



*Bayer cordially invites you to attend a presentation discussing*

## **6 Facts on Xofigo<sup>®</sup> (radium Ra 223 dichloride) in a Challenging Era of Prostate Cancer**

### **Indication**

Xofigo<sup>®</sup> (radium Ra 223 dichloride) injection is indicated for the treatment of patients with castration-resistant prostate cancer (CRPC), symptomatic bone metastases and no known visceral metastatic disease.<sup>1</sup>

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Wednesday, November 28, 2018  
6:00 PM

Maggiano's  
240 Oakbrook Center  
Oak Brook, IL 60523  
630-368-0314

To register for this program, please contact:

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Or to register online, please open the link listed below in your Internet browser and then enter the program # and the state of the program location.

Link to register: [www.myprogramrsvp.com](http://www.myprogramrsvp.com)

Program #: XO0535

Location State: IL

### **Important Safety Information**

- **Contraindications:** Xofigo is contraindicated in women who are or may become pregnant. Xofigo can cause fetal harm when administered to a pregnant woman
- **Bone Marrow Suppression:** In the randomized trial, 2% of patients in the Xofigo arm experienced bone marrow failure or ongoing pancytopenia, compared to no patients treated with placebo. There were two deaths due to bone marrow failure. For 7 of 13 patients treated with Xofigo bone marrow failure was ongoing at the time of death. Among the 13 patients who experienced bone marrow failure, 54% required blood transfusions. Four percent (4%) of patients in the Xofigo arm and 2% in the placebo arm permanently discontinued therapy due to bone marrow suppression. In the randomized trial, deaths related to vascular hemorrhage in association with myelosuppression were observed in 1% of Xofigo-treated patients compared to 0.3% of patients treated with placebo. The incidence of infection-related deaths (2%), serious infections (10%), and febrile neutropenia (<1%) was similar for patients treated with Xofigo and placebo. Myelosuppression—notably thrombocytopenia, neutropenia, pancytopenia, and leukopenia—has been reported in patients treated with Xofigo.

Monitor patients with evidence of compromised bone marrow reserve closely and provide supportive care measures when clinically indicated. Discontinue Xofigo in patients who experience life-threatening complications despite supportive care for bone marrow failure

- **Hematological Evaluation:** Monitor blood counts at baseline and prior to every dose of Xofigo. Prior to first administering Xofigo, the absolute neutrophil count (ANC) should be  $\geq 1.5 \times 10^9/L$ , the platelet count  $\geq 100 \times 10^9/L$ , and hemoglobin  $\geq 10$  g/dL. Prior to subsequent administrations, the ANC should be  $\geq 1 \times 10^9/L$  and the platelet count  $\geq 50 \times 10^9/L$ . Discontinue Xofigo if hematologic values do not recover within 6 to 8 weeks after the last administration despite receiving supportive care

**Please see additional important safety information on the next page and accompanying full Prescribing Information.**



## Important Safety Information (continued)

- **Concomitant Use With Chemotherapy:** Safety and efficacy of concomitant chemotherapy with Xofigo have not been established. Outside of a clinical trial, concomitant use of Xofigo in patients on chemotherapy is not recommended due to the potential for additive myelosuppression. If chemotherapy, other systemic radioisotopes, or hemibody external radiotherapy are administered during the treatment period, Xofigo should be discontinued
- **Administration and Radiation Protection:** Xofigo should be received, used, and administered only by authorized persons in designated clinical settings. The administration of Xofigo is associated with potential risks to other persons from radiation or contamination from spills of bodily fluids such as urine, feces, or vomit. Therefore, radiation protection precautions must be taken in accordance with national and local regulations
- **Fluid Status:** Dehydration occurred in 3% of patients on Xofigo and 1% of patients on placebo. Xofigo increases adverse reactions such as diarrhea, nausea, and vomiting, which may result in dehydration. Monitor patients' oral intake and fluid status carefully and promptly treat patients who display signs or symptoms of dehydration or hypovolemia
- **Injection Site Reactions:** Erythema, pain, and edema at the injection site were reported in 1% of patients on Xofigo
- **Secondary Malignant Neoplasms:** Xofigo contributes to a patient's overall long-term cumulative radiation exposure. Long-term cumulative radiation exposure may be associated with an increased risk of cancer and hereditary defects. Due to its mechanism of action and neoplastic changes, including osteosarcomas, in rats following administration of radium-223 dichloride, Xofigo may increase the risk of osteosarcoma or other secondary malignant neoplasms. However, the overall incidence of new malignancies in the randomized trial was lower on the Xofigo arm compared to placebo (<1% vs 2%; respectively), but the expected latency period for the development of secondary malignancies exceeds the duration of follow up for patients on the trial
- **Subsequent Treatment With Cytotoxic Chemotherapy:** In the randomized clinical trial, 16% patients in the Xofigo group and 18% patients in the placebo group received cytotoxic chemotherapy after completion of study treatments. Adequate safety monitoring and laboratory testing was not performed to assess how patients treated with Xofigo will tolerate subsequent cytotoxic chemotherapy
- **Adverse Reactions:** The most common adverse reactions ( $\geq 10\%$ ) in the Xofigo arm vs the placebo arm, respectively, were nausea (36% vs 35%), diarrhea (25% vs 15%), vomiting (19% vs 14%), and peripheral edema (13% vs 10%). Grade 3 and 4 adverse events were reported in 57% of Xofigo-treated patients and 63% of placebo-treated patients. The most common hematologic laboratory abnormalities in the Xofigo arm ( $\geq 10\%$ ) vs the placebo arm, respectively, were anemia (93% vs 88%), lymphocytopenia (72% vs 53%), leukopenia (35% vs 10%), thrombocytopenia (31% vs 22%), and neutropenia (18% vs 5%)

For important risk and use information about Xofigo, **please see accompanying full Prescribing Information.**

All medical professionals are welcome: MDs, RNs, PharmDs, etc; however, we cannot accommodate any nonmedical professionals, such as spouses or guests.

Certain HCPs and other individuals may be prohibited from participating in this event based on additional state laws regarding employer guidelines. Bayer HealthCare requests that you please comply with any and all laws in your state governing the receipt of meals or other items.

**Vermont Attendees:** If you are a Vermont-licensed HCP, you may attend a Speaker Program, but you must not accept the meal.

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**Minnesota Attendees:** If you are a Minnesota-licensed practitioner, you may attend a Speaker Program; however, you may not accept a gift or meal.

### Reference:

1. Xofigo<sup>®</sup> (radium Ra 223 dichloride) injection [prescribing information]. Whippany, NJ: Bayer HealthCare Pharmaceuticals Inc.; May 2017.

