

FOR ADULTS WITH PREVIOUSLY TREATED MULTIPLE MYELOMA

LIVE PROGRESSION FREE

In 2 different trials, patients lived progression free longer when treated with SARCLISA plus other therapies

Trial 1: At a median follow-up of 44 months, patients lived progression free for a median of 41.7 months with SARCLISA + Kyprolis® (carfilzomib) and dexamethasone (Kd) vs 20.8 months with Kd alone. At the time of this analysis, 56% (101 of 179 patients) lived progression free with SARCLISA + Kd vs 45% (55 of 123 patients) treated with Kd alone. In an earlier analysis, at a median follow-up of 20.7 months, 74% (133 of 179 patients) lived progression free with SARCLISA + Kd vs 59% (73 of 123 patients) treated with Kd alone.

Trial 2: At a median follow-up of 11.6 months, patients lived progression free for a median of 11.53 months with SARCLISA + Pomalyst® (pomalidomide) and dexamethasone (Pd) vs 6.47 months with Pd alone. At the time of this analysis, 53% (81 of 154 patients) lived progression free with SARCLISA + Pd vs 42% (64 of 153 patients) treated with Pd alone.

What is SARCLISA?

SARCLISA is a prescription medicine used in combination with:

- The medicines pomalidomide and dexamethasone, to treat adults who have received at least 2 prior therapies including lenalidomide and a proteasome inhibitor to treat multiple myeloma.
- The medicines carfilzomib and dexamethasone, to treat adults with multiple myeloma who have already received 1 to 3 lines of treatment and they did not work or are no longer working.

It is not known if SARCLISA is safe and effective in children.

Important Safety Information

Do not receive SARCLISA if you have a history of a severe allergic reaction to isatuximab-irfc or any of the ingredients in SARCLISA (see the list of ingredients in the full [Prescribing Information](#)).

Please see additional Important Safety Information throughout, and accompanying full [Prescribing Information](#), including [Patient Information](#).


SARCLISA[®]
(isatuximab-irfc)
Injection for intravenous use
500 mg/25 mL, 100 mg/5 mL

You and your doctor – making a treatment decision together

An informed decision starts with the right information

Talking with your doctor about your options is an important step in your treatment journey. If you're considering treatment with SARCLISA, the questions below can help you start the conversation with your doctor.



Questions you may want to ask your doctor about SARCLISA

- Based on my treatment history, is SARCLISA an option for me?
- Can you tell me how SARCLISA works?
- How could treatment with SARCLISA help me?
- What were the study results for SARCLISA?
- What are the possible side effects of treatment?
- What is the treatment schedule for SARCLISA?
- Is there a patient support program that may help with the cost of SARCLISA?

Consider taking these questions to your next appointment to help you have an informed conversation with your doctor.

Important Safety Information

Before receiving SARCLISA, tell your healthcare provider about all of your medical conditions, including if you:

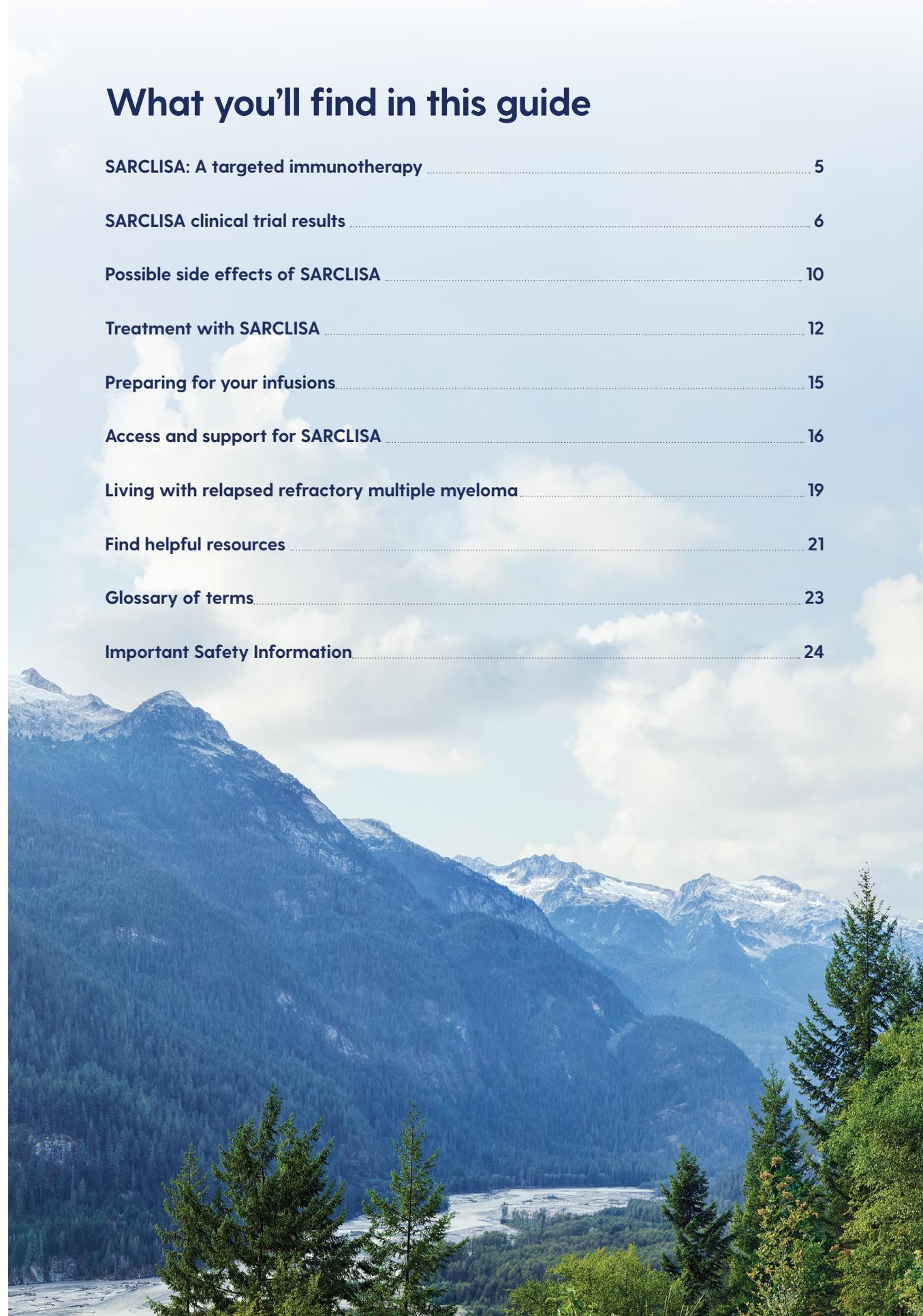
- Have heart problems, if your healthcare provider prescribes SARCLISA in combination with carfilzomib and dexamethasone for you.
- Have had shingles (herpes zoster).
- Are pregnant or plan to become pregnant. SARCLISA may harm your unborn baby.
 - Females who are able to become pregnant should use an effective method of birth control during treatment and for 5 months after your last dose of SARCLISA. Talk to your healthcare provider about birth control methods that you can use during this time.
 - Tell your healthcare provider right away if you think you are pregnant or become pregnant during treatment with SARCLISA.

Please see additional Important Safety Information throughout, and accompanying full Prescribing Information, including Patient Information.


SARCLISA[®]
(isatuximab-irfc)
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500 mg/25 mL, 100 mg/5 mL

What you'll find in this guide

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SARCLISA[®] (isatuximab-irfc)

Injection for intravenous use
500 mg/25 mL, 100 mg/5 mL

Not chemotherapy.
A targeted immunotherapy.

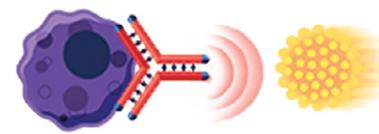
SARCLISA: A targeted immunotherapy

Designed to **find and bind**

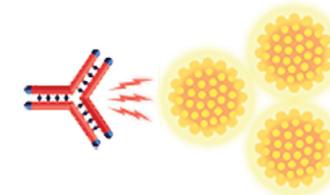
SARCLISA is not chemotherapy. It is a type of targeted immunotherapy that is able to "find and bind" to myeloma cells. SARCLISA works together with your immune system to help destroy myeloma cells.

SARCLISA works in 3 distinct ways to reduce the number of myeloma cells in your body

 SARCLISA  Immune system cell  Myeloma cell



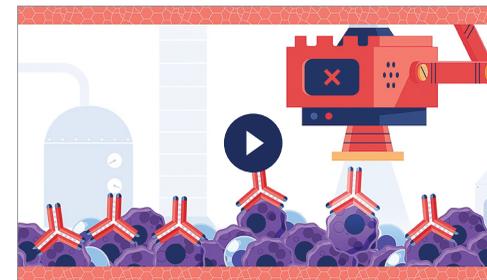
SARCLISA **finds and binds** to myeloma cells and exposes them for elimination by your immune system.



SARCLISA helps **boost your immune system**, making it harder for myeloma cells to survive.



SARCLISA **directly kills** myeloma cells.



Visit [SARCLISA.com](https://www.sarclisa.com) to watch a video about how SARCLISA works



Scan with your smartphone camera

Important Safety Information

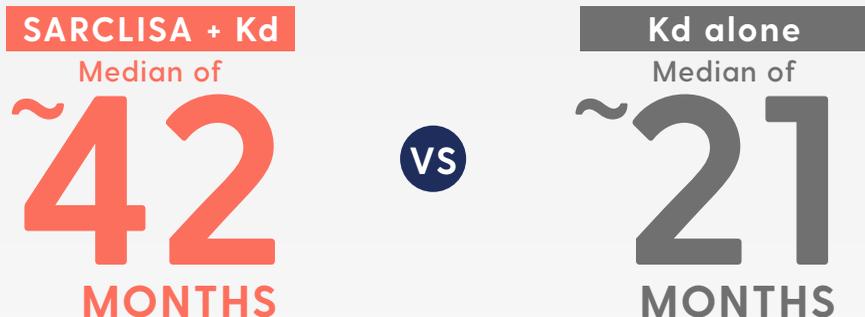
- Before receiving SARCLISA in combination with pomalidomide, females and males must agree to the instructions in the pomalidomide REMS program. The pomalidomide REMS program has specific requirements about birth control, pregnancy testing, blood donation, and sperm donation that you need to know. Talk to your healthcare provider to learn more about pomalidomide.
- Are breastfeeding or plan to breastfeed. It is not known if SARCLISA passes into your breast milk. You should not breastfeed during treatment with SARCLISA.

Tell your healthcare provider about all the medicines you take, including prescription and over-the-counter medicines, vitamins, and herbal supplements.

Please see additional Important Safety Information throughout, and accompanying full Prescribing Information, including Patient Information.

CLINICAL TRIAL RESULTS

Trial 1: SARCLISA + Kyprolis® and dexamethasone (Kd) helped patients live progression free longer vs Kd alone



LONGEST RESULTS EVER REPORTED

in a Phase 3 trial that included patients who had stopped responding to Revlimid®*

*Based on a review of published Phase 3 trials that included patients with previously treated multiple myeloma who stopped responding to Revlimid (lenalidomide). **This information should be interpreted with caution as direct comparisons between different trials cannot be made, and various factors differ between trials.** These factors include differences in patient populations and how different treatments work and how they are given, all of which can affect trial results, including treatment effectiveness and possible side effects. Contact your doctor with any questions you have about these results.

At a median follow-up of 44 months, patients lived progression free for a median of 41.7 months with SARCLISA + Kyprolis (carfilzomib) and dexamethasone (Kd) vs 20.8 months with Kd alone. At the time of this analysis, 56% (101 of 179 patients) lived progression free with SARCLISA + Kd vs 45% (55 of 123 patients) treated with Kd alone. In an earlier analysis, at a median follow-up of 20.7 months, 74% (133 of 179 patients) lived progression free with SARCLISA + Kd vs 59% (73 of 123 patients) treated with Kd alone. A median is the middle number in a group of numbers ordered from smallest to largest.

Trial 1: SARCLISA + Kd compared to Kd alone

In a clinical trial of 302 patients with previously treated multiple myeloma who had received 1 to 3 prior treatments, 179 patients received SARCLISA + Kd and 123 patients received Kd alone.

Trial 2: SARCLISA + Pomalyst® and dexamethasone (Pd) helped more patients live progression free vs Pd alone



At a median follow-up of 11.6 months, **53%** (81 of 154 patients) lived progression free with SARCLISA + Pomalyst (pomalidomide) and dexamethasone (Pd) vs **42%** (64 of 153 patients) treated with Pd alone.

Trial 2: SARCLISA + Pd compared to Pd alone

In a clinical trial of 307 patients with previously treated multiple myeloma who had received at least 2 prior treatments, including Revlimid and a proteasome inhibitor,* 154 patients received SARCLISA + Pd and 153 patients received Pd alone.

Both trials compared how long patients lived progression free and how patients responded to treatment.

*Examples of proteasome inhibitors include Kyprolis, Ninlaro® (ixazomib), and Velcade® (bortezomib).

Important Safety Information

How will I receive SARCLISA?

- SARCLISA will be given to you by your healthcare provider by intravenous (IV) infusion into your vein.
- SARCLISA is given in treatment cycles of 28 days (4 weeks), together with either the medicines pomalidomide and dexamethasone, or carfilzomib and dexamethasone.
 - In cycle 1, SARCLISA is usually given weekly.
 - Starting in cycle 2, SARCLISA is usually given every 2 weeks.
- If you miss any appointments, call your healthcare provider as soon as possible to reschedule your appointment.
- Your healthcare provider will give you medicines before each dose of SARCLISA to help reduce the risk of infusion reactions (make them less frequent and severe).

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CLINICAL TRIAL RESULTS (CONT'D)

The majority of patients responded to SARCLISA combinations in two Phase 3 trials

SARCLISA + Kyprolis® (carfilzomib) and dexamethasone (Kd)



87%

responded to SARCLISA + Kd

83% responded to treatment with Kd alone. The difference between SARCLISA + Kd and Kd alone was not statistically meaningful.

SARCLISA + Pomalyst® (pomalidomide) and dexamethasone (Pd)



60%

responded to SARCLISA + Pd

vs 35% who responded to treatment with Pd alone.

Important Safety Information

What are the possible side effects of SARCLISA?

SARCLISA may cause serious side effects, including:

- **Infusion reactions.** Infusion reactions are common with SARCLISA and can sometimes be severe or life threatening.
 - Your healthcare provider will prescribe medicines before each infusion of SARCLISA to help decrease your risk for infusion reactions or to help make any infusion reaction less severe. You will be monitored for infusion reactions during each dose of SARCLISA.
 - Your healthcare provider may slow down or stop your infusion, or completely stop treatment with SARCLISA if you have an infusion reaction.

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Possible side effects of SARCLISA

Infusion reactions



SARCLISA is given by a healthcare provider as an intravenous (IV) infusion into your vein. Medicines given by IV infusion can sometimes cause unwanted reactions.

Infusion reactions are common with SARCLISA and can sometimes be severe or life threatening.

Your healthcare provider will prescribe medicines before each infusion of SARCLISA to help decrease your risk for infusion reactions or to help make any infusion reaction less severe. You will be monitored for infusion reactions during each dose of SARCLISA.

Your healthcare provider may slow down or stop your infusion, or completely stop treatment with SARCLISA if you have an infusion reaction.

Get medical help right away if you develop any of the following symptoms of infusion reaction during or after an infusion of SARCLISA:

- shortness of breath, wheezing, or trouble breathing
- swelling of the face, mouth, throat, or tongue
- throat tightness
- palpitations
- dizziness, lightheadedness, or fainting
- headache
- cough
- rash or itching
- nausea
- runny or stuffy nose
- chills

Decreased white blood cell counts



Decreased white blood cell counts are common with SARCLISA and certain white blood cells can be severely decreased. You may have an increased risk of getting certain infections, such as upper and lower respiratory tract infections and urinary tract infections.

Your healthcare provider will check your blood cell counts during treatment with SARCLISA. Your healthcare provider may prescribe an antibiotic or antiviral medicine to help prevent infection, or a medicine to help increase your white blood cell counts during treatment with SARCLISA.

Tell your healthcare provider right away if you develop any fever or symptoms of infection during treatment with SARCLISA.

Risk of new cancers

New cancers have happened in patients during treatment with SARCLISA. Your healthcare provider will monitor you for new cancers during treatment with SARCLISA.

In 2 clinical trials studying SARCLISA, most infusion reactions started during the first infusion or the first treatment cycle and all infusion reactions resolved.

Change in blood tests

SARCLISA can affect the results of blood tests to match your blood type. Your healthcare provider will do blood tests to match your blood type before you start treatment with SARCLISA. **Tell all of your healthcare providers that you are being treated with SARCLISA before receiving blood transfusions.**

Common side effects that may occur with SARCLISA in combination with Pomalyst® (pomalidomide) and dexamethasone

- upper respiratory tract infection
- lung infection (pneumonia)
- diarrhea
- decreased red blood cell count (anemia)
- decreased platelet count (thrombocytopenia)

Common side effects that may occur with SARCLISA in combination with Kyprolis® (carfilzomib) and dexamethasone

- upper respiratory tract infection
- tiredness and weakness
- high blood pressure
- diarrhea
- lung infection (pneumonia)
- trouble breathing
- trouble sleeping
- bronchitis
- cough
- back pain
- decreased red blood cell count (anemia)
- decreased platelet count (thrombocytopenia)

Heart failure

Heart failure can happen during treatment with SARCLISA in combination with carfilzomib and dexamethasone. **Tell your healthcare provider right away if you develop any of the following symptoms:**

- trouble breathing
- cough
- swelling of your ankles, feet, or legs



These are not all the possible side effects of SARCLISA. For more information, ask your healthcare provider or pharmacist.

SARCLISA is not chemotherapy. SARCLISA is a targeted immunotherapy that works with your immune system to help fight multiple myeloma.

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Treatment with SARCLISA

Fewer infusions after the first cycle

SARCLISA is given by a doctor or nurse by intravenous (IV) infusion into your vein in 4-week, or 28-day, treatment periods called cycles. For the first cycle, SARCLISA is usually given once a week. After the first cycle, SARCLISA is usually given once every 2 weeks.



Cycle 1
Once a week



Cycle 2 and beyond
Once every 2 weeks

SARCLISA is given together with either Kyprolis® (carfilzomib) and dexamethasone or Pomalyst® (pomalidomide) and dexamethasone. Once prescribed, your doctor and other members of your healthcare team will explain how you will receive SARCLISA along with these other medicines.

Talk with your doctor about whether a SARCLISA combination is right for you.

Important Safety Information

What are the possible side effects of SARCLISA? (cont'd)

Get medical help right away if you develop any of the following symptoms of infusion reaction during or after an infusion of SARCLISA:

- shortness of breath, wheezing, or trouble breathing
- swelling of the face, mouth, throat, or tongue
- throat tightness
- palpitations
- dizziness, lightheadedness, or fainting
- headache
- cough
- rash or itching
- nausea
- runny or stuffy nose
- chills

Shorter infusion times as treatment continues

Estimated infusion times for SARCLISA

First infusion

3 HRS
20 MIN

Second infusion

1 HR
53 MIN

Following infusions

1 HR
15 MIN

Before each infusion of SARCLISA, you will receive other medicines to help reduce possible infusion reactions. Infusion times may be longer if you experience an infusion reaction while receiving SARCLISA. See page 10 for more information about infusion reactions.

If you miss any appointments, call your doctor as soon as possible to reschedule.

Important Safety Information

What are the possible side effects of SARCLISA? (cont'd)

- **Decreased white blood cell counts.** Decreased white blood cell counts are common with SARCLISA and certain white blood cells can be severely decreased. You may have an increased risk of getting certain infections, such as upper and lower respiratory tract infections and urinary tract infections.
 - Your healthcare provider will check your blood cell counts during treatment with SARCLISA. Your healthcare provider may prescribe an antibiotic or antiviral medicine to help prevent infection, or a medicine to help increase your white blood cell counts during treatment with SARCLISA.
 - **Tell your healthcare provider right away if you develop any fever or symptoms of infection during treatment with SARCLISA.**

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Preparing for your infusions

Plan ahead to help make your experience more comfortable



Wear comfortable clothing and consider bringing a blanket, pillow, or anything else that would help you feel at ease.



Take along a book, tablet, music, or anything to help pass the time and make your experience more enjoyable.



Bring a snack and something to drink in case you get hungry or thirsty.



If possible, arrange for your caregiver, a family member, or a friend to join you.



Consider bringing this guide with you, along with a list of questions you may have for your healthcare team.

Important Safety Information

What are the possible side effects of SARCLISA? (cont'd)

- **Risk of new cancers.** New cancers have happened in people during treatment with SARCLISA. Your healthcare provider will monitor you for new cancers during treatment with SARCLISA.
- **Change in blood tests.** SARCLISA can affect the results of blood tests to match your blood type. Your healthcare provider will do blood tests to match your blood type before you start treatment with SARCLISA. **Tell all of your healthcare providers that you are being treated with SARCLISA before receiving blood transfusions.**

Please see additional Important Safety Information throughout, and accompanying full [Prescribing Information](#), including [Patient Information](#).


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CareASSIST[®]

Patient Support by Sanofi

We are here to support you and your loved ones as you navigate through your treatment journey



Financial assistance

Helping you to understand your insurance coverage and connect you with programs that may be able to assist with your treatment costs for SARCLISA[®].



Resource support

Connecting you to independent support organizations that may be able to help you manage your care.



Learn more about CareASSIST

Visit SanofiCareASSIST.com/sarclisa for more information or call 1-833-WE+CARE (1-833-930-2273), Mon – Fri, 9 AM – 8 PM ET


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SARCLISA has been studied in 2 clinical trials
**in patients with previously treated
multiple myeloma**



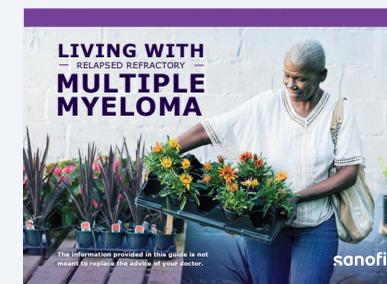
Living with relapsed refractory multiple myeloma

Understanding remission and relapse

Advances in medicine have given doctors and patients a number of treatment options that help control multiple myeloma by reducing the number of myeloma cells in the body.

When your body responds to treatment, you may have a complete or partial remission, where your myeloma is under control and isn't currently progressing.

After a period of being in remission, it is possible for multiple myeloma to relapse or not respond to your current treatment (sometimes called "refractory"). When this happens, there may be other treatments available, which may include SARCLISA, that have been studied specifically in patients with previously treated multiple myeloma.



Find out about steps you can take to support your physical and emotional health while living with multiple myeloma. **Living With Relapsed Refractory Multiple Myeloma** is a guide featuring practical tips on staying active, eating a healthy and enjoyable diet, and supporting your emotional well-being.

Download this guide and other helpful resources at [SARCLISA.com/resources](https://www.sarclisa.com/resources)



Scan with your smartphone camera

Important Safety Information

What are the possible side effects of SARCLISA? (cont'd)

The most common side effects of SARCLISA in combination with pomalidomide and dexamethasone include:

- upper respiratory tract infection
- lung infection (pneumonia)
- diarrhea
- decreased red blood cell count (anemia)
- decreased platelet count (thrombocytopenia)

Please see additional Important Safety Information throughout, and accompanying full **Prescribing Information**, including **Patient Information**.



Find helpful resources

Multiple myeloma information and support networks

These organizations and networks can offer helpful information about living with multiple myeloma, updates and the latest research on the disease, and help connect you with emotional support, including others living with multiple myeloma.*

International Myeloma Foundation

myeloma.org | 800-452-2873

Multiple Myeloma Research Foundation

themmr.org | 203-229-0464

Lymphoma and Leukemia Society (LLS)

lls.org | 800-955-4572

HealthTree Foundation for Multiple Myeloma

healthtree.org/myeloma/community
| 800-709-1113

*This listing is provided as a resource only and does not constitute an endorsement by Sanofi of any particular organization or its programming. Additional resources on this topic may be available and should be investigated. Sanofi does not review or control the content of non-Sanofi websites. These listings do not constitute an endorsement by Sanofi of information provided by any other organizations.

Important Safety Information

What are the possible side effects of SARCLISA? (cont'd)

The most common side effects of SARCLISA in combination with carfilzomib and dexamethasone include:

- upper respiratory tract infection
- tiredness and weakness
- high blood pressure
- diarrhea
- lung infection (pneumonia)
- trouble breathing
- trouble sleeping
- bronchitis
- cough
- back pain
- decreased red blood cell count (anemia)
- decreased platelet count (thrombocytopenia)

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What is SARCLISA?

SARCLISA is a prescription medicine used in combination with:

- The medicines pomalidomide and dexamethasone, to treat adults who have received at least 2 prior therapies including lenalidomide and a proteasome inhibitor to treat multiple myeloma.
- The medicines carfilzomib and dexamethasone, to treat adults with multiple myeloma who have already received 1 to 3 lines of treatment and they did not work or are no longer working.

It is not known if SARCLISA is safe and effective in children.

Important Safety Information

Do not receive SARCLISA if you have a history of a severe allergic reaction to isatuximab-irfc or any of the ingredients in SARCLISA (see the list of ingredients in the full [Prescribing Information](#)).

Before receiving SARCLISA, tell your healthcare provider about all of your medical conditions, including if you:

- Have heart problems, if your healthcare provider prescribes SARCLISA in combination with carfilzomib and dexamethasone for you.
- Have had shingles (herpes zoster).
- Are pregnant or plan to become pregnant. SARCLISA may harm your unborn baby.
 - Females who are able to become pregnant should use an effective method of birth control during treatment and for 5 months after your last dose of SARCLISA. Talk to your healthcare provider about birth control methods that you can use during this time.
 - Tell your healthcare provider right away if you think you are pregnant or become pregnant during treatment with SARCLISA.
 - Before receiving SARCLISA in combination with pomalidomide, females and males must agree to the instructions in the pomalidomide REMS program. The pomalidomide REMS program has specific requirements about birth control, pregnancy testing, blood donation, and sperm donation that you need to know. Talk to your healthcare provider to learn more about pomalidomide.
- Are breastfeeding or plan to breastfeed. It is not known if SARCLISA passes into your breast milk. You should not breastfeed during treatment with SARCLISA.

Tell your healthcare provider about all the medicines you take, including prescription and over-the-counter medicines, vitamins, and herbal supplements.

How will I receive SARCLISA?

- SARCLISA will be given to you by your healthcare provider by intravenous (IV) infusion into your vein.
- SARCLISA is given in treatment cycles of 28 days (4 weeks), together with either the medicines pomalidomide and dexamethasone, or carfilzomib and dexamethasone.
 - In cycle 1, SARCLISA is usually given weekly.
 - Starting in cycle 2, SARCLISA is usually given every 2 weeks.
- If you miss any appointments, call your healthcare provider as soon as possible to reschedule your appointment.
- Your healthcare provider will give you medicines before each dose of SARCLISA to help reduce the risk of infusion reactions (make them less frequent and severe).

What are the possible side effects of SARCLISA?

SARCLISA may cause serious side effects, including:

- **Infusion reactions.** Infusion reactions are common with SARCLISA and can sometimes be severe or life threatening.
 - Your healthcare provider will prescribe medicines before each infusion of SARCLISA to help decrease your risk for infusion reactions or to help make any infusion reaction less severe. You will be monitored for infusion reactions during each dose of SARCLISA.
 - Your healthcare provider may slow down or stop your infusion, or completely stop treatment with SARCLISA if you have an infusion reaction.

Get medical help right away if you develop any of the following symptoms of infusion reaction during or after an infusion of SARCLISA:

- shortness of breath, wheezing, or trouble breathing
- swelling of the face, mouth, throat, or tongue
- throat tightness
- palpitations
- dizziness, lightheadedness, or fainting
- headache
- cough
- rash or itching
- nausea
- runny or stuffy nose
- chills

- **Decreased white blood cell counts.** Decreased white blood cell counts are common with SARCLISA and certain white blood cells can be severely decreased. You may have an increased risk of getting certain infections, such as upper and lower respiratory tract infections and urinary tract infections.
 - Your healthcare provider will check your blood cell counts during treatment with SARCLISA. Your healthcare provider may prescribe an antibiotic or antiviral medicine to help prevent infection, or a medicine to help increase your white blood cell counts during treatment with SARCLISA.
 - **Tell your healthcare provider right away if you develop any fever or symptoms of infection during treatment with SARCLISA.**
- **Risk of new cancers.** New cancers have happened in people during treatment with SARCLISA. Your healthcare provider will monitor you for new cancers during treatment with SARCLISA.
- **Change in blood tests.** SARCLISA can affect the results of blood tests to match your blood type. Your healthcare provider will do blood tests to match your blood type before you start treatment with SARCLISA. **Tell all of your healthcare providers that you are being treated with SARCLISA before receiving blood transfusions.**

The most common side effects of SARCLISA in combination with pomalidomide and dexamethasone include:

- upper respiratory tract infection
- lung infection (pneumonia)
- diarrhea
- decreased red blood cell count (anemia)
- decreased platelet count (thrombocytopenia)

The most common side effects of SARCLISA in combination with carfilzomib and dexamethasone include:

- upper respiratory tract infection
- tiredness and weakness
- high blood pressure
- diarrhea
- lung infection (pneumonia)
- trouble breathing
- trouble sleeping
- bronchitis
- cough
- back pain
- decreased red blood cell count (anemia)
- decreased platelet count (thrombocytopenia)

Heart failure can happen during treatment with SARCLISA in combination with carfilzomib and dexamethasone. **Tell your healthcare provider right away if you develop any of the following symptoms:**

- trouble breathing
- cough
- swelling of your ankles, feet, or legs

These are not all the possible side effects of SARCLISA. For more information, ask your healthcare provider or pharmacist.

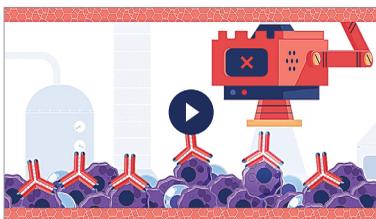
You are encouraged to report negative side effects of prescription drugs to the FDA. Visit www.fda.gov/medwatch, or call 1-800-FDA-1088.

Please see accompanying full [Prescribing Information](#), including [Patient Information](#).


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500 mg/25 mL, 100 mg/5 mL



Visit [SARCLISA.com](https://www.sarclisa.com) to watch a video about how SARCLISA works



Scan with your smartphone camera

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