IPSENCARES®

Coverage, Access, Reimbursement & Education Support

The Nurse Home Health Administration (NHHA) Program

Making Somatuline® Depot (lanreotide) treatment more accessible for your eligible* patients

Actor portrayal

Getting your patients started with the program is simple:

1. Evaluate your patients and decide who may be appropriate to receive Somatuline Depot injections at home or the location of their choice.
2. Complete a Somatuline Depot IPSEN CARES Enrollment Form and check the box requesting NHHA. Visit IPSENCARES.com to download the form or enroll your patients online.
3. IPSEN CARES verifies benefits and eligibility as described on the next page.

INDICATIONS

SOMATULINE® DEPOT (lanreotide) is a somatostatin analog indicated for:

- the treatment of adult patients with unresectable, well- or moderately-differentiated, locally advanced or metastatic gastroenteropancreatic neuroendocrine tumors (GEPNETs) to improve progression-free survival.
- the treatment of adults with carcinoid syndrome; when used, it reduces the frequency of short-acting somatostatin analog rescue therapy.
- the long-term treatment of patients with acromegaly who have had an inadequate response to surgery and/or radiotherapy, or for whom surgery and/or radiotherapy is not an option. The goal of treatment in acromegaly is to reduce growth hormone (GH) and insulin growth factor-1 (IGF-1) levels to normal.

Please see Important Safety Information throughout and accompanying full Prescribing Information and Patient Information.

*Patient eligibility restrictions available on page 2.

Somatuline® Depot (lanreotide) Injection 60 mg 90 mg 120 mg

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Our nurses can help keep eligible patients connected with treatment

- **Intended for administration by a healthcare provider**

You recognize the benefits that Somatuline® Depot (lanreotide) can offer your patients and understand the importance of proper administration, but you also know that office visits for injections are often difficult for patients.

The NHHA Program helps ensure that eligible patients who have difficulty making it to your office receive Somatuline Depot treatment from a registered nurse without the need to leave their homes.

The program is not intended to replace regular office visits or the care you provide.

Coordinating nurse administration

IPSEN CARES coordinates the details of the NHHA Program, including:

- **Shipments of Somatuline Depot**
  - Once benefits are verified, an IPSEN CARES Patient Access Manager coordinates the shipments via specialty pharmacy
  - The specialty pharmacy then sends Somatuline Depot directly to the patient
- **Assignment of a Home Health Nurse (HHN)**
  - Each patient is assigned an HHN who contacts the patient, confirms the date of the first injection, and schedules subsequent injections
- **Keeping Track of Visits**
  - IPSEN CARES will track each NHHA visit and keep on file

Determining Patient Eligibility

The NHHA Program is an offering of IPSEN CARES available at your discretion for all eligible patients prescribed Somatuline Depot for an approved FDA indication.

- A physician must prescribe Somatuline Depot to be administered by NHHA
- The program is available to most patients covered by commercial insurance plans
- Patients may not participate if prescriptions are eligible to be paid in part or full by any state or federally funded programs, including, but not limited to, Medicare or Medicaid, VA, DOD, or TRICARE
- Residents of Massachusetts, Michigan, Minnesota, and Rhode Island are not eligible

IMPORTANT SAFETY INFORMATION

Contraindications

- SOMATULINE DEPOT is contraindicated in patients with hypersensitivity to lanreotide. Allergic reactions (including angioedema and anaphylaxis) have been reported following administration of lanreotide.

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IMPORTANT SAFETY INFORMATION (continued)

Warnings and Precautions

- **Cholelithiasis and Gallbladder Sludge**
  - SOMATULINE DEPOT may reduce gallbladder motility and lead to gallstone formation.
  - Periodic monitoring may be needed.
  - If complications of cholelithiasis are suspected, discontinue SOMATULINE DEPOT and treat appropriately.
- **Hypoglycemia or Hyperglycemia**
  - Patients treated with SOMATULINE DEPOT may experience hypoglycemia or hyperglycemia.
  - Blood glucose levels should be monitored when SOMATULINE DEPOT treatment is initiated, or when the dose is altered, and antidiabetic treatment should be adjusted accordingly.
- **Cardiovascular Abnormalities**
  - SOMATULINE DEPOT may decrease heart rate.
  - In cardiac studies with acromegalic patients, the most common cardiac adverse reactions were sinus bradycardia, bradycardia, and hypertension.
  - In patients without underlying cardiac disease, SOMATULINE DEPOT may lead to a decrease in heart rate without necessarily reaching the threshold of bradycardia.
  - In patients suffering from cardiac disorders prior to treatment, sinus bradycardia may occur. Care should be taken when initiating treatment in patients with bradycardia.
- **Thyroid Function Abnormalities**
  - Slight decreases in thyroid function have been seen during treatment with lanreotide in acromegalic patients.
  - Thyroid function tests are recommended where clinically appropriate.
- **Monitoring/Laboratory Tests:** In acromegaly, serum GH and IGF-1 levels are useful markers of the disease and effectiveness of treatment.

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For more information, visit IPSENCARES.com

or call 1-866-435-5677 Monday – Friday, 8:00 AM – 8:00 PM ET.

Actor portrayal

IMPORTANT SAFETY INFORMATION (continued)

Most Common Adverse Reactions

- **Acromegaly:** Adverse reactions in >5% of patients who received SOMATULINE DEPOT were diarrhea (37%), cholelithiasis (20%), abdominal pain (19%), nausea (11%) injection-site reactions (9%) constipation (8%) flatulence (7%) vomiting (7%) arthralgia (7%) headache (7%) and loose stools (6%).
- **GEP-NETs:** Adverse reactions in >10% of patients who received SOMATULINE DEPOT were abdominal pain (34%), musculoskeletal pain (19%), vomiting (19%), headache (16%), injection site reaction (15%), hyperglycemia (14%), hypertension (14%), and cholelithiasis (14%).
- **Carcinoid Syndrome:** Adverse reactions occurring in the carcinoid syndrome trial were generally similar to those in the GEP-NET trial. Adverse reactions in ≥5% of patients who received SOMATULINE DEPOT and at least 5% greater than placebo were headache (12%), dizziness (7%) and muscle spasm (5%).

Drug Interactions

- SOMATULINE DEPOT may decrease the absorption of cyclosporine (dosage adjustment may be needed); increase the absorption of bromocriptine; and require dosage adjustment for bradycardia-inducing drugs (e.g., beta-blockers).

Special Populations

- **Lactation:** Advise women not to breastfeed during treatment and for 6 months after the last dose.
- **Moderate to Severe Renal and Hepatic Impairment:** See full prescribing information for dosage adjustment in patients with acromegaly.

To report SUSPECTED ADVERSE REACTIONS, contact Ipsen Biopharmaceuticals, Inc. at 1-855-463-5127 or FDA at 1-800-FDA-1088 or www.fda.gov/safety/medwatch-fda-safety-information-and-adverse-event-reporting-program.

Please see accompanying full Prescribing Information and Patient Information.

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