausea and vomiting is severe and cannot be controlled with anti-nausea medicines.

Notes on the clinical trial

In case you're like me and like to do research on clinical trials, here's what I found:

- o In the clinical trial, TRODELVY was tested against traditional chemotherapy
- o TRODELVY was studied in a large phase 3 trial in adults with previously treated HR+/HER2- breast cancer that had spread to other parts of the body or could not be removed by surgery. *metastatic*

543
ADULTS*

272
PATIENTS

Patients received TRODELVY 10 mg/kg as an intravenous infusion: Day 1 and Day 8 of a 21-day treatment cycle

271
PATIENTS

Patients received physician-selected, single-agent chemotherapy (traditional chemotherapy): eribulin, capecitabine, gemcitabine, or vinorelbine

*Additional criteria included:

- o All patients had previously received at least 1 endocrine therapy, a CDK4/6 inhibitor (a type of targeted therapy), and a taxane (a type of chemotherapy) in any treatment setting (neoadjuvant, adjuvant, or metastatic).
- o At least 2 and no more than 4 prior chemotherapies for metastatic disease.
 - One of the chemotherapies could have been in the neoadjuvant or adjuvant setting if progression occurred within 12 months.

Neoadjuvant: The first treatment given to shrink a tumor before surgery or another primary treatment.

Adjuvant: A secondary cancer treatment given after the primary treatment to help lessen the chances of cancer returning.

Slow the progression of HR+/HER2- mBC

TRODELVY helped some people live without cancer progression longer than those receiving traditional chemotherapy.*

Let me break it down for you:

- o Some people who received TRODELVY lived without their cancer growing, spreading, or getting worse for about 5 and a half months.

Patients taking TRODELVY lived without cancer progressing for
5.5 MONTHS
compared to 4.0 months for patients taking traditional chemotherapy

TRODELVY = 272 patients vs traditional chemotherapy = 271 patients

- o My healthcare provider called this "median progression-free *PFS* survival," which is how long a treatment stops the growth or spread of HR+/HER2- mBC in half of the people who take it

Traditional chemotherapy consisted of single-agent chemotherapy including eribulin, capecitabine, gemcitabine, or vinorelbine.

* Individual results may vary and TRODELVY may not work for everyone.

IMPORTANT SAFETY INFORMATION (cont'd)

Before receiving TRODELVY, tell your healthcare provider about all of your medical conditions, including if you:

- have been told that you carry a gene for UGT1A1*28, which can increase your risk of getting side effects with TRODELVY, especially low white blood cell counts, with or without a fever, and low red blood cell counts.
- have liver problems.
- are pregnant or plan to become pregnant. TRODELVY can harm your unborn baby. Your healthcare provider should check to see if you are pregnant before you start receiving TRODELVY. TRODELVY may cause fertility problems in females, which could affect your ability to have a baby. Talk to your healthcare provider if fertility is a concern for you.

Develop a plan for possible side effects

I'll be real with you—TRODELVY may come with side effects. Some of these are like those you may have had while taking chemotherapy for HR+/HER2- mBC. The severity is different for everyone, but if you experience any side effects, contact your healthcare provider immediately. You may require medical attention.

Here are the most common side effects seen in those receiving TRODELVY:

- Decreased white blood cell (leukocyte and lymphocyte) and red blood cell counts
- Feeling tired or weak
- Hair loss
- Constipation
- Increased sugar levels in the blood
- Decreased protein levels (albumin) in the blood
- Decreased appetite
- Changes in kidney function test
- Increased levels of enzyme called alkaline phosphatase in the blood (test for liver or bone problems)
- Decreased levels of magnesium, potassium, and sodium in the blood

TRODELVY can cause serious side effects, including low white blood cell count (neutropenia), severe diarrhea, serious infusion-related reactions and severe allergic reactions, which could be life-threatening, as well as nausea and vomiting.

For those who took TRODELVY in the trial:

- Serious adverse reactions occurred in 28% of patients
- Serious adverse reactions in >1% of patients included diarrhea (5%), neutropenia with fever (4%), neutropenia (3%), abdominal pain, colitis, neutropenic colitis, pneumonia, and vomiting (2% each)
- 6% of patients stopped treatment due to side effects
- Side effects leading to a treatment interruption of TRODELVY occurred in 66% of patients
- Doses were reduced for 33% of patients to help manage side effects

These are not all of the possible side effects of TRODELVY. Tell your healthcare provider about any side effects that bother you or do not go away. Call your healthcare provider for medical advice about side effects. You may report side effects to the FDA at 1-800-FDA-1088.

What you can do

- ⑥ Ask about pretreatment medicine at your next appointment. Your healthcare provider may be able to pretreat some side effects before they happen
- ⑥ If you experience any side effects during treatment, tell your healthcare provider immediately. Some side effects may require medical attention
- ⑥ Learning about side effects can be a real challenge. When you feel overwhelmed, take a break



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- have liver problems.
- are pregnant or plan to become pregnant. TRODELVY can harm your unborn baby. Your healthcare provider should check to see if you are pregnant before you start receiving TRODELVY. TRODELVY may cause fertility problems in females, which could affect your ability to have a baby. Talk to your healthcare provider if fertility is a concern for you.
 - Females who can become pregnant should use effective birth control during treatment and for 6 months after your last dose of TRODELVY. Talk to your healthcare provider about birth control choices that may be right for you during this time. Tell your healthcare provider right away if you become pregnant during treatment with TRODELVY.
 - Males with a female partner who can become pregnant should use effective birth control during treatment and for 3 months after your last dose of TRODELVY.
- are breastfeeding or plan to breastfeed. It is not known if TRODELVY passes into your breastmilk and can harm your baby. Do not breastfeed during treatment and for 1 month after your last dose of TRODELVY.

Tell your healthcare provider about all the medicines you take, including prescription and over-the-counter medicines, vitamins, and herbal supplements. Certain medicines may affect the way TRODELVY works.

The most common side effects of TRODELVY include decreased white blood cell (leukocyte and lymphocyte) and red blood cell counts, feeling tired or weak, hair loss, constipation, increased sugar levels in the blood, decreased protein levels (albumin) in the blood, decreased appetite, changes in kidney function test, increased levels of enzyme called alkaline phosphatase in the blood (test for liver or bone problems), and decreased levels of magnesium, potassium, and sodium in the blood.

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Financial access and support

- Get assistance with insurance questions regarding benefits and coverage
- Receive financial support guidance, including out-of-pocket cost assessments
- Learn more about alternate assistance options that may be right for you

For additional information, contact a TRODELVY ACCESS SUPPORT Case Manager
Monday-Friday, 9 AM-7 PM EST at 1-844-TRODELVY (1-844-876-3358), option 2.

Sign up on [TRODELVY.com](https://trodelvy.com) to receive TRODELVY resources to help you with your plan.



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Have more questions about TRODELVY? Talk to your healthcare provider and click here to get answers:



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