# Prepped Ahead

### SIGN UP FOR THE PreppedAhead™ PROGRAM

At Takeda, we care about your time. Instead of having you wait for your treatment to be prepared after you arrive, your site of care has the option to prepare your treatment before you arrive, to help get you in and out as quickly as possible. VPRIV<sup>®</sup> (velaglucerase alfa) for injection is a treatment that is given intravenously every other week. The infusion typically takes 60 minutes.

Just show up for your scheduled appointment on time. If you can't make your scheduled appointment, Takeda will replace the already-prepared vials at no extra cost. Replacements are limited to 1 infusion per patient during the calendar year. The program may be altered or canceled at any time at Takeda's sole discretion.

PreppedAhead is available only to patients being treated with VPRIV who are enrolled in OnePath<sup>®</sup>, and whose site of care is enrolled in PreppedAhead, so be sure you're enrolled in OnePath to take advantage of this program. If you're not already enrolled, contact OnePath at 1-866-888-0660 to learn more.

#### IF YOU HAVE ANY QUESTIONS, CONTACT YOUR ONEPATH PATIENT SUPPORT MANAGER AT 1-866-888-0660.

#### INDICATION

VPRIV<sup>®</sup> (velaglucerase alfa) for injection is a prescription medication indicated for long-term enzyme replacement therapy (ERT) for patients with type 1 Gaucher disease.

#### **IMPORTANT SAFETY INFORMATION**

Hypersensitivity reactions, including serious allergic reactions (anaphylaxis) have occurred. VPRIV should be administered under the supervision of a healthcare professional. VPRIV is given every other week by intravenous infusion that typically takes up to 60 minutes. Appropriate medical support should be available when VPRIV is administered. The most serious side effects in patients treated with VPRIV were hypersensitivity reactions.

Hypersensitivity reactions were the most commonly observed side effects in patients treated with VPRIV in clinical studies. The most commonly observed symptoms of hypersensitivity reactions were: headache, dizziness, low blood pressure, high blood pressure, nausea, tiredness/weakness, and fever. Hypersensitivity reactions in the clinical trials include any event considered related to and occurring within up to 24 hours of VPRIV infusion, including one case of anaphylaxis. Generally the reactions were mild and, in patients not previously treated, occurred mostly during the first 6 months of treatment and tended to occur less frequently

with time. After the drug was approved, additional hypersensitivity reactions of chest discomfort, difficulty breathing, itching and vomiting have been reported. In some cases, vomiting can be serious and require hospitalization and/or stopping the medication.

Please see the next page for additional Important Safety Information. Please click <u>here</u> for Full Prescribing Information and discuss with your doctor.



#### IMPORTANT SAFETY INFORMATION (cont'd)

If anaphylactic or other acute reactions occur, your healthcare provider will immediately discontinue the infusion of VPRIV and initiate the appropriate medical treatment. A hypersensitivity reaction should be treated based on the severity of the reaction. Your healthcare provider may manage a reaction by slowing the infusion rate or treating with medicine such as antihistamines, fever-reducing agents and/or corticosteroids or possibly stopping the medication and then restarting with a longer infusion time. For patients who have had symptoms of hypersensitivity reaction to enzyme replacement therapy, the doctor may consider treating the patient with antihistamines and/or corticosteroids before an infusion to help prevent such a reaction from happening.

The most commonly reported side effects during clinical studies (in  $\geq 10\%$  of patients) were hypersensitivity reactions, headache, dizziness, abdominal pain, nausea, back pain, joint pain, increased time it takes for blood to clot, tiredness/weakness, and fever. In clinical studies, the overall frequency of side effects was generally higher in the patients not previously treated with ERT than in the patients who switched from imiglucerase to VPRIV.

Talk to your doctor if you are pregnant, plan to be pregnant, are breastfeeding, or plan to breastfeed.

The safety and efficacy profiles were similar in pediatric (ages 4 to 17) and adult patients. The safety of VPRIV has not been established in patients under 4 years of age. Side effects more commonly seen in pediatric patients compared to adult patients include (>10% difference): rash, increased time it takes for blood to clot, and fever.

The side effect profile in elderly patients was generally similar to that seen in pediatric and other adult patients. In general, dose selection for an elderly patient should be approached cautiously, considering other existing medical conditions.

As with all therapeutic proteins, there is a potential for developing antibodies to VPRIV. In clinical studies, 1 of 54 (2%) patients who had not previously been treated with ERT, who were then treated with VPRIV, developed antibodies. One additional patient developed antibodies to VPRIV during an extension study. It is unknown if having antibodies to VPRIV is associated with a higher risk of infusion reactions. Patients with an immune response to other enzyme replacement therapies who are switching to VPRIV should continue to be monitored for antibodies to VPRIV.

## For additional safety information, please click <u>here</u> for Full Prescribing Information and discuss with your doctor

You are encouraged to report negative side effects of prescription drugs to the FDA. Visit <u>www.fda.gov/medwatch</u>, or call 1-800-FDA-1088.



### Prepped Ahead:

### PreppedAhead<sup>™</sup> PROGRAM SITE PARTICIPATION FORM

To participate in the PreppedAhead Program, simply fill out this form and fax it back to OnePath® at 1-888-990-0008.\*

If you have any questions, please call OnePath at 1-866-888-0660.

SITE OF CARE NAME	CONTACT NAME	
ADDRESS	CITY, STATE ZIP CODE	
EMAIL (IF APPLICABLE)	TELEPHONE	DATE

\*Patients must be enrolled in OnePath and sites of care must be enrolled in PreppedAhead to participate.



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