

# YOUR GUIDE TO TREATMENT WITH "MINJUVI"

I have been diagnosed  
with relapsed or refractory  
diffuse large B-cell  
lymphoma (R/R DLBCL).

For the following indication, MINJUVI® has been approved *with conditions* (NOC/c). This means it has passed Health Canada's review and can be bought and sold in Canada, but the manufacturer has agreed to complete more studies to make sure the drug works the way it should. For more information, talk to your healthcare professional.

MINJUVI® (tafasitamab) is indicated in combination with lenalidomide for the treatment of adult patients with R/R DLBCL not otherwise specified, including DLBCL arising from low grade lymphoma, who are not eligible for autologous stem cell transplant (ASCT).





# Information you'll find in this booklet

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# Taking MINJUVI® as part of your DLBCL diagnosis

Your doctor has prescribed treatment with MINJUVI®, which can be used to treat adult patients who have had their DLBCL return after other treatments or when other treatments did not work.

Use this booklet as a guide to help you understand how MINJUVI® works, how you can track your treatment, and more.



## Your healthcare team contact information

Fill out the information below to help you stay in contact with your healthcare team.

**Hospital (or clinic) name** \_\_\_\_\_

**Address** \_\_\_\_\_

**Email** \_\_\_\_\_ **Phone** \_\_\_\_\_

**Doctor's name** \_\_\_\_\_

**Email** \_\_\_\_\_ **Phone** \_\_\_\_\_

**Nurse's name** \_\_\_\_\_

**Email** \_\_\_\_\_ **Phone** \_\_\_\_\_

**Other contact(s)** \_\_\_\_\_

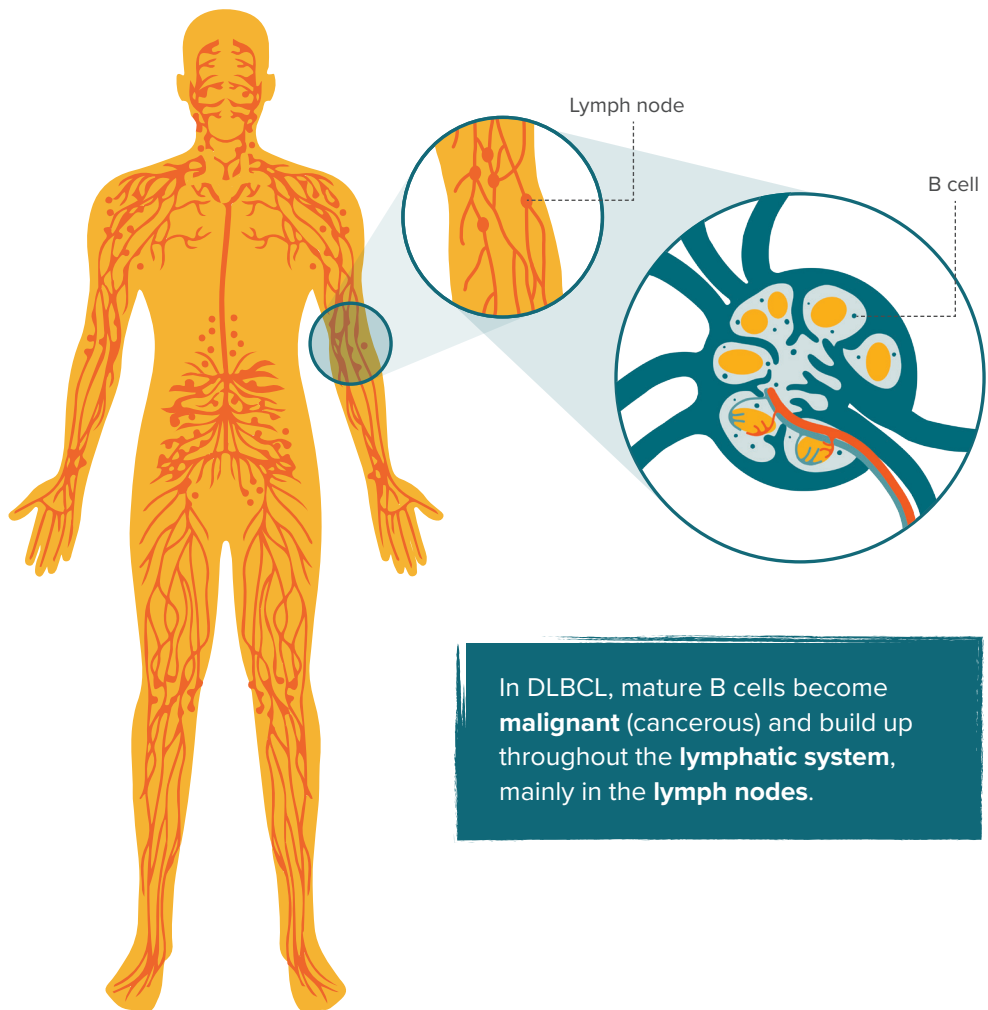
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# What is diffuse large B-cell lymphoma (DLBCL)?

DLBCL is the **most common type of non-Hodgkin lymphoma (NHL)**. DLBCL tumors consist of fast-growing, large B cells, a type of white blood cell.

## THE LYMPHATIC SYSTEM



In DLBCL, mature B cells become **malignant** (cancerous) and build up throughout the **lymphatic system**, mainly in the **lymph nodes**.

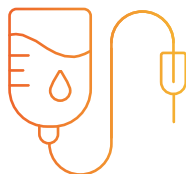
## When DLBCL returns or stops responding to treatment

First-line treatment is the first treatment given and may be used by itself or as part of a set of treatments.

MINJUVI® is used for patients who have had their cancer return after other treatments (relapsed) or when other treatments did not work (refractory).

Specifically, MINJUVI® is used for patients with relapsed or refractory DLBCL not otherwise specified who are not eligible for an autologous stem cell transplant (ASCT), a type of blood stem cell transplant.

ASCT is when a person's own blood stem cells are collected and later given back to them to help the body fight cancer.



When DLBCL relapses or becomes refractory, doctors decide whether a blood stem cell transplant is an option.

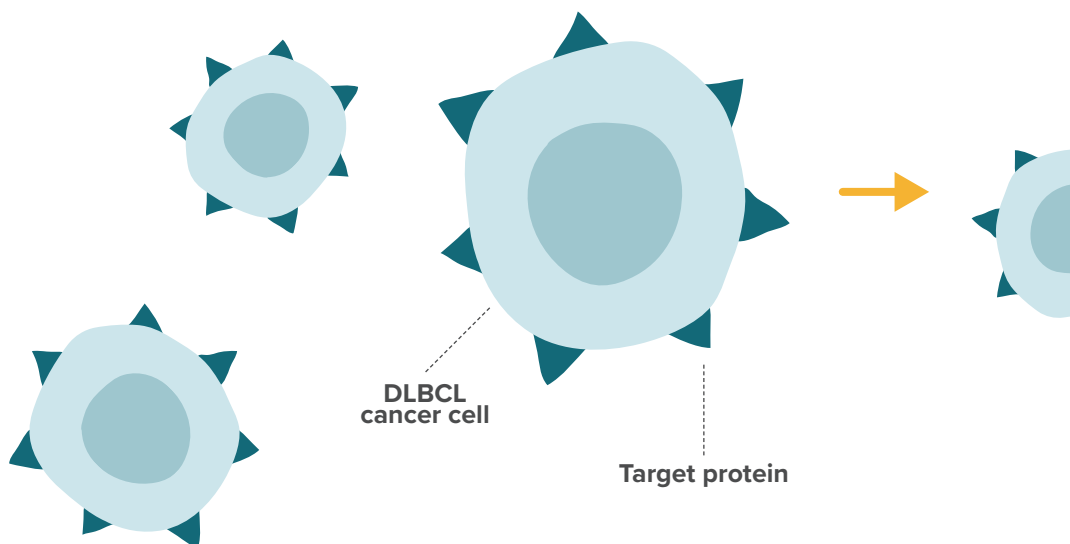
## How does MINJUVI® work?

### MINJUVI® contains an anti-cancer agent designed to help kill cancer cells

Antibodies are proteins in the immune system. They circulate in the blood and help protect against foreign substances – like a bacteria or virus – called antigens (target proteins).

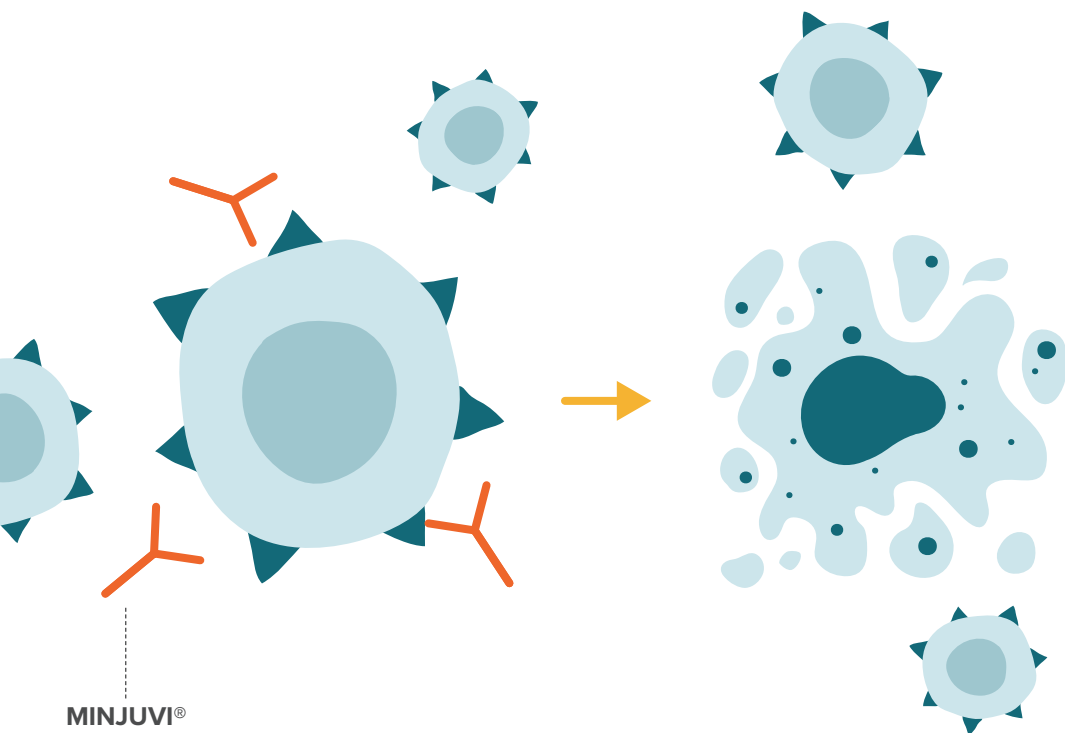
MINJUVI® contains tafasitamab which is a monoclonal antibody that targets and binds to a specific target protein on the surface of cancer cells (specifically, cancerous B cells) – this helps kill the cells. This process recruits other normal immune cells that also help target and kill the cancer cells.

MINJUVI® binds to target proteins to help kill the cancer cells and recruit normal immune cells, which also can target and kill the cancer cells.



## MINJUVI® is given with another drug called lenalidomide

In laboratory studies, MINJUVI® used in combination with lenalidomide resulted in better cancer cell toxicity than when either drug was used by itself.



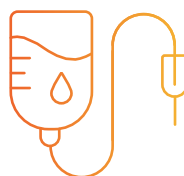
# What will the treatment schedule be like?

## Before starting treatment

Before your MINJUVI® treatments, you may receive other medications to help reduce the chances of having any reactions to the infusions. If you do not have any reaction, your doctor may decide you do not need these medicines after several infusions.

## During treatment with MINJUVI®

MINJUVI® treatments will be administered by a qualified healthcare professional in a healthcare setting, such as a hospital or clinic. MINJUVI® is administered as an intravenous (IV) infusion, meaning it is infused into a vein.



Starting from day 1, you will also need to take **25 mg lenalidomide capsules**. One capsule should be taken by mouth for the first 21 days of each 28-day cycle for a maximum of 12 cycles. Please refer to the lenalidomide **Patient Medication Information** before starting treatment.



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To help you keep track of your infusions and other aspects of your treatment schedule, fill in the MINJUVI® treatment tracker on page 14.

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# Your MINJUVI® + lenalidomide treatment schedule

Your doctor will administer the recommended dose of **12 mg MINJUVI® per kilogram of body weight** (mg/kg) as an IV infusion according to the following schedule:























## CYCLE 1

Days	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28
MINJUVI® 12 mg/kg IV infusion																												
Lenalidomide 25 mg capsule																												

## CYCLES 2 AND 3

Days	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28
MINJUVI® 12 mg/kg IV infusion																												
Lenalidomide 25 mg capsule																												

## CYCLES 4–12

Days	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28
MINJUVI® 12 mg/kg IV infusion																												
Lenalidomide 25 mg capsule																												

## CYCLES 13 AND BEYOND

After taking both MINJUVI® and lenalidomide for a maximum of 12 cycles, you will stop taking lenalidomide. Continue treatment with MINJUVI® until your doctor advises otherwise. Treatment is usually continued until disease progression or unacceptable toxicity.

Days	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28
MINJUVI® 12 mg/kg IV infusion																												

## Notes

## Notes

# What are the possible side effects of treatment?

The most common side effects of MINJUVI® include:

- Decreased blood count (certain white blood cells and red blood cells)
- Feeling tired or weak
- Decreased platelets
- Diarrhea, constipation, nausea, vomiting
- Cough
- Trouble breathing
- Fever
- Swelling of lower legs or hands
- Respiratory tract infection
- Urinary tract infections
- Decreased appetite

For a list of serious side effects and what to do about them, please refer to the MINJUVI® **Patient Information Leaflet**.

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These are not all the possible side effects you may feel when taking MINJUVI®. If you have a troublesome symptom or side effect that is not listed here or becomes bad enough to interfere with your daily activities, talk to your healthcare team.

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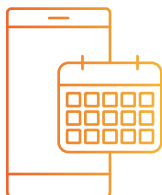


## Your MINJUVI® treatment tracker

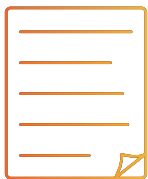
Throughout treatment, it's important to remember when to take your lenalidomide capsule and keep track of your MINJUVI® appointments. To help you with this, work with your healthcare team and consider the following tips:



Set a **daily reminder** on your phone, watch, or other device



Enter the dates of your future appointments into a **calendar**, such as on your phone or online



Use the **personalized discussion guide** on page 16 to write down anything you wish to discuss with your doctor

# Tracking your treatment each cycle

With the help of your healthcare team, fill in this calendar to help you track your one cycle of treatment, which is 28 days. Consider writing down the dates and location of your MINJUVI® infusion appointments. You can even check off each day once you've taken your lenalidomide capsule.

Sunday Start date:	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday

Notes \_\_\_\_\_

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# Your personalized discussion guide

## Preparing for your MINJUVI® treatments

To help avoid side effects and to ensure proper use, talk to your doctor before you take MINJUVI® and make sure you let them know if you:

- ☐ **Have an active infection or have had one recently**
- ☐ **Have hepatitis B or have recovered from hepatitis B in the past**
- ☐ **Are pregnant or plan to become pregnant**
  - MINJUVI® and/or lenalidomide may harm your unborn baby. You should not become pregnant during treatment. Do not receive treatment if you are pregnant.
  - You should use an effective method of birth control (contraception) during treatment and for at least 3 months after your last dose of MINJUVI®.
- ☐ **Are breast-feeding or plan to breast-feed**
  - It is not known if MINJUVI® passes into your breast milk. Do not breast-feed during treatment and for at least 3 months after your last dose of MINJUVI®.

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**It is important to tell your healthcare team about all the medicines you take, including any drugs, vitamins, minerals, natural supplements, or alternative medicines.**

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# Keeping track of how you feel during treatment

Throughout treatment, keep track of how you’re feeling. This can help you and your healthcare team monitor how you’re doing and guide discussions about how to manage or answer any questions you may have.

## Notes

Use this space to write down anything else you might want to discuss with your healthcare team at your next appointment, such as any medications you currently take or questions you may have.

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Refer to page 20 for frequently asked questions  
you may wish to discuss with your doctor.

# The Incyte Solutions™ Support Program

At Incyte Biosciences Canada, we want to help provide support for patients to help them throughout treatment. That is why Incyte Solutions™ is available to provide resources for patients who have been prescribed MINJUVI®.

You may be eligible for a number of support services, including:

- ✓ Nursing and/or pharmacists' support including infusion services
- ✓ Assessment of eligibility to financial assistance
- ✓ Assistance in communicating with drug plan administrators, managers or insurance companies to aid in securing reimbursement coverage for your prescription
- ✓ Reporting on your insurance coverage to your prescribing healthcare professional (HCP)
- ✓ Regular communications on your therapy and support program offerings, where applicable
- ✓ Other services as offered from time to time.

Incyte Solutions™ also offers infusion services via private infusion clinics for eligible MINJUVI® patients. Talk to your doctor or contact the Program to find out if you may be eligible for this service.

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**Discover what Incyte Solutions™ support services have to offer.**

Call **1-84-INCYTE-00 (1-844-629-8300)** or  
send an email to **[support@incytesolutions.ca](mailto:support@incytesolutions.ca)**.

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**Incyte**  
**Solutions™**  
SUPPORT PROGRAM

  
**MINJUVI®**  
tafasitamab for injection  
200 mg/vial



# Frequently asked questions (FAQ)

## Why did I receive premedication for my first 3 infusions, but not for my 4th?

If you did not experience an infusion-related reaction during the first 3 infusions, premedication may be optional for subsequent infusions. Your doctor will monitor you and decide if premedications are necessary.

## Are there any side effects I should be aware of?

Refer to page 12 for information on possible common side effects. Throughout treatment, it's important that you communicate with your healthcare team if you experience any side effects.

## Can I start my MINJUVI® treatment if I have recently received a vaccine, such as for COVID-19?

The safety of immunization with live vaccines following MINJUVI® therapy has not been investigated. It is not recommended to receive a live vaccine while also receiving MINJUVI® therapy. For information on COVID-19 immunization, talk to your doctor and visit [www.canada.ca/en/public-health/services/diseases/coronavirus-disease-covid-19.html](https://www.canada.ca/en/public-health/services/diseases/coronavirus-disease-covid-19.html).

## Can I start my MINJUVI® and lenalidomide treatments at different times?

Treatment with both medications should be started on the same day. Your doctor will advise you when to start receiving MINJUVI® and taking lenalidomide.

## Does it matter what time I take my lenalidomide capsule?

You should take one lenalidomide capsule by mouth at about the same time each day.

## When should I stop taking lenalidomide?

After a maximum of 12 cycles of MINJUVI® and lenalidomide, your doctor will advise you when to stop taking lenalidomide.

### How will I track my appointments?

Refer to page 14 for a MINJUVI® treatment tracker to help you stay on top of your appointments and other aspects of treatment.

### Where will I receive my MINJUVI® infusions?

You will be able to receive MINJUVI® infusions in a healthcare setting, such as a hospital or clinic.

### Where can I turn to for support?

To learn more about your condition and to access additional support resources, check out Lymphoma Canada and the Leukemia & Lymphoma Society of Canada websites:



LYMPHOMA  
CANADA

Lymphoma Canada

[www.lymphoma.ca](http://www.lymphoma.ca)



LEUKEMIA &  
LYMPHOMA  
SOCIETY OF  
CANADA

The Leukemia & Lymphoma  
Society of Canada

[www.bloodcancers.ca](http://www.bloodcancers.ca)

Email: [info@bloodcancers.ca](mailto:info@bloodcancers.ca)

Phone: 1-833-222-4884

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If you have any additional questions, note them down and discuss them with your healthcare team at your next appointment. You can also contact Incyte Solutions™ at **1-84-INCYTE-00 (1-844-629-8300)** or send an email to **[support@incytesolutions.ca](mailto:support@incytesolutions.ca)**.

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# Glossary

Antigen	Any substance that causes the body to make an immune response against that substance. Antigens include toxins, chemicals, bacteria, viruses, or other substances that come from outside the body. Body tissues and cells, including cancer cells, also have antigens on them that can cause an immune response. These antigens can also be used as markers in laboratory tests to identify those tissues or cells.
Autologous stem cell transplant (ASCT)	A procedure in which a patient's healthy stem cells (blood-forming cells) are collected from the blood or bone marrow before treatment, stored, and then given back to the patient after treatment. ASCT replaces a patient's stem cells that were destroyed by treatment with radiation or high doses of chemotherapy.
B cells	A type of white blood cell that makes antibodies. B cells are part of the immune system and develop from stem cells in the bone marrow. Also called B lymphocyte.
Diffuse large B-cell lymphoma (DLBCL)	A type of fast-growing cancer called non-Hodgkin lymphoma (NHL). DLBCL is the most common type of NHL, and it specifically affects mature B cells, a type of white blood cell that helps your body fight disease.
First-line treatment	The first treatment given and may be used by itself or as part of a set of treatments.
Immune system	The body's natural defense against infection and disease.
Lymphatic system	A network of tissues and organs found throughout your body that helps to transport fluids to the bloodstream. This system is also a major part of your body's immune system.

Lymph node	A small, bean-shaped, disease-fighting structure.
Malignant	A term used to describe cancer. Malignant cells grow in an uncontrolled way and can invade nearby tissues and spread to other parts of the body through the blood and lymph system.
Monoclonal antibody	A protein that binds to a specific protein target (antigen); this helps the immune system recognize germs that cause disease and mark them to be destroyed.
Refractory	A disease or condition that does not respond to treatment.
Relapse	The return or worsening of cancer after a period of improvement.



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