

**NOW APPROVED FOR ADULTS WITH  
MULTIPLE MYELOMA (MM) WHO HAVE  
RECEIVED AT LEAST 2 KINDS OF TREATMENT  
REGIMENS THAT HAVE NOT WORKED OR  
HAVE STOPPED WORKING**

**CHANGING  
MY **mm**  
STORY  
STARTS WITH**



Not an actual patient.

**It's never too early to talk to your doctor about a  
one-time infusion\* with ABECMA<sup>®</sup> — a CAR T cell therapy**


### **What is ABECMA?**


ABECMA is a prescription medicine used to treat adults with relapsed or refractory **multiple myeloma (MM)**, when:

- ✓ you have tried two or more kinds of treatments that have not worked or have stopped working, **AND**
- ✓ you have received at least one therapy from each of these drug classes:
  - an immunomodulatory agent
  - a proteasome inhibitor
  - an anti-CD38 antibody

### **Important Facts About ABECMA<sup>®</sup> (idecabtagene vicleuce)l**

#### **WARNING: RISK OF SERIOUS SIDE EFFECTS**

 ABECMA may cause side effects that are life-threatening and can lead to death, including risk of **cytokine release syndrome (CRS), neurologic toxicity, infections, low blood cell counts (cytopenia), and certain types of blood cancers.**

 **Call your healthcare provider or get emergency help right away** if you experience any of the following symptoms:

- trouble breathing
- fever (100.4°F/38°C or higher)
- chills or shivering
- confusion
- feeling dizzy or lightheaded
- shaking or twitching (tremor)
- fast or irregular heartbeat
- feeling severely tired or weak
- severe nausea, vomiting, or diarrhea

Because of the risk of serious side effects, your healthcare provider will give you an **ABECMA Patient Wallet Card** that describes symptoms to look out for that require emergency medical care right away. It's important that you tell your healthcare providers that you have received ABECMA and to show them your ABECMA Patient Wallet Card. Your healthcare provider may give you other medicines to treat your side effects.

\*The treatment process includes blood collection, CAR T cell creation, administration, and adverse event monitoring.  
CAR=chimeric antigen receptor.

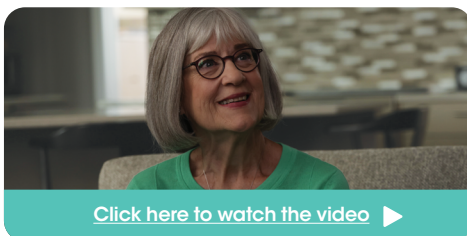
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# A one-time infusion\* unlike anything you may have had before



If you or someone you care about has multiple myeloma that has come back or has stopped responding to treatment, it may be time to start thinking about **CAR T cell therapy**. This brochure will help you learn about ABECMA®, a treatment designed to use your body's own cells to find and fight cancer.

## Hear how Mary and other people changed their multiple myeloma stories with ABECMA



It's such a gift not to be tethered to the infusion center, and to be able to spend time with my family and my friends.

*Mary, treated with ABECMA*



### Tips for caregivers

Throughout this brochure you'll find tips to help you and your loved one work together throughout their ABECMA treatment journey.

\*The treatment process includes blood collection, CAR T cell creation, administration, and adverse event monitoring.

## IMPORTANT SAFETY INFORMATION (cont'd)

### How will I receive ABECMA?

**ABECMA is a CAR (chimeric antigen receptor) T-cell therapy. It is a prescription medicine made using your own white blood cells.** These white blood cells have been changed (genetically modified) to find and attack your multiple myeloma cells. ABECMA is given as an intravenous (IV) infusion.

### Before receiving your ABECMA infusion:



Your blood cells will be collected by a process called leukapheresis (LOO-kuh-feh-REE-sis), sometimes called apheresis.

Please see Important Safety Information throughout and [click here for full Prescribing Information](#), including **Boxed WARNINGS** and [Medication Guide](#).

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Throughout the brochure you will see **bolded, dark teal words**.

These glossary terms and their definitions can be found on pages 25 and 26.

ABECMA is only given at certified treatment centers by trained healthcare teams. Visit [Abecma.com](https://www.abecma.com) to find a certified treatment center near you.

# Understanding CAR T cell therapy and ABECMA<sup>®</sup>

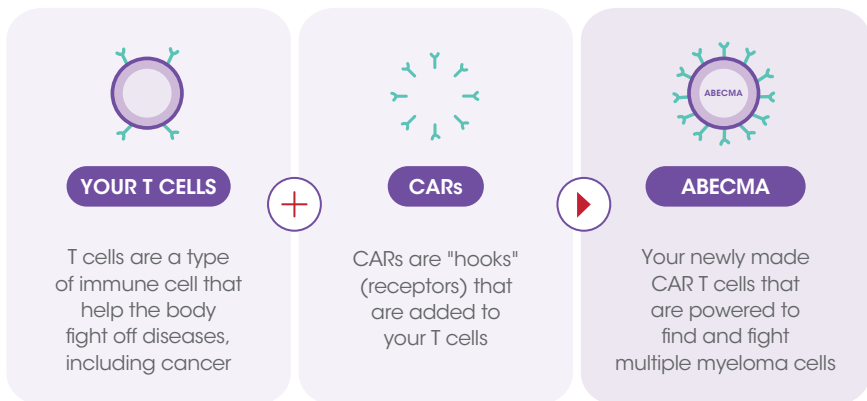


## ABECMA is a CAR T cell therapy created just for you

ABECMA uses cells from your body's immune system to fight multiple myeloma. ABECMA uses T cells that have been reprogrammed to find and destroy specific target cells, which may include cancer cells and normal cells.

One type of **immune cell** is the **T cell**, which helps to fight off harmful diseases that can make you sick. T cells do this by using hooks on their surfaces called receptors, as explained in the diagram below.

### How ABECMA is made



ABECMA cells are created by adding new hooks, called chimeric antigen receptors (CARs), to your existing T cells. This makes them better able to attach to multiple myeloma cells and destroy them. ABECMA can also target normal, healthy cells.

**Once your ABECMA CAR T cells have been made, they are put back in your body through a one-time infusion.\***

\*The treatment process includes blood collection, CAR T cell creation, administration, and adverse event monitoring.

Please see Important Safety Information throughout and [click here for full Prescribing Information](#), including **Boxed WARNINGS** and [Medication Guide](#).

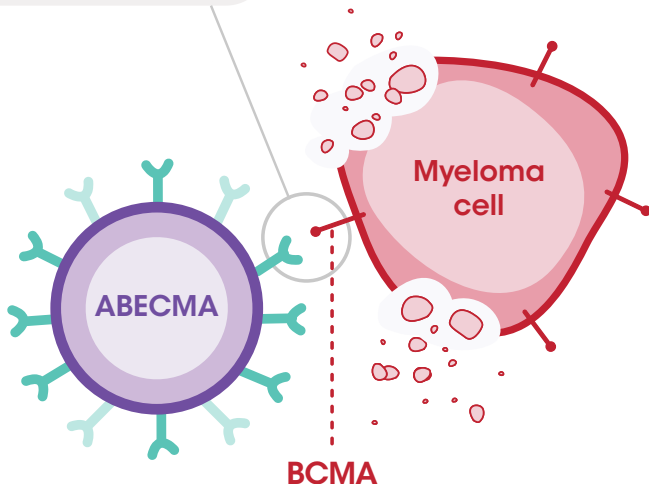
# Understanding CAR T cell therapy and ABECMA® (cont'd)



## Here's how ABECMA works

Inside your body, ABECMA CAR T cells look for a **protein** found on multiple myeloma cells called B-cell maturation antigen, or **BCMA**. It may be found on some healthy cells, too. Once found, your ABECMA CAR T cells attach to the multiple myeloma cells and destroy them.

ABECMA attaches to BCMA, a protein that is found on the outside of nearly all multiple myeloma cells and on some normal plasma cells.



## IMPORTANT SAFETY INFORMATION (cont'd)

### How will I receive ABECMA? (cont'd)



Your blood cells will be sent to a manufacturing site to make your ABECMA. Based on clinical trial experience, your ABECMA will be ready to be shipped back to your healthcare provider about **4 weeks** after your cells are received at the manufacturing site, but the time may vary.



Your healthcare provider will give you **3 days** of chemotherapy to prepare your body before receiving your ABECMA treatment.

Please see Important Safety Information throughout and [click here for full Prescribing Information](#), including **Boxed WARNINGS** and [Medication Guide](#).

# Find out if ABECMA<sup>®</sup> may be right for you



## ABECMA may be an option after you've received other treatments

ABECMA may be a treatment option when multiple myeloma has come back (relapsed) or stopped responding to treatment (refractory) after you have received at least 2 kinds of treatment regimens that include a therapy from each of 3 drug classes.

This includes at least 1 from each of the 3 drug classes below:

Immunomodulatory Agent	Proteasome Inhibitor	Anti-CD38 Monoclonal Antibody
<ul style="list-style-type: none"><li>▶ Lenalidomide</li><li>▶ Pomalidomide</li></ul>	<ul style="list-style-type: none"><li>▶ Bortezomib</li><li>▶ Carfilzomib</li><li>▶ Ixazomib</li></ul>	<ul style="list-style-type: none"><li>▶ Daratumumab</li><li>▶ Isatuximab-irfc</li></ul>

You may have been given a combination of these drug types at one time.

Please see product safety information at the respective websites for agents listed above.

Ask your doctor about the clinical factors they will consider, such as age and overall health, when deciding if ABECMA is right for you.

## IMPORTANT SAFETY INFORMATION (cont'd)

### How will I receive ABECMA? (cont'd)

#### On the day of your ABECMA infusion:



You will receive ABECMA through a tube (catheter) placed into your vein (intravenous infusion). Your dose of ABECMA may be given in one or more infusion bags. Each infusion bag usually takes up to **30 min**.

#### After receiving your ABECMA infusion:



For at least **1 week** (7 days) after receiving ABECMA, you will stay at the facility where you received your treatment and be monitored daily.



For **4 weeks** after receiving ABECMA, you should plan to stay close (within 2 hours) to the facility where you received your treatment. During this time, your healthcare provider will check to see that your treatment is working and help you with any side effects that may occur.

Please see Important Safety Information throughout and [click here for full Prescribing Information](#), including **Boxed WARNINGS** and [Medication Guide](#).

# Find out if ABECMA® may be right for you (cont'd)



## Focus on your freedom after receiving a one-time infusion\* with ABECMA

While regular check-ins with your healthcare team are still required, the following are **NOT** required for your multiple myeloma while responding to ABECMA:



REPEATED INFUSIONS



MAINTENANCE THERAPY



DAILY PILLS

## ABECMA is different from a stem cell transplant

A stem cell transplant is a medical treatment that replaces your bone marrow with healthy cells. The replacement cells can either come from your own body or from a donor. ABECMA works with your immune system, modifying your own T cells to find and destroy MM cells. ABECMA may be an option even if a stem cell transplant is not, or if you've already had a stem cell transplant.†

- ▶ ABECMA uses customized cells, where your **T cells** are modified to work just for you
- ▶ A short course of **chemotherapy** is required before your ABECMA treatment
- ▶ The initial **monitoring period** for ABECMA lasts at least 7 days at the treatment center
- ▶ No **maintenance therapy** for the multiple myeloma is required after ABECMA, as long as you are responding to treatment‡

\*The treatment process includes blood collection, CAR T cell creation, administration, and adverse event monitoring.

†92% of people in the ABECMA clinical trials had previously received an SCT.

‡Regular check-ins with your healthcare team are still needed.

 Learn more about how ABECMA is given on [page 15](#).

Please see Important Safety Information throughout and [click here for full Prescribing Information](#), including **Boxed WARNINGS** and [Medication Guide](#).



Not an actual patient.

# ABECMA<sup>®</sup> is powered to fight multiple myeloma in a one-time infusion\*



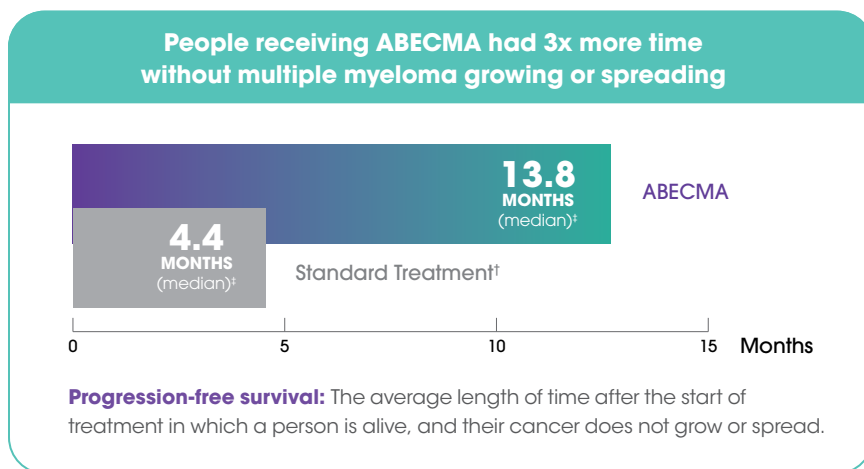
## Here's how ABECMA was studied

In an ABECMA **clinical study**, 386 people were randomly put into 1 of 2 treatment groups:

- ▶ 254 people received ABECMA
- ▶ 132 people received standard treatment†

Everyone in the study previously received 2 to 4 treatments that had not worked or stopped working, including an immunomodulatory agent, a proteasome inhibitor, and an anti-CD38 monoclonal antibody. People treated with ABECMA were followed up by their healthcare team at 15.9 months (median‡) to see how well they were responding to treatment.

## See the results



Individual results may vary.

\*The treatment process includes blood collection, CAR T cell creation, administration, and adverse event monitoring.

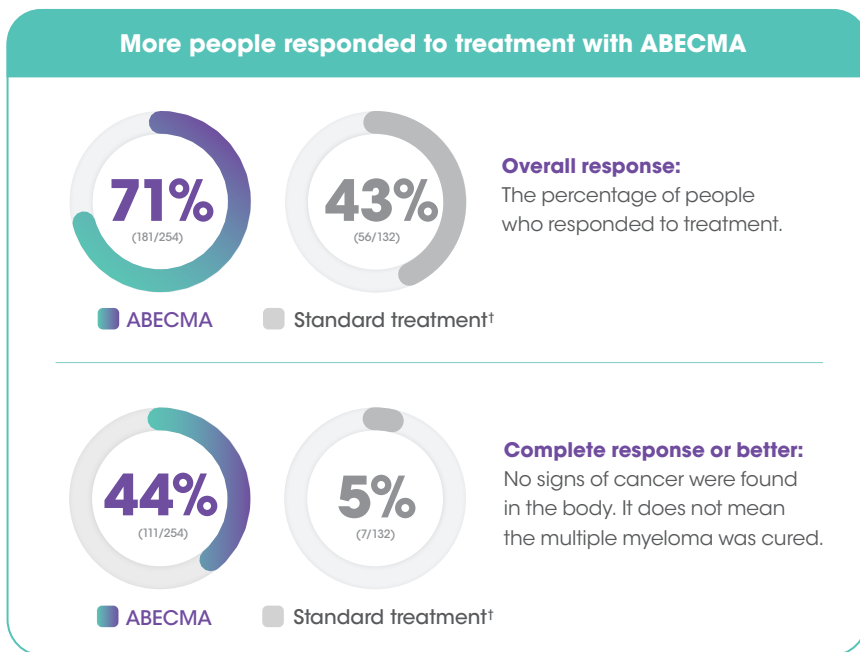
†People who were given standard treatment got one of the following medication combinations: daratumumab, pomalidomide, dexamethasone (DPd); daratumumab, bortezomib, dexamethasone (DvD); ixazomib, lenalidomide, dexamethasone (IRd); carfilzomib, dexamethasone (Kd); or elotuzumab, pomalidomide, dexamethasone (EPd).

‡Median is the middle number in a group of numbers arranged from lowest to highest.

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# ABECMA<sup>®</sup> is powered to fight multiple myeloma in a one-time infusion\* (cont'd)



Patients were followed for 18.7 months (median<sup>‡</sup>).

People responded to ABECMA for 14.8 months (median<sup>‡</sup>).

- ▶ This is called **duration of response** and is the length of time cancer responded to treatment without growing or spreading. Individual results may vary.

## IMPORTANT SAFETY INFORMATION (cont'd)

### What should I avoid after receiving ABECMA?

- X Do not** drive, operate heavy machinery, or do any other activity that could be dangerous if you are not mentally alert, for at least **8 weeks** after you get ABECMA. This is because ABECMA may affect your ability to be mentally alert in the following ways:
  - temporary memory and coordination problems
  - sleepiness
  - dizziness
  - confusion
  - seizures
- X Do not** donate blood, organs, tissues, or cells for transplantation.

Please see Important Safety Information throughout and [click here for full Prescribing Information](#), including **Boxed WARNINGS** and [Medication Guide](#).

## Early death

- ▶ In a study comparing ABECMA to standard regimens, a higher number of patients in the ABECMA group experienced death within 9 months of the start of the trial compared with the standard regimens group
- ▶ This higher rate of early death was observed before receiving ABECMA, with the main reason being progression of multiple myeloma. There was also an increase in the rate of death from adverse events after ABECMA

## Cytokine release syndrome (CRS)

Treatment with ABECMA can sometimes cause a serious side effect called CRS. CRS happens when the **immune system** responds to an infection or a drug more aggressively than it should, which can be harmful, or in some cases, fatal.

### Symptoms of CRS include:



- ▶ Fever
- ▶ Headache
- ▶ Difficulty breathing
- ▶ Fast heartbeat
- ▶ Dizziness or lightheadedness
- ▶ Low blood pressure
- ▶ Nausea
- ▶ Fatigue

These symptoms may feel similar to the flu. Please talk to your healthcare provider if you experience these symptoms.

You will need to stay in the certified treatment center for at least 7 days after your **infusion** so that your healthcare team can monitor you for any side effects. Call your doctor if you are experiencing any of these or other symptoms after leaving the hospital.

**Side effects are possible and should be managed  
by your healthcare team.**

## When can CRS happen, and how long might it last?

### When might it start?

**1 day**

after infusion  
(range: 1 to 27 days)\*

### How long might it last?

**5 days**

after symptoms begin  
(range: 1 to 63 days)†

You will stay in the certified treatment center for at least 7 days after your ABECMA infusion. This way your healthcare team can monitor you for any side effects.

## In 2 ABECMA clinical studies, most people who experienced CRS had mild to moderate symptoms:

- ▶ **11% of participants (39/349)** did not experience CRS
- ▶ **7% of participants (23/349)** experienced moderate to severe CRS
- ▶ **<1% of participants (3/349)** experienced CRS leading to death

\*The median time to onset was 1 day, with a range of 1 to 27 days.

†The median duration was 3 days, with a range of 1 to 63 days.

# Possible side effects with ABECMA<sup>®</sup> (cont'd)



## Neurologic toxicity

Treatment with ABECMA can cause a serious side effect called neurologic toxicity. Neurologic toxicity affects the **nervous system** and can change how the brain works or its structure, making it hard to think clearly.

### Other symptoms of neurologic toxicity include:



- ▶ Confusion
- ▶ Seizures
- ▶ Shaking or twitching
- ▶ Difficulty speaking or slurred speech
- ▶ Disorientation
- ▶ Severe sleepiness

Do not drive, operate heavy machinery, or do other activities that could be dangerous if you are not mentally alert for at least 8 weeks after you receive ABECMA.

You will need to stay in the certified treatment center for at least 7 days after your **infusion** so that your healthcare team can monitor you for any side effects. Call your doctor if you are experiencing any of these or other symptoms after leaving the hospital.

**Side effects are possible and should be managed by your healthcare team.**

# Possible side effects with ABECMA<sup>®</sup> (cont'd)



## When can neurologic toxicity happen, and how long might it last?

### When might it start?

**2 days**

after infusion  
(range: 1 to 148 days)\*

### How long might it last?

**5 days**

after symptoms begin  
(range: 1 to 245 days in 123 out of 139  
people whose neurotoxicity resolved)†

You will stay in the certified treatment center for at least 7 days after your ABECMA infusion. This way your healthcare team can monitor you for any side effects.

## In 2 ABECMA clinical studies, most people did not experience neurologic toxicity:

- ▶ **60% of participants (210/349)** did not experience neurologic toxicity
- ▶ **4.6% (16/349)** experienced moderate or severe neurologic toxicity
- ▶ **<1% of participants (1/349)** experienced neurologic toxicity leading to death

### Most common side effects

The most common side effects of ABECMA include:

- feeling tired or weak
- fever (100.4°F/38°C or higher)
- chills or shivering
- severe nausea or diarrhea
- decreased appetite
- headache
- dizziness or lightheadedness
- confusion
- trouble speaking or slurred speech
- cough
- trouble breathing
- fast or irregular heartbeat

These are not all of the possible side effects of ABECMA.

\*The median duration of CAR T cell-associated neurotoxicity was 8 days (range: 1 to 720 days) in all patients including those with ongoing neurologic events.

†The median time to onset was 2 days, with a range of 1 to 148 days.

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# What to expect during the ABECMA<sup>®</sup> treatment process

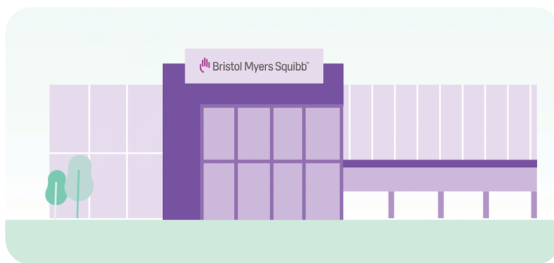


Once you and your doctor decide that ABECMA is right for you, it's important to understand the treatment process and get to know your ABECMA care team.

## **Meet your ABECMA care team**



## **Learn how ABECMA is made**



### **Tips for caregivers**

Getting to know the ABECMA treatment process can help you feel prepared. Your loved one may need support with scheduling and transportation to appointments, keeping up with tasks, and more.

Please see Important Safety Information throughout and [click here for full Prescribing Information](#), including **Boxed WARNINGS** and [Medication Guide](#).

# What to expect during the ABECMA<sup>®</sup> treatment process (cont'd)



## Overview of the 3 steps to treatment

### Step 1: Before receiving your ABECMA infusion



#### Blood collection (apheresis)

**Time:** 2-6 hours

**Location:** Certified treatment or apheresis center



#### CART cell creation

**Time:** About 4 weeks (time may vary)

**Location:** Specialized manufacturing laboratory



#### Pre-infusion treatment

**Time:** 3 days of short-course chemotherapy

**Location:** Treatment is given at the center by appointment

### Step 2: On the day of your ABECMA infusion



#### One-time ABECMA infusion

**Time:** Up to 30 minutes per infusion bag (1 or more)

**Location:** Certified treatment center (Day 1 of 1-week hospital stay)

### Step 3: After receiving your ABECMA infusion



#### Initial monitoring

**Time:** At least 4 weeks

**Location:** Certified treatment center (during initial 1-week hospital stay), and staying within 2 hours of the treatment center (for at least 4 weeks)



#### Long-term follow-up

**Time:** Ongoing

**Location:** Primary oncologist, for regular check-ups

Get more details about the steps to treatment on the following pages.

Please see Important Safety Information throughout and [click here for full Prescribing Information](#), including **Boxed WARNINGS** and [Medication Guide](#).

## ABECMA treatment details

### Step 1: Before receiving your ABECMA infusion



#### Blood collection

Your **T cells** will be collected through a process called **apheresis** (sometimes called leukapheresis).

- ▶ Your blood is drawn and the components separated into groups. Your T cells are collected and other parts of your blood are returned back into your body
- ▶ Apheresis can be done on Day 1 as an outpatient, and usually takes 2 to 6 hours



#### CAR T cell creation

After your T cells are collected, they are sent to a specialized manufacturing laboratory.

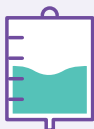
- ▶ At the laboratory, “hooks” called CARs are added to your T cells to make the ABECMA CAR T cells that are unique to you
  - ▶ After your ABECMA CAR T cells are made, they are multiplied to make more multiple myeloma-fighting cells. This takes about 4 weeks
- ▶ There is a risk that the manufacturing process may not work. In an ABECMA **clinical study**, 6 out of 249 people were impacted. Talk with your doctor for more information

**You will not require any additional treatment\* while responding to your one-time infusion of ABECMA.**

\*Regular check-ins with your healthcare team are still needed.



## Step 1: Before receiving your ABECMA infusion (cont'd)



### Pre-infusion treatment

- ▶ Before your **infusion**, you'll receive a 3-day short course of **chemotherapy** to help prepare your body for ABECMA
- ▶ While your CAR T cells are being made, you may receive other treatments for the multiple myeloma

Please see Important Safety Information throughout and [click here](#) for full [Prescribing Information](#), including **Boxed WARNINGS** and [Medication Guide](#).

Not an actual patient  
and caregiver.



## Step 2: On the day of your ABECMA infusion



### One-time ABECMA infusion

You will receive your one-time ABECMA **infusion** at a certified treatment center from your trained healthcare team.

- ▶ Your dose of ABECMA may be given in 1 or more infusion bags
- ▶ Your infusion usually takes up to 30 minutes for each infusion bag

## Step 3: After receiving your ABECMA infusion



In the weeks following your ABECMA infusion, you will be monitored for side effects.

### Initial monitoring

#### For the first 7 days after treatment

Monitoring at the treatment center

- ▶ You will stay at the certified treatment center where you got your treatment for at least **7 days** after the infusion to be monitored for side effects



### Tips for caregivers

As a caregiver, you are in a unique position to quickly alert your loved one's care team if any side effects occur. Keep an eye out for any signs or symptoms and call their healthcare team right away if you have any questions.

## Step 3: After receiving your ABECMA infusion (cont'd)



### Initial monitoring (cont'd)

#### During weeks 2 to 4

- ▶ You should plan to stay within 2 hours of the certified treatment center for at least **4 weeks** after receiving ABECMA. Your caregiver will keep an eye on how you're doing, will check and record your temperature at least 3 times a day, and take you to scheduled appointments at the treatment center



### Long-term follow-up

#### After at least 4 weeks of monitoring

- Monitor for side effects and tell your doctor right away if you feel symptoms of CRS or neurologic toxicity
- ▶ Do not drive, operate heavy machinery, or do other activities that could be dangerous if you are not mentally alert for at least **8 weeks** after you receive ABECMA

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Not an actual patient  
and caregiver.



Support that's with you,  
every step of the way



## Your caregiver can make a difference

Caregivers play an essential role during your ABECMA® treatment journey. They can lend a helping hand and support you before and after your ABECMA **infusion**. Plan with family and friends so that caregiver duties can be shared by more than one person.

## Before your ABECMA infusion, your caregiver can help:

- ▶ Take notes and ask questions at the doctor's office
- ▶ Schedule appointments
- ▶ Organize and share medical and insurance information with the healthcare team
- ▶ Help with day-to-day tasks, such as driving, meals, laundry, and cleaning



Not an actual patient and caregiver.

## After your ABECMA infusion, your caregiver can help:

- ▶ Look for symptoms, side effects, and other changes in health and/or behaviors
- ▶ Check and record your temperature at least 3 times a day
- ▶ Ask the healthcare team questions
- ▶ Call 911 or your healthcare team in an emergency



### Tips for caregivers

Don't go at it alone. Being a caregiver can be a lot of responsibility, so it's important to take care of yourself and reach out to others for support.

For more caregiver resources and information, visit [Abecma.com](https://www.abecma.com)

Please see Important Safety Information throughout and [click here for full Prescribing Information](#), including **Boxed WARNINGS** and [Medication Guide](#).

## Personalized support throughout ABECMA treatment



If a CAR T cell therapy treatment center decides a Bristol Myers Squibb CAR T cell therapy is right for you, Cell Therapy 360<sup>®</sup> offers solutions-oriented programs for you and your caregiver. The assistance programs are designed to support you throughout your treatment journey. Eligibility requirements may apply.



### A dedicated Patient Support Navigator

If you are receiving Bristol Myers Squibb CAR T cell therapy and you choose to enroll in the Cell Therapy 360 patient support program, you will be assigned a personal Patient Support Navigator to provide customized solutions and support throughout your treatment journey.



### Logistical support

Cell Therapy 360 may be able to support eligible patients\* and a caregiver with transportation, lodging, and meal assistance throughout the patient journey.

\*Eligibility requirements apply.



### Financial support

Through the Copay Assistance Program, Cell Therapy 360 can cover out-of-pocket expenses for commercially insured patients for the Bristol Myers Squibb CAR T cell therapy product.<sup>†</sup>

<sup>†</sup>The program is not available for patients who are enrolled in Medicare, Medicaid, TRICARE, the Veterans Affairs (VA), or any other federal or state healthcare program. The program will cover out-of-pocket expenses of the Bristol Myers Squibb product only. Limitations apply. It does not cover the costs of any other healthcare provider charges or any other treatment costs. Patients are responsible for non-drug-related out-of-pocket costs. Additional eligibility requirements may apply. Bristol Myers Squibb reserves the right to rescind, revoke, or amend this program without notice.

You may enroll in support programs after a certified CAR T cell therapy treatment center determines that ABECMA is the right treatment for you.




### To learn more about the support programs available through Cell Therapy 360:

- ▶ Talk to your healthcare team for more information
- ▶ Visit [CellTherapy360.com](https://www.CellTherapy360.com)
- ▶ Call **1-888-805-4555 Option 1** (available Monday through Sunday, 24 hours a day)

## Important Facts About ABECMA® (idecabtagene vicleuce)l

This is a summary of important information that you need to know about ABECMA. Your healthcare team can work with you to help answer any questions you may have about this medication. Keep this document in a safe place, so you can refer to it before and during your treatment.

Look out for the following icons as you read:

 Talk to your healthcare team

 Call a healthcare provider right away


 Helpful information to remember

### What is ABECMA?

ABECMA is a prescription medicine used to treat adults with relapsed or refractory **multiple myeloma (MM)**, when:

- ✓ you have tried two or more kinds of treatments that have not worked or have stopped working, **AND**
- ✓ you have received at least one therapy from each of these drug classes:
  - an immunomodulatory agent
  - a proteasome inhibitor
  - an anti-CD38 antibody

### WARNING: RISK OF SERIOUS SIDE EFFECTS

 ABECMA may cause side effects that are life-threatening and can lead to death, including risk of **cytokine release syndrome (CRS), neurologic toxicity, infections, low blood cell counts (cytopenia), and certain types of blood cancers.**

 **Call your healthcare provider or get emergency help right away** if you experience any of the following symptoms:


- trouble breathing
- fever (100.4°F/38°C or higher)
- chills or shivering
- confusion
- feeling dizzy or lightheaded
- shaking or twitching (tremor)
- fast or irregular heartbeat
- feeling severely tired or weak
- severe nausea, vomiting, or diarrhea


Because of the risk of serious side effects, your healthcare provider will give you an **ABECMA Patient Wallet Card** that describes symptoms to look out for that require emergency medical care right away. It's important that you tell your healthcare providers that you have received ABECMA and to show them your ABECMA Patient Wallet Card. Your healthcare provider may give you other medicines to treat your side effects.

### How will I receive ABECMA?

**ABECMA is a CAR (chimeric antigen receptor) T-cell therapy. It is a prescription medicine made using your own white blood cells.** These white blood cells have been changed (genetically modified) to find and attack your multiple myeloma cells. ABECMA is given as an intravenous (IV) infusion.


#### Before receiving your ABECMA infusion:

 Your blood cells will be collected by a process called leukapheresis (LOO-kuh-feh-REE-sis), sometimes called apheresis.

 Your blood cells will be sent to a manufacturing site to make your ABECMA. Based on clinical trial experience, your ABECMA will be ready to be shipped back to your healthcare provider about **4 weeks** after your cells are received at the manufacturing site, but the time may vary.

 Your healthcare provider will give you **3 days** of chemotherapy to prepare your body before receiving your ABECMA treatment.

#### On the day of your ABECMA infusion:

 You will receive ABECMA through a tube (catheter) placed into your vein (intravenous infusion). Your dose of ABECMA may be given in one or more infusion bags. Each infusion bag usually takes up to **30 min**.

## Important Facts About ABECMA® (cont'd)

### How will I receive ABECMA? (cont'd)

#### After receiving your ABECMA infusion:



For at least **1 week** (7 days) after receiving ABECMA, you will stay at the facility where you received your treatment and be monitored daily.



For **4 weeks** after receiving ABECMA, you should plan to stay close (within 2 hours) to the facility where you received your treatment. During this time, your healthcare provider will check to see that your treatment is working and help you with any side effects that may occur.

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### What should I avoid after receiving ABECMA?

**X Do not** drive, operate heavy machinery, or do any other activity that could be dangerous if you are not mentally alert, for at least **8 weeks** after you get ABECMA. This is because ABECMA may affect your ability to be mentally alert in the following ways:

- temporary memory and coordination problems
- sleepiness
- dizziness
- confusion
- seizures

**X Do not** donate blood, organs, tissues, or cells for transplantation.

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### What are the possible or reasonably likely side effects of ABECMA?

#### Serious side effects

ABECMA can increase the risk of serious side effects. A **serious side effect** is a side effect that is severe or life-threatening and can lead to death. The serious side effects of ABECMA include, but are not limited to:

**Early deaths.** In a clinical study comparing ABECMA to standard treatments, **a higher proportion of people died in the first 9 months from when they were assigned to receive ABECMA compared to people assigned to receive standard treatments.** The higher rate of early death was seen before people received ABECMA, and the main reason was that their multiple myeloma had gotten worse. There was also an increase in the rate of death from side effects after receiving ABECMA.

**Cytokine release syndrome (CRS).** ABECMA can increase the risk of CRS, a very common side effect which can be severe or fatal. CRS happens when the immune system responds to an infection or a drug more aggressively than it should. Symptoms to look out for include:

- fever (100.4°F/38°C or higher)
- nausea
- low blood pressure
- trouble breathing
- headache
- feeling tired or weak
- dizziness or lightheadedness
- fast heartbeat

**Infections.** ABECMA can increase the risk of life-threatening infections that may lead to death. Symptoms to look out for include:

- fever (100.4°F/38°C or higher)
- chills
- any other signs or symptoms of an infection

**Low blood cell counts (cytopenia).** ABECMA can lower the amount of one or more types of your blood cells (red blood cells, white blood cells, or platelets), which may make you feel weak or tired, and could increase your risk of severe infection or bleeding. After treatment, your healthcare provider will test your blood to check for this. Symptoms to look out for include:

- fever (100.4°F/38°C or higher)
- feeling weak or tired
- bruising
- bleeding

## Important Facts About ABECMA® (cont'd)

**Other (secondary) blood cancers.** ABECMA may increase your risk of getting certain types of cancers, including certain types of blood cancers. You may hear your healthcare provider call these "secondary hematological malignancies."

 Your healthcare provider should **monitor you for any signs of secondary cancers.**

ABECMA may cause a **false-positive HIV (Human Immunodeficiency Virus) test result** by some commercial tests.


 **Call your healthcare provider right away** if you have any of these symptoms after receiving ABECMA. Remember to bring and show your **ABECMA Patient Wallet Card** to any healthcare provider who treats you.

### Most common side effects


The most common side effects of ABECMA include:

- feeling tired or weak
- fever (100.4°F/38°C or higher)
- chills or shivering
- severe nausea or diarrhea
- decreased appetite
- headache
- dizziness or lightheadedness
- confusion
- trouble speaking or slurred speech
- cough
- trouble breathing
- fast or irregular heartbeat

These are not all the possible side effects of ABECMA.

 **Talk to your healthcare team** for medical advice about side effects. You are encouraged to report side effects to Bristol Myers Squibb at [ABECMA.com](https://www.abecma.com) or by calling 1-888-805-4555, or to the FDA by calling 1-800-FDA-1088.

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 For more information, please [click here for full Prescribing Information](#), including **Boxed WARNINGS**, and [Medication Guide](#) for ABECMA. Talk to your healthcare provider for more information about this medication.



# Glossary: Important words and terms to know



**Apheresis:** The process of taking blood out of the body, removing certain parts of it, and then returning the remaining blood back into the body. This process is done in CAR T cell therapy to remove T cells before adding CARs to them. May also be called leukapheresis.

**B-cell maturation antigen (BCMA):** A protein that is found on the outside of nearly all multiple myeloma cells and on some normal plasma cells.

**CAR T cell therapy:** A cell therapy that adds hooks called chimeric antigen receptors (CARs) to your existing T cells. These hooks help your T cells attach to cancer cells and destroy them.

**Chemotherapy:** In the case of CAR T cell therapy, chemotherapy destroys your immune system's T cells in order to prepare your body for treatment (sometimes called lymphodepleting chemotherapy).

**Clinical study:** A research study that tests the safety and effectiveness of a medicine in people with certain diseases.

**Complete response:** All signs of the myeloma have disappeared; it does not mean the cancer has been cured.

**Cytokine:** A type of protein that is made by certain immune and nonimmune cells and that has an effect on the immune system. Some cytokines stimulate the immune system and others slow it down.

**Duration of response:** The length of time a person's cancer responds to treatment without growing or spreading.

**Immune cell:** A cell that is part of the immune system and helps the body fight infections and diseases.

**Immune system:** A complex network of cells, tissues, organs, and the substances they make that helps the body fight infections and other diseases.

## Glossary: Important words and terms to know (cont'd)



**Infusion:** A method of putting fluids directly into the bloodstream.

**Maintenance therapy:** Treatment that is given to help keep cancer from coming back after it has disappeared following the initial therapy.

**Median:** This is a statistics term. The middle value in a set of measurements.

**Monitoring period:** The time spent regularly watching and checking a person or condition to see if there is any change.

**Nervous system:** The organized network of nerve tissue in the body. This network includes the brain and spinal cord, the nerves, and nerve tissue.

**Overall response rate:** The percentage of people who responded to treatment within a set period of time.

**Progression-free survival:** The amount of time a person lives without the cancer growing or spreading.

**Protein:** These are the building blocks that make up many different parts of your body, including your skin, hair, and substances like cytokines.

**Stem cell transplant:** A procedure in which a person receives healthy stem cells (blood-forming cells) to replace their own cells that have been destroyed by radiation or chemotherapy. Sometimes the person's own stem cells are collected before treatment to be used in the transplant later, and other times the stem cells come from a donor.

**T cell:** A type of cell found in the body's immune system that plays a role in fighting disease, including cancer.

# Discover what is possible with a one-time ABECMA<sup>®</sup> infusion\*

## Ask your doctor if it's the right time to consider ABECMA

- ▶ ABECMA may be an option if you have tried at least 2 kinds of treatment regimens that include a therapy from each of these drug classes:
  - ▶ An immunomodulatory agent
  - ▶ A proteasome inhibitor
  - ▶ An anti-CD38 monoclonal antibody
- ▶ ABECMA is a one-time infusion.\* Repeated infusions, maintenance therapy, and/or daily pills are **NOT needed for your multiple myeloma while responding to ABECMA<sup>†</sup>**

 Find a certified treatment center near you at [Abecma.com](https://www.abecma.com)

\*The treatment process includes blood collection, CAR T cell creation, administration, and adverse event monitoring.

<sup>†</sup>Regular check-ins with your healthcare team are still needed.


## What is ABECMA?


ABECMA is a prescription medicine used to treat adults with relapsed or refractory **multiple myeloma (MM)**, when:

- ✓ you have tried two or more kinds of treatments that have not worked or have stopped working, **AND**
- ✓ you have received at least one therapy from each of these drug classes:
  - an immunomodulatory agent
  - a proteasome inhibitor
  - an anti-CD38 antibody

## Important Facts About ABECMA<sup>®</sup> (idecabtagene vicleuce<sup>l</sup>)

### WARNING: RISK OF SERIOUS SIDE EFFECTS

 ABECMA may cause side effects that are life-threatening and can lead to death, including risk of **cytokine release syndrome (CRS), neurologic toxicity, infections, low blood cell counts (cytopenia), and certain types of blood cancers.**

 **Call your healthcare provider or get emergency help right away** if you experience any of the following symptoms:

- trouble breathing
- fever (100.4°F/38°C or higher)
- chills or shivering
- confusion
- feeling dizzy or lightheaded
- shaking or twitching (tremor)
- fast or irregular heartbeat
- feeling severely tired or weak
- severe nausea, vomiting, or diarrhea

Because of the risk of serious side effects, your healthcare provider will give you an **ABECMA Patient Wallet Card** that describes symptoms to look out for that require emergency medical care right away. It's important that you tell your healthcare providers that you have received ABECMA and to show them your ABECMA Patient Wallet Card. Your healthcare provider may give you other medicines to treat your side effects.

Please see Important Safety Information throughout and [click here for full Prescribing Information](#), including **Boxed WARNINGS** and [Medication Guide](#).

 Bristol Myers Squibb<sup>®</sup>

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 **Abecma<sup>™</sup>**  
(idecabtagene vicleuce<sup>l</sup>) SUSPENSION FOR INFUSION

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