TAZVERIK®
(tazemetostat) tablets
200 mg

DOSING GUIDE

TAZVERIK® (tazemetostat) is indicated for the treatment of:

- Adult patients with relapsed or refractory follicular lymphoma whose tumors are positive for an EZH2 mutation as detected by an FDA-approved test and who have received at least 2 prior systemic therapies.
- Adult patients with relapsed or refractory follicular lymphoma who have no satisfactory alternative treatment options.

These indications are approved under accelerated approval based on overall response rate and duration of response. Continued approval for these indications may be contingent upon verification and description of clinical benefit in a confirmatory trial(s).[1]

Important Safety Information

TAZVERIK increases the risk of developing secondary malignancies, including T-cell lymphoblastic lymphoma, myelodysplastic syndrome, and acute myeloid leukemia. Monitor patients long-term for the development of secondary malignancies.

TAZVERIK can cause fetal harm. Advise patients of potential risk to a fetus and to use effective non-hormonal contraception.

The most common (≥20%) adverse reactions are fatigue, upper respiratory tract infection, musculoskeletal pain, nausea, and abdominal pain.

EZH2=enhancer of zeste homologue 2.

Please see additional Important Safety Information on pages 10-11 and refer to the full Prescribing Information.

TAZVERIK® (tazemetostat): THE FIRST AND ONLY EZH2 INHIBITOR INDICATED FOR PATIENTS WITH RELAPSED OR REFRACTORY (R/R) FOLLICULAR LYMPHOMA (FL)

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NCCN recommended

Tazemetostat (TAZVERIK®) is included in the NCCN Clinical Practice Guidelines in Oncology (NCCN Guidelines®) for B-cell Lymphomas with a category 2A recommendation as an option for appropriate patients with relapsed or refractory follicular lymphoma.*

*Referenced with permission from the NCCN Clinical Practice Guidelines in Oncology (NCCN Guidelines®) for B-cell Lymphomas V.4.2020. © National Comprehensive Cancer Network, Inc. 2020. All rights reserved. Accessed October 26, 2020. To view the most recent and complete version of the guideline, go online to NCCN.org. NCCN makes no warranties of any kind whatsoever regarding their content, use or application and disclaims any responsibility for their application or use in any way.

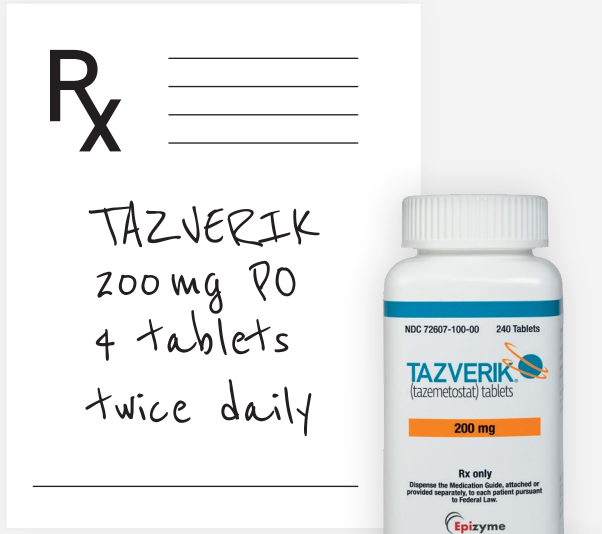
TAZVERIK® (tazemetostat) OFFERS ORAL, TWICE-DAILY DOSING

Recommended dose of 800 mg (4 x 200 mg tablets) taken orally, twice daily, until disease progression or unacceptable toxicity[1]

Tablets are actual size.

Swallow tablets whole. Do not cut, crush, or chew tablets.

Do not take an additional dose if a dose is missed or vomiting occurs after taking TAZVERIK, but continue with the next scheduled dose.[1]



PO=orally.

How supplied: 240-count bottle

NDC number (10 digit): 72607-100-00

NDC number (11 digit): 72607-0100-00

NDC=National Drug Code

Please see Important Safety Information on pages 10-11 and refer to the full Prescribing Information.

TAZVERIK® (tazemetostat) tablets 200 mg

GUIDANCE FOR DOSE REDUCTIONS

Recommended dose reductions of TAZVERIK® (tazemetostat) for adverse reactions[1]

DOSE REDUCTION	DOSAGE
First	600 mg twice daily
Second	400 mg twice daily*

*Permanently discontinue TAZVERIK in patients who are unable to tolerate 400 mg orally twice daily.[1]

Dose adjustments are not recommended for patients with:

mild to severe renal impairment, including end-stage renal disease.[1]

mild hepatic impairment. TAZVERIK has not been studied in patients with moderate or severe hepatic impairment.[1]*

AST=aspartate aminotransferase; ULN=upper limit of normal.

*Mild=total bilirubin > 1 to 1.5 times ULN or AST > ULN; moderate=total bilirubin > 1.5 to 3 times ULN; severe=total bilirubin > 3 times ULN.[1]

GUIDANCE FOR DOSE REDUCTIONS

Recommended dose reductions of TAZVERIK® (tazemetostat) for moderate CYP3A inhibitors[1]

CURRENT DOSAGE	ADJUSTED DOSAGE
800 mg orally twice daily	400 mg orally twice daily
600 mg orally twice daily	400 mg for first dose and 200 mg for second dose
400 mg orally twice daily	200 mg orally twice daily

CYP3A=Cytochrome P450 (CYP)3A.

Select Important Safety Information

Drug Interactions

Avoid coadministration of strong or moderate CYP3A inhibitors with TAZVERIK. If coadministration of moderate CYP3A inhibitors cannot be avoided, reduce TAZVERIK dose.

Avoid coadministration of moderate and strong CYP3A inducers with TAZVERIK, which may decrease the efficacy of TAZVERIK.

Coadministration of TAZVERIK with CYP3A substrates, including hormonal contraceptives, can result in decreased concentrations and reduced efficacy of CYP3A substrates.

Please see additional Important Safety Information on pages 10-11 and refer to the full Prescribing Information.

TAZVERIK® (tazemetostat) tablets 200 mg

GUIDANCE FOR DOSE MODIFICATIONS

Recommended dosage modifications of TAZVERIK® (tazemetostat) for adverse reactions[1]

ADVERSE REACTION & SEVERITY	DOSAGE MODIFICATION
Neutropenia Neutrophil count less than 1×10^9/L	• Withhold until neutrophil count is greater than or equal to 1×10^9/L or baseline. • For first occurrence, resume at same dose. • For second and third occurrence, resume at reduced dose. • Permanently discontinue after fourth occurrence.
Thrombocytopenia Platelet count less than 50×10^9/L	• Withhold until platelet count is greater than or equal to 75×10^9/L or baseline. • For first and second occurrence, resume at reduced dose. • Permanently discontinue after third occurrence.
Anemia Hemoglobin less than 8 g/dL	• Withhold until improvement to at least Grade 1 or baseline, then resume at same or reduced dose.
Other adverse reactions Grade 3	• Withhold until improvement to at least Grade 1 or baseline. • For first and second occurrence, resume at reduced dose. • Permanently discontinue after third occurrence.
Other adverse reactions Grade 4	• Withhold until improvement to at least Grade 1 or baseline. • For first occurrence, resume at reduced dose. • Permanently discontinue after second occurrence.

For more information, please see the Common Terminology Criteria for Adverse Events (CTCAE).

SELECT LABORATORY ABNORMALITIES

Select laboratory abnormalities (≥10%) worsening from baseline in patients with R/R FL who received TAZVERIK® (tazemetostat)[1]

LABORATORY ABNORMALITY	TAZVERIK*	
	ALL GRADES (%)	GRADE 3 OR 4 (%)
Hematology		
Decreased lymphocytes	57	18
Decreased hemoglobin	50	8
Decreased platelets	50	7
Decreased white blood cells	41	9
Decreased neutrophils	20	7
Chemistry		
Increased glucose	53	10
Increased aspartate aminotransferase	24	0
Increased alanine aminotransferase	21	2.3
Increased alkaline phosphatase	18	1.0
Increased creatinine	17	0

*The denominator used to calculate the rate varied from 88 to 96 based on the number of patients with a baseline value and at least one post-treatment value.

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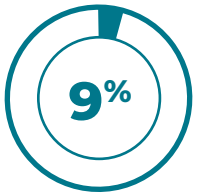
SAFETY EVALUATED IN PATIENTS WITH RELAPSED OR REFRACTORY (R/R) FOLLICULAR LYMPHOMA (FL)*

DISCONTINUATIONS

of patients **permanently discontinued** treatment due to an adverse reaction. The adverse reaction resulting in permanent discontinuation in ≥2% of patients was second primary malignancy.[1]

REDUCTIONS



of patients receiving TAZVERIK® (tazemetostat) required **dose reductions** due to an adverse reaction.[1]

INTERRUPTIONS

of patients receiving TAZVERIK required **dose interruptions** due to an adverse reaction. Adverse reactions requiring dosage interruptions in ≥3% of patients were thrombocytopenia and fatigue.[1]

- The most common (≥20%) adverse reactions were fatigue (36%), upper respiratory tract infection (30%), musculoskeletal pain (22%), nausea (24%), and abdominal pain (20%).[1]
- 30% of patients in the TAZVERIK clinical trial experienced serious adverse reactions. Serious adverse reactions occurring in ≥2% of patients taking TAZVERIK included general physical health deterioration, abdominal pain, pneumonia, sepsis, and anemia.[1]

*TAZVERIK was studied in an open-label, single-arm, multicenter, phase 2 trial with 6 cohorts of patients, including 2 cohorts with histologically-confirmed R/R FL.

Please see Important Safety Information on pages 10-11 and refer to the full Prescribing Information.

SAFETY EVALUATED IN PATIENTS WITH R/R FL

Adverse reactions (≥10%) in patients with R/R FL who received TAZVERIK® (tazemetostat)[1]

ADVERSE REACTION	TAZVERIK N=99	
	ALL GRADES (%)	GRADE 3 OR 4 (%)
General		
Fatigue[a]	36	5
Pyrexia	10	0
Infections		
Upper respiratory tract infection[b]	30	0
Lower respiratory tract infection[c]	17	0
Urinary tract infection[d]	11	2
Gastrointestinal		
Nausea	24	1
Abdominal pain[e]	20	3
Diarrhea	18	0
Vomiting	12	1
Musculoskeletal and connective tissue		
Musculoskeletal pain[f]	22	1
Skin and subcutaneous tissue		
Alopecia	17	0
Rash[g]	15	0
Respiratory and mediastinal system		
Cough[h]	17	0
Nervous system		
Headache[i]	13	0

Grade 3 or 4 adverse reactions occurred in ≤5% of patients.[1]

[a]Includes fatigue and asthenia
[b]Includes laryngitis, nasopharyngitis, pharyngitis, rhinitis, sinusitis, upper respiratory tract infection, viral upper respiratory tract infection
[c]Includes bronchitis, lower respiratory tract infection, tracheobronchitis
[d]Includes cystitis, urinary tract infection, urinary tract infection staphylococcal
[e]Includes abdominal discomfort, abdominal pain, abdominal pain lower, abdominal pain upper
[f]Includes back pain, limb discomfort, musculoskeletal chest pain, musculoskeletal discomfort, musculoskeletal pain, myalgia, neck pain, non-cardiac chest pain, pain in extremity, pain in jaw, spinal pain
[g]Includes erythema, rash, rash erythematous, rash generalized, rash maculo-papular, rash pruritic, rash pustular, skin exfoliation
[h]Includes cough and productive cough
[i]Includes headache, migraine, sinus headache

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IMPORTANT SAFETY INFORMATION

Warnings and Precautions

• Secondary Malignancies

The risk of developing secondary malignancies is increased following treatment with TAZVERIK. Across clinical trials of 729 adults who received TAZVERIK 800 mg twice daily, myelodysplastic syndrome (MDS) or acute myeloid leukemia (AML) occurred in 0.7% of patients. One pediatric patient developed T-cell lymphoblastic lymphoma (T-LBL). Monitor patients long-term for the development of secondary malignancies.

• Embryo-Fetal Toxicity

Based on findings from animal studies and its mechanism of action, TAZVERIK can cause fetal harm when administered to pregnant women. There are no available data on TAZVERIK use in pregnant women to inform the drug-associated risk. Administration of tazemetostat to pregnant rats and rabbits during organogenesis resulted in dose-dependent increases in skeletal developmental abnormalities in both species beginning at maternal exposures approximately 1.5 times the adult human exposure (area under the plasma concentration time curve [$AUC_{0\text{-}45h}$]) at the 800 mg twice daily dose.

Advise pregnant women of the potential risk to a fetus. Advise females of reproductive potential to use effective contraception during treatment with TAZVERIK and for 6 months after the final dose. Advise males with female partners of reproductive potential to use effective contraception during treatment with TAZVERIK and for 3 months after the final dose.

IMPORTANT SAFETY INFORMATION *(continued)*

Adverse Reactions

In 99 clinical study patients with relapsed or refractory follicular lymphoma receiving TAZVERIK 800 mg twice daily: Serious adverse reactions occurred in 30% of patients who received TAZVERIK. Serious adverse reactions occurring in ≥2% were general physical health deterioration, abdominal pain, pneumonia, sepsis, and anemia. The most common (≥20%) adverse reactions were fatigue (36%), upper respiratory tract infection (30%), musculoskeletal pain (22%), nausea (24%), and abdominal pain (20%).

Drug Interactions

Avoid coadministration of strong or moderate CYP3A inhibitors with TAZVERIK. If coadministration of moderate CYP3A inhibitors cannot be avoided, reduce TAZVERIK dose.

Avoid coadministration of moderate and strong CYP3A inducers with TAZVERIK, which may decrease the efficacy of TAZVERIK.

Coadministration of TAZVERIK with CYP3A substrates, including hormonal contraceptives, can result in decreased concentrations and reduced efficacy of CYP3A substrates.

Lactation

Because of the potential risk for serious adverse reactions from TAZVERIK in the breastfed child, advise women not to breastfeed during treatment with TAZVERIK and for one week after the final dose.

Before prescribing TAZVERIK, please refer to the full Prescribing Information.

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EpizymeNOW PATIENT & PRODUCT SUPPORT — PROVIDING RESOURCES AND INFORMATION TO SUPPORT YOUR PATIENTS' ACCESS TO TAZVERIK® (tazemetostat)

PATIENT ASSISTANCE PROGRAM (PAP)

Provides a supply of free medication for the remainder of the current calendar year, in accordance with the treating physician's prescribing decision, for eligible patients who have financial need and are uninsured, rendered uninsured, or underinsured as determined by the program.

QUICK START PROGRAM

Allows physicians to initiate TAZVERIK treatment in accordance with a valid prescription for eligible patients whose prior authorization decision takes longer than 5 business days.

BRIDGE SUPPLY PROGRAM

Provides an emergency supply of free medication to eligible patients currently on therapy, in accordance with a valid prescription, who experience an unexpected disruption in drug coverage or supply exceeding 5 calendar days (e.g. the patient's insurance provider unexpectedly requires an updated prior authorization, or in the case of a change or loss of insurance).

CO-PAY ASSISTANCE PROGRAM

Helps reduce out-of-pocket costs for Epizyme medications for patients with commercial (private) health insurance, and otherwise eligible to receive co-payment assistance.

This offer is not valid for cash-paying patients or patients currently enrolled in Medicare, Medicaid, or any other federal or state healthcare program. Limitations apply. Void where prohibited.

Disclaimer: All patient support is subject to eligibility criteria and program terms and conditions. For more information visit TAZVERIK.com.

Epizyme now℠ Patient & Product Support

If you are interested in learning more about any of the services mentioned above, visit TAZVERIK.com or contact EpizymeNOW Patient & Product Support at **1-833-4EPINOW (437-4669),** Monday through Friday (9 AM - 6 PM ET).

Reference: 1. TAZVERIK (tazemetostat) Prescribing Information. Cambridge, MA: Epizyme, Inc., July 2020.

Please see Important Safety Information on pages 10-11 and refer to the full Prescribing Information.

Epizyme™

TZ-FL-BR-20-0175

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