

Not an actual patient.

BLINCYTO® (blinatumomab) for injection
35 mcg single-dose vial

If you've had initial therapy and are now in the next phase of treatment (consolidation). Or if your leukemia has returned or hasn't responded to treatment.

Treat your B-cell precursor ALL with BLINCYTO®[1]

A guide for patients and caregivers

ALL, acute lymphoblastic leukemia.

WHAT IS BLINCYTO® (blinatumomab)?

BLINCYTO® is a prescription medicine used to treat adults and children 1 month and older with:

- B-cell precursor acute lymphoblastic leukemia (ALL) in remission when only a small number of cancer cells remain in the body (minimal residual disease)
- B-cell precursor ALL that has come back or did not respond to previous treatments
- Philadelphia chromosome-negative B-cell precursor ALL in the consolidation phase of chemotherapy treatment with multiple phases

ALL is a cancer of the blood in which a particular kind of white blood cell is growing out of control.

It is not known if BLINCYTO® is safe and effective in children less than 1 month of age.

IMPORTANT SAFETY INFORMATION

What is the most important information I should know about BLINCYTO®?

- **Call your health care provider or get emergency medical help right away if you get any of the symptoms listed below:**
  - **BLINCYTO® may cause serious side effects that can be severe, life-threatening, or lead to death, including:**
    - **Cytokine Release Syndrome (CRS) and infusion reactions.** Symptoms of CRS and infusion reactions may include: fever, tiredness or weakness, dizziness, headache, low blood pressure, nausea, vomiting, chills, face swelling, wheezing or trouble breathing, and skin rash.

Please see additional Important Safety Information, including **BOXED WARNINGS** and Medication Guide, for BLINCYTO® on pages 20–21.

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IMPORTANT SAFETY INFORMATION

What is the most important information I should know about BLINCYTO®?

- Call your health care provider or get emergency medical help right away if you get any of the symptoms listed below:
  - **BLINCYTO® may cause serious side effects that can be severe, life-threatening, or lead to death, including:**
    - **Neurologic problems.** Symptoms of neurologic problems may include: seizures, difficulty in speaking or slurred speech, loss of consciousness, trouble sleeping, confusion and disorientation, loss of balance, headache, difficulty with facial movements, hearing, vision, or swallowing, and tremors. People with Down Syndrome may have a higher risk of seizures with BLINCYTO® treatment and may be given anti-seizure medicine before starting BLINCYTO® treatment.
  - Your health care provider will check for these problems during treatment with BLINCYTO®. Your health care provider may temporarily or completely stop your treatment with BLINCYTO® if you have severe side effects.

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What is ALL?

Acute lymphoblastic leukemia (ALL) is a cancer of the blood and bone marrow.[2,3]

Your bone marrow is responsible for making **white blood cells**, which are important to your immune system. That's because they play a role in helping your body fight infection and disease.[2,3]

However, when you have ALL, your bone marrow makes too many white blood cells, and they do not work properly.[2,3]

After being treated for ALL, **remission** is a great achievement. It means that your body is free of signs and symptoms of leukemia. But it does not always mean that the leukemia is completely gone.[2,4]

IMPORTANT SAFETY INFORMATION

Who should not receive BLINCYTO®?

- Do not receive BLINCYTO® if you are allergic to blinatumomab or to any of the ingredients of BLINCYTO®.

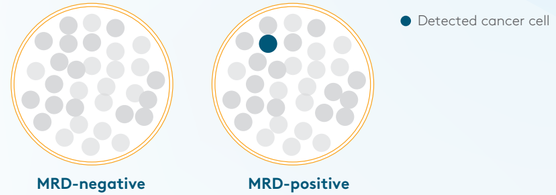
Please see additional Important Safety Information, including **BOXED WARNINGS**, for BLINCYTO® on pages 20–21.

Understanding your MRD status

Even when you are in remission, small amounts of disease may remain.[2,4]
That's why your doctor may test you for **minimal residual disease**—or **MRD**.[4]

MRD-negative means no cancer cells can be detected. However, there could still be some underlying disease.[2,4]

MRD-positive means there are a relatively small number of cancer cells remaining[2,4]



- Even after you become MRD-negative, your doctor may give you more medicine to help you stay in remission longer[5,6]
- Sometimes leukemia cells or signs and symptoms of cancer can return. This is called a **relapse**[2]
- You may be treated and never reach remission. In this case, the cancer is called **refractory** disease[2]

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What is BLINCYTO®?

BLINCYTO® is used to treat B-cell precursor ALL (BCP-ALL) in adults and children one month or older.[1]

It is not chemotherapy. BLINCYTO® is an **immunotherapy**, which means it works by engaging your immune system to find and kill leukemia cells.[1,2]

Q for you:

You may want to ask your care team:

Is BLINCYTO® right for me?

IMPORTANT SAFETY INFORMATION

Before receiving BLINCYTO®, tell your health care provider about all of your medical conditions, including if you or your child:

- have a history of neurological problems, such as seizures, confusion, trouble speaking or loss of balance
- have Down Syndrome
- have an infection

Please see additional Important Safety Information, including **BOXED WARNINGS,** for BLINCYTO® on pages 20–21.

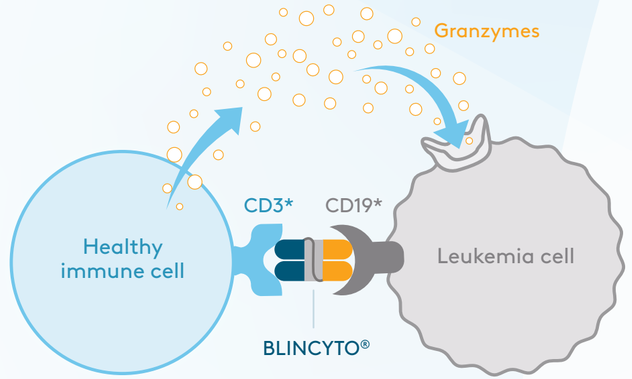
BLINCYTO® uses the body's own immune system to fight leukemia[1]

How BLINCYTO® works

1 FINDS
Leukemia cells can hide from healthy immune cells. BLINCYTO® helps healthy immune cells find leukemia cells and bring them together.[1,7]

2 ACTIVATES
When the healthy cells and leukemia cells are connected by BLINCYTO®, this activates the healthy immune cells to release specialized proteins called granzymes.[7]

3 KILLS
The granzymes then attack and kill the leukemia cells.[7]



*CD3 and CD19 are targets that help BLINCYTO® find and identify healthy immune cells and leukemia cells.[1]

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BLINCYTO® can help people who have BCP-ALL

The good news is that BLINCYTO® has been proven to help people with different types of BCP-ALL live longer.[1]

Read on to see how BLINCYTO® can help:[8]

- People with CD19-positive* **Philadelphia chromosome–negative** [Ph(–)] **B-cell precursor** (BCP) ALL who've had initial therapy and are now in the next phase of treatment (consolidation)
- People whose CD19-positive* BCP-ALL is in **remission**, but still have detectable traces of cancer (**minimal residual disease**, or MRD) after chemotherapy
- People with CD19-positive* BCP-ALL whose cancer has returned (**relapsed**) or did not respond to treatment (**refractory**)

Q for you:

You may want to ask your care team:

What should I know about the type of BCP-ALL I have?

*CD19 is a type of protein found on the surface of leukemia cells.[1]

IMPORTANT SAFETY INFORMATION

Before receiving BLINCYTO®, tell your health care provider about all of your medical conditions, including if you or your child:

- have ever had an infusion reaction after receiving BLINCYTO® or other medications
- have a history of radiation treatment to the brain, or chemotherapy treatment
- are scheduled to receive a vaccine. You should not receive a "live vaccine" within 2 weeks before you start treatment with BLINCYTO®, during treatment, and until your immune system recovers after you receive your last cycle of BLINCYTO®. If you are not sure about the type of vaccine, ask your health care provider.

Please see additional Important Safety Information, including **BOXED WARNINGS,** for BLINCYTO® on pages 20–21.

In a trial of adults with Ph(–) BCP-ALL, after initial treatment (at consolidation)[1]

Treatment with BLINCYTO® and chemotherapy helped people who were MRD-negative live longer[1,5]

BLINCYTO® was studied in 224 adults aged 30–70 years with newly diagnosed Ph(–) BCP-ALL. The goal of the study was to see whether people who were MRD-negative lived longer when BLINCYTO® was used with chemotherapy vs chemotherapy alone (112 people in each group), after initial treatment. This period of treatment is known as the consolidation phase.[1,5]

At 3 years, **more people who received BLINCYTO® and chemotherapy were alive** vs those who received chemotherapy alone[1,*]



85% **of people on BLINCYTO® + chemotherapy were still alive at 3 years** (out of 112 people)

VS



69% **of people on chemotherapy alone were still alive at 3 years** (out of 112 people)



In this study, most people (57%) were given 4 cycles of BLINCYTO®.[9] Your doctor will decide how long you will stay on treatment.[8]

Q for you:

You may want to ask your care team:

What can I expect during treatment?

*This analysis looked at survival for a median follow-up of 3.6 years, and the proportion of people alive at 3 years was estimated.[1]

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In another trial, BLINCYTO® was given to 86 adults with BCP-ALL who were **MRD-positive** after chemotherapy. The goal was to become MRD-negative, so there were no detectable traces of cancer left.[1]

BLINCYTO® helped people become MRD-negative[1,*]

8 out of 10 (81%) became MRD-negative after 4 weeks[1,†,‡]



More than half of the people treated with BLINCYTO® were able to go on to transplant.[1,§]

*As measured by a test that can detect 1 leukemia cell out of 10,000 cells in the bone marrow. (More sensitive testing methods may be able to detect lower levels of leukemia cells.)[1,4]
†Adults studied had at least 3 rounds of chemotherapy prior to treatment with BLINCYTO®. They were in complete remission either for the first or second time. Remission is a response to treatment where signs of leukemia have disappeared but it does not always mean the leukemia is cured.[1,2]
‡One cycle of treatment with BLINCYTO® consists of four weeks of treatment followed by two weeks without treatment.[1]
§59 out of 86 patients treated with BLINCYTO® in the study proceeded to a transplant.[1]

Please see additional Important Safety Information, including **BOXED WARNINGS**, for BLINCYTO® on pages 20–21.

In a separate study of 405 adults with Ph(–) BCP-ALL, **whose leukemia had returned (relapsed) or hadn't responded to treatment (refractory)**[1]

BLINCYTO® helped people live longer[1]

In this study, BLINCYTO® was tested against commonly prescribed chemotherapy. In the study, 271 people were treated with BLINCYTO® and 134 people were treated with chemotherapy.[1]



People treated with BLINCYTO® lived nearly **twice as long**[1,*]

7.7 months (median OS) with BLINCYTO® vs 4.0 months with chemotherapy.[1]

What's more, when treated after first relapse, people on BLINCYTO® had a median survival of 11.1 months vs those on chemotherapy who had a median survival of 5.5 months.[10]

*Median overall survival is defined as the length of time from the start of treatment to when half of the patients in a treatment group are still alive.[1,2]

IMPORTANT SAFETY INFORMATION

Before receiving BLINCYTO®, tell your health care provider about all of your medical conditions, including if you or your child:

- are pregnant or plan to become pregnant. BLINCYTO® may harm your unborn baby. Tell your health care provider if you become pregnant during treatment with BLINCYTO®
  - If you are able to become pregnant, your health care provider should do a pregnancy test before you start treatment with BLINCYTO®.
  - Females who are able to become pregnant should use an effective form of birth control (contraception) during treatment with BLINCYTO®, and for 48 hours after your last dose of BLINCYTO®.

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Possible side effects

BLINCYTO® may cause serious side effects that can be severe, life-threatening, or lead to death. These include: cytokine release syndrome (CRS), infusion reactions, and neurologic problems.[8]

CRS is a condition that can happen when your **immune system has a reaction to BLINCYTO®**. It can be severe, life-threatening, or lead to death. Contact your health care provider or seek emergency medical help if you notice any signs and symptoms below:[8,11,12]

- Fever
- Tiredness or weakness
- Dizziness
- Headache
- Low blood pressure
- Nausea
- Vomiting (throwing up)
- Chills
- Face swelling
- Wheezing or trouble breathing
- Skin rash

Some facts to know

- Among people receiving BLINCYTO® in clinical trials, CRS occurred in **16%** during the consolidation phase of BCP-ALL treatment; **7%** of those in remission with a small number of leukemia cells remaining; and **15%** of those whose disease had returned or did not respond to previous treatment[1]
- In clinical trials of BLINCYTO®, patients who had CRS began experiencing symptoms a median of 2 days after starting BLINCYTO®, and in cases that resolved, these symptoms resolved a median of 5 days after they began[1]
- Your doctor may temporarily or completely stop BLINCYTO® if CRS occurs[1]

BLINCYTO® may cause **neurologic problems** that can be severe, life-threatening, or lead to death. These are issues that could harm your brain or nerves and can be dangerous. Contact your health care provider or seek emergency medical help quickly if you experience any of the symptoms below:[8,13]

- Seizures
- Difficulty in speaking or slurred speech
- Loss of consciousness
- Trouble sleeping
- Confusion and disorientation
- Loss of balance
- Headache
- Difficulty with facial movements, hearing, vision, or swallowing
- Tremors (shakiness)

Some facts to know

- In clinical trials of BLINCYTO®, around **65%** of people reported neurologic issues after starting BLINCYTO®, with **13% having severe symptoms**[1]
- In clinical trials, patients who had neurologic problems typically experienced their first symptom within the first 2 weeks after starting BLINCYTO®. Most of these symptoms resolved after BLINCYTO® treatment was interrupted, but some resulted in treatment being discontinued[1]

People with Down Syndrome may have a higher risk of seizures with BLINCYTO® treatment and may be given anti-seizure medicine before starting BLINCYTO® treatment.[8]

Please see additional Important Safety Information, including **BOXED WARNINGS,** for BLINCYTO® on pages 20–21.

The most common side effects of BLINCYTO® include:[8]

- Fever
- Reactions related to infusion of the medicine such as face swelling, low blood pressure, and high blood pressure (infusion-related reactions)
- Headache
- Infection
- Muscle, joint, and bone pain
- Low white blood cell count (neutropenia)
- Nausea
- Low red blood cell count (anemia)
- Low platelet count (thrombocytopenia)
- Diarrhea

BLINCYTO® may cause the following serious side effects:[8]

- Infections
- Tumor lysis syndrome (TLS)
- Low white blood cell counts (neutropenia)
- Abnormal liver blood tests
- Inflammation of the pancreas (pancreatitis)

These are not all the possible side effects of BLINCYTO®.
Call your health care provider for medical advice about side effects. You may report side effects to the FDA at 1-800-FDA-1088.

Q for you:

You may want to ask your care team:
Who should I call about side effects?

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How BLINCYTO® is given

BLINCYTO® is given by a continuous **intravenous (IV) infusion into your vein.** This means the medicine goes into a vein and then goes into the blood. The dosing of BLINCYTO® occurs in cycles. Here's how a cycle works:[1,2]



One cycle is 4 weeks of infusion followed by 2 weeks without infusion. Your doctor will decide how long you will need to stay on treatment.[1]

Q for you:

You may want to ask your care team:

How many cycles of BLINCYTO® could I receive and how long will my treatment last?

IMPORTANT SAFETY INFORMATION

Before receiving BLINCYTO®, tell your health care provider about all of your medical conditions, including if you or your child:

- are breastfeeding or plan to breastfeed. It is not known if BLINCYTO® passes into your breast milk. You should not breastfeed during treatment with BLINCYTO® and for 48 hours after your last dose.

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

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IN THE HOSPITAL

Preparing for and getting treatment

Treatment with BLINCYTO® starts in the hospital to make sure that it is safe and to watch for any side effects that may occur.[8]

- You'll be given a medicine to help reduce the likelihood of infusion reactions, which are common for medicines like BLINCYTO®[8] (see page 12–13 to learn more about side effects)
- You will be monitored and treated for any serious reactions to BLINCYTO® if they happen[8]

One cycle of BLINCYTO® treatment is 28 days (4 weeks)[8]



First 3 or 9 days*
in the hospital (in-patient)[8]



First 2 days
in the hospital (in-patient)[8]

The remaining days of the cycle may be out-patient, as determined by your health care provider[8]

- After the hospital stay, your doctor will decide if the rest of the treatment can be given at home with a small portable pump[8]
- Your doctor may refer you to an outpatient clinic or an infusion center to manage treatment[8]
- The medicine will need to be refilled every 24 hours, 48 hours, 72 hours, 96 hours, or 7 days by a health care professional[1,8]
- If additional treatment cycles of BLINCYTO® are necessary or if treatment is stopped for a period of time and restarted, treatment may also be provided in a hospital or clinic.[8]

The length of your hospital stay will depend on whether you are receiving BLINCYTO® early after initial therapy (consolidation), to treat MRD, or to treat leukemia that has returned (relapsed) or not responded to treatment (refractory).[1]

*Your doctor will determine how many days you will spend in the hospital and the number of BLINCYTO® treatment cycles you will need.[1,8]

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Customizing your treatment

After the hospital stay, your doctor will decide if you can get the rest of your BLINCYTO® treatment at home, if that is right for you. Or your doctor may refer you to an outpatient clinic or an infusion center to manage your treatment.[1]

BLINCYTO® outside the hospital

When you receive BLINCYTO® outside of the hospital, you will continue treatment with a small, portable IV infusion pump.[8]

BLINCYTO® is available in 5 infusion bags[1]



The times indicate how long before a bag change is needed. Your doctor will help decide which bag schedule is best for you, based on a variety of factors. Someone from your health care team will assist you when it's time to change your bag.

IMPORTANT SAFETY INFORMATION

What should I avoid while receiving BLINCYTO®?

- Do not drive, operate heavy machinery, or do other dangerous activities while you are receiving BLINCYTO® because BLINCYTO® can cause neurological symptoms such as dizziness, seizures, and confusion.

Please see additional Important Safety Information, including **BOXED WARNINGS**, for BLINCYTO® on pages 20–21.

Receiving BLINCYTO® at home

If your doctor and health care team decide that continuing BLINCYTO® treatment at home is right for you, it may feel overwhelming at first.

Thankfully, your health care team is there to help make sure you are fully prepared. They will be able to answer any questions you may have before and during treatment.

Here are just some of the ways to help keep you safe and feel confident when BLINCYTO® is given at home:

- Talk to your health care provider about whether the IV bag will be changed at an outpatient center or by a home health care provider
- Call your doctor if there are any problems or side effects. For more information on side effects, see pages 12–13
- Do not change the settings on the pump, even if the alarm sounds. Any setting changes may cause you to receive too much or too little medicine[8]
- If there are any problems with the pump or the pump alarm sounds, contact your health care provider immediately[8]
- If tubing detaches or if you detect leakage from your pump or bag, contact your health care provider immediately
- Keep BLINCYTO® and all medicines out of the reach of other children in the household

Your health care provider will explain how to store and dispose of BLINCYTO® and used supplies.

Q for you:

You may want to ask your care team:

How might BLINCYTO® affect my daily activities?

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With personalized solutions, Amgen® SupportPlus is here to help

AMGEN® Support+



Amgen® Patient Navigator

A single point of contact for answers about starting your Amgen therapy, navigating your treatment journey, and support to help as you start and stay on therapy as prescribed.



Financial Support

Every patient has unique needs. Amgen SupportPlus is here to provide financial support information and resources, regardless of your current financial situation or the type of insurance you have.*



Amgen SupportPlus

CALL 866-264-2778 Monday to Friday, 8:30 AM to 8:00 PM ET, or visit www.AmgenSupportPlus.com to learn how Amgen can help.

*The Amgen Patient Navigator is not part of a patient's treatment team and does not provide medical advice or case management services. The Amgen Patient Navigator does not administer Amgen medications. Patients should always consult their health care provider regarding medical decisions or treatment concerns.

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Your care team

Health care providers may be only one part of your support network. Your loved ones can be a huge help on your treatment journey.

Friends and family want to be there for you but may not know how. Let them know it's okay to ask questions and check in with you—and remember, you can ask for help, too. They are there for you.

In addition to personal caregivers, there are patient support groups that can provide invaluable support throughout the treatment process, such as **Blood Cancer United** at **bloodcancerunited.org**

You may also want to reach out to the **American Cancer Society** at **cancer.org**

Adolescents and young adults may want to check out **Stupid Cancer** at **stupidcancer.org**

Q for you:

You may want to ask your care team:

Can you recommend any local or online support groups?

These third-party resources are for your information only. The organizations listed have not endorsed Amgen or any of its respective products and services. Amgen does not endorse and is not responsible for the content included in these resources.

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WHAT IS BLINCYTO® (blinatumomab)?

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- B-cell precursor ALL that has come back or did not respond to previous treatments
- Philadelphia chromosome-negative B-cell precursor ALL in the consolidation phase of chemotherapy treatment with multiple phases

ALL is a cancer of the blood in which a particular kind of white blood cell is growing out of control.

It is not known if BLINCYTO® is safe and effective in children less than 1 month of age.

IMPORTANT SAFETY INFORMATION

What is the most important information I should know about BLINCYTO®?

- **Call your health care provider or get emergency medical help right away if you get any of the symptoms listed below:**
  - **BLINCYTO® may cause serious side effects that can be severe, life-threatening, or lead to death, including:**
    - **Cytokine Release Syndrome (CRS) and infusion reactions.** Symptoms of CRS and infusion reactions may include: fever, tiredness or weakness, dizziness, headache, low blood pressure, nausea, vomiting, chills, face swelling, wheezing or trouble breathing, and skin rash.
    - **Neurologic problems.** Symptoms of neurologic problems may include: seizures, difficulty in speaking or slurred speech, loss of consciousness, trouble sleeping, confusion and disorientation, loss of balance, headache, difficulty with facial movements, hearing, vision, or swallowing, and tremors. People with Down Syndrome may have a higher risk of seizures with BLINCYTO® treatment and may be given anti-seizure medicine before starting BLINCYTO® treatment.
  - Your health care provider will check for these problems during treatment with BLINCYTO®. Your health care provider may temporarily or completely stop your treatment with BLINCYTO® if you have severe side effects.

Who should not receive BLINCYTO®?

- Do not receive BLINCYTO® if you are allergic to blinatumomab or to any of the ingredients of BLINCYTO®.

Before receiving BLINCYTO®, tell your health care provider about all of your medical conditions, including if you or your child:

- have a history of neurological problems, such as seizures, confusion, trouble speaking or loss of balance
- have Down Syndrome
- have an infection
- have ever had an infusion reaction after receiving BLINCYTO® or other medications
- have a history of radiation treatment to the brain, or chemotherapy treatment
- are scheduled to receive a vaccine. You should not receive a "live vaccine" within 2 weeks before you start treatment with BLINCYTO®, during treatment, and until your immune system recovers after you receive your last cycle of BLINCYTO®. If you are not sure about the type of vaccine, ask your health care provider.
- are pregnant or plan to become pregnant. BLINCYTO® may harm your unborn baby. Tell your health care provider if you become pregnant during treatment with BLINCYTO®.
  - If you are able to become pregnant, your health care provider should do a pregnancy test before you start treatment with BLINCYTO®.
  - Females who are able to become pregnant should use an effective form of birth control (contraception) during treatment with BLINCYTO®, and for 48 hours after your last dose of BLINCYTO®

- are breastfeeding or plan to breastfeed. It is not known if BLINCYTO® passes into your breast milk. You should not breastfeed during treatment with BLINCYTO® and for 48 hours after your last dose.

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

What should I avoid while receiving BLINCYTO®?

- Do not drive, operate heavy machinery, or do other dangerous activities while you are receiving BLINCYTO® because BLINCYTO® can cause neurological symptoms such as dizziness, seizures, and confusion.

BLINCYTO® may cause serious side effects, including:

- **Infections.** BLINCYTO® may cause life-threatening infections that may lead to death. Tell your health care provider right away in case you develop any signs or symptoms of an infection.
- **Tumor Lysis Syndrome (TLS).** TLS is caused by the fast breakdown of cancer cells. TLS can be life-threatening and may lead to death. Tell your healthcare provider right away if you have any symptoms of TLS during treatment with BLINCYTO®, including: nausea and vomiting, confusion, shortness of breath, irregular heartbeat, dark or cloudy urine, reduced amount of urine, unusual tiredness, muscle cramps.
- **Low white blood cell counts (neutropenia).** Neutropenia is common with BLINCYTO® treatment and may sometimes be life-threatening. Low white blood cell counts can increase your risk of infection. Your health care provider will do blood tests to check your white blood cell counts during treatment with BLINCYTO®. Tell your health care provider right away if you get a fever.
- **Abnormal liver blood test.** Your health care provider will do blood tests to check your liver before you start BLINCYTO® and during treatment with BLINCYTO®.
- **Inflammation of the pancreas (pancreatitis).** Pancreatitis may happen in patients treated with BLINCYTO® and corticosteroids. It may be severe and lead to death. Tell your health care provider right away if you have severe stomach-area pain that does not go away. The pain may happen with or without nausea and vomiting.
- Your health care provider will do blood tests during treatment to check for side effects.

The most common side effects

- The most common side effects of BLINCYTO® include:
  - Fever
  - Reactions related to infusion of the medicine such as face swelling, low blood pressure, and high blood pressure (infusion-related reactions)
  - Headache
  - Infection
  - Muscle, joint, and bone pain
  - Low white blood cell count (neutropenia)
  - Nausea
  - Low red blood cell count (anemia)
  - Low platelet count (thrombocytopenia)
  - Diarrhea

These are not all the possible side effects of BLINCYTO®.

Call your health care provider for medical advice about side effects. You may report side effects to FDA at 1-800-FDA-1088.

Please read the accompanying Medication Guide before you or your child receives BLINCYTO® and before each BLINCYTO® infusion and discuss it with your doctor.

Please see accompanying BLINCYTO® full Prescribing Information, including BOXED WARNINGS and Medication Guide.

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Not an actual patient.

Learn more on BLINCYTO.com

References: 1. BLINCYTO® (blinatumomab) prescribing information, Amgen. **2.** National Cancer Institute. NCI Dictionary of Cancer Terms. https://www.cancer.gov/publications/dictionaries/cancer-terms. Accessed April 4, 2026. **3.** Children's Hospital of Philadelphia. Acute Lymphoblastic Leukemia (ALL). https://www.chop.edu/conditions-diseases/acute-lymphoblastic-leukemia-all. Accessed April 4, 2026. **4.** Brüggemann M, Gökbuget N, Kneba M. Acute lymphoblastic leukemia: monitoring minimal residual disease as a therapeutic principle. *Semin Oncol*. 2012;39:47-57. **5.** Litzow MR, Sun Z, Mattison RJ, et al. Blinatumomab for MRD-negative acute lymphoblastic leukemia in adults. *N Engl J Med*. 2024;391:320-333. **6.** Gupta S, Rau RE, Kairalla JA, et al. Blinatumomab in standard-risk B-cell acute lymphoblastic leukemia in children. *N Engl J Med*. 2025;392:875-891. **7.** Nagorsen D, Baeuerle PA. Immunomodulatory therapy of cancer with T cell-engaging BiTE antibody blinatumomab. *Exp Cell Res*. 2011;317:1255-1260. **8.** BLINCYTO® (blinatumomab) medication guide, Amgen. **9.** Data on file, Amgen; 2021. **10.** Dombret H, Topp MS, Schuh A, et al. Blinatumomab versus chemotherapy in first salvage or in later salvage for B-cell precursor acute lymphoblastic leukemia. *Leuk Lymphoma*. 2019;60:2214-2222. **11.** National Cancer Institute. Common Terminology Criteria for Adverse Events (CTCAE) Version 4.0. https://ctep.cancer.gov/protocolDevelopment/electronic_applications/docs/CTCAE_v4_Quick_Reference_8.5x11.pdf. Accessed April 4, 2026. **12.** Shimabukuro-Vornhagen A, Gödel P, Subklewe M, et al. Cytokine release syndrome. *J ImmunoTher Cancer*. 2018;6:56. **13.** Lee DW, Santomasso BD, Locke FL, et al. ASTCT consensus grading for cytokine release syndrome and neurologic toxicity associated with immune effector cells. *Bio Blood Marrow Transport*. 2019;25:625-638.

Please see accompanying BLINCYTO® full Prescribing Information, including **BOXED WARNINGS** and Medication Guide.

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USA-103-82282 05/26

BLINCYTO® (blinatumomab) for injection
35 mcg single-dose vial



Not an actual patient.

BLINCYTO® (blinatumomab) for injection
35 mcg single-dose vial

If you've had initial therapy and are now in the next phase of treatment (consolidation).
Or if your leukemia has returned or hasn't responded to treatment.

Treat your B-cell precursor ALL with BLINCYTO®[1]

A guide for patients and caregivers

ALL, acute lymphoblastic leukemia.

WHAT IS BLINCYTO® (blinatumomab)?

BLINCYTO® is a prescription medicine used to treat adults and children 1 month and older with:

- B-cell precursor acute lymphoblastic leukemia (ALL) in remission when only a small number of cancer cells remain in the body (minimal residual disease)
- B-cell precursor ALL that has come back or did not respond to previous treatments
- Philadelphia chromosome-negative B-cell precursor ALL in the consolidation phase of chemotherapy treatment with multiple phases

ALL is a cancer of the blood in which a particular kind of white blood cell is growing out of control.

It is not known if BLINCYTO® is safe and effective in children less than 1 month of age.

IMPORTANT SAFETY INFORMATION

What is the most important information I should know about BLINCYTO®?

- **Call your health care provider or get emergency medical help right away if you get any of the symptoms listed below:**
  - **BLINCYTO® may cause serious side effects that can be severe, life-threatening, or lead to death, including:**
    - **Cytokine Release Syndrome (CRS) and infusion reactions.** Symptoms of CRS and infusion reactions may include: fever, tiredness or weakness, dizziness, headache, low blood pressure, nausea, vomiting, chills, face swelling, wheezing or trouble breathing, and skin rash.

Please see additional Important Safety Information, including **BOXED WARNINGS** and Medication Guide, for BLINCYTO® on pages 20–21.

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IMPORTANT SAFETY INFORMATION

What is the most important information I should know about BLINCYTO®?

- Call your health care provider or get emergency medical help right away if you get any of the symptoms listed below:
  - **BLINCYTO® may cause serious side effects that can be severe, life-threatening, or lead to death, including:**
    - **Neurologic problems.** Symptoms of neurologic problems may include: seizures, difficulty in speaking or slurred speech, loss of consciousness, trouble sleeping, confusion and disorientation, loss of balance, headache, difficulty with facial movements, hearing, vision, or swallowing, and tremors. People with Down Syndrome may have a higher risk of seizures with BLINCYTO® treatment and may be given anti-seizure medicine before starting BLINCYTO® treatment.
  - Your health care provider will check for these problems during treatment with BLINCYTO®. Your health care provider may temporarily or completely stop your treatment with BLINCYTO® if you have severe side effects.

Please see additional Important Safety Information, including **BOXED WARNINGS,** for BLINCYTO® on pages 20–21.

BLINCYTO® (blinatumomab) for injection
35 mcg single-dose vial

What is ALL?

Acute lymphoblastic leukemia (ALL) is a cancer of the blood and bone marrow.[2,3]

Your bone marrow is responsible for making **white blood cells**, which are important to your immune system. That's because they play a role in helping your body fight infection and disease.[2,3]

However, when you have ALL, your bone marrow makes too many white blood cells, and they do not work properly.[2,3]

After being treated for ALL, **remission** is a great achievement. It means that your body is free of signs and symptoms of leukemia. But it does not always mean that the leukemia is completely gone.[2,4]

IMPORTANT SAFETY INFORMATION

Who should not receive BLINCYTO®?

- Do not receive BLINCYTO® if you are allergic to blinatumomab or to any of the ingredients of BLINCYTO®.

Please see additional Important Safety Information, including **BOXED WARNINGS,** for BLINCYTO® on pages 20–21.

Understanding your MRD status

Even when you are in remission, small amounts of disease may remain.[2,4]
That's why your doctor may test you for **minimal residual disease**—or **MRD.**[4]

MRD-negative means no cancer cells can be detected. However, there could still be some underlying disease.[2,4]

MRD-positive means there are a relatively small number of cancer cells remaining[2,4]



- Even after you become MRD-negative, your doctor may give you more medicine to help you stay in remission longer[5,6]
- Sometimes leukemia cells or signs and symptoms of cancer can return. This is called a **relapse**[2]
- You may be treated and never reach remission. In this case, the cancer is called **refractory** disease[2]

BLINCYTO® (blinatumomab) for injection
35 mcg single-dose vial

What is BLINCYTO®?

BLINCYTO® is used to treat B-cell precursor ALL (BCP-ALL) in adults and children one month or older.[1]

It is not chemotherapy. BLINCYTO® is an **immunotherapy**, which means it works by engaging your immune system to find and kill leukemia cells.[1,2]

Q for you:

You may want to ask your care team:

Is BLINCYTO® right for me?

IMPORTANT SAFETY INFORMATION

Before receiving BLINCYTO®, tell your health care provider about all of your medical conditions, including if you or your child:

- have a history of neurological problems, such as seizures, confusion, trouble speaking or loss of balance
- have Down Syndrome
- have an infection

Please see additional Important Safety Information, including **BOXED WARNINGS,** for BLINCYTO® on pages 20–21.

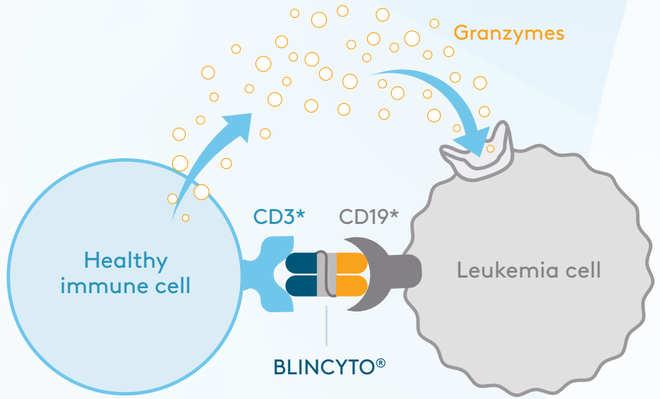
BLINCYTO® uses the body's own immune system to fight leukemia[1]

How BLINCYTO® works

1 FINDS
Leukemia cells can hide from healthy immune cells. BLINCYTO® helps healthy immune cells find leukemia cells and bring them together.[1,7]

2 ACTIVATES
When the healthy cells and leukemia cells are connected by BLINCYTO®, this activates the healthy immune cells to release specialized proteins called granzymes.[7]

3 KILLS
The granzymes then attack and kill the leukemia cells.[7]



*CD3 and CD19 are targets that help BLINCYTO® find and identify healthy immune cells and leukemia cells.[1]

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BLINCYTO® can help people who have BCP-ALL

The good news is that BLINCYTO® has been proven to help people with different types of BCP-ALL live longer.[1]

Read on to see how BLINCYTO® can help:[8]

- People with CD19-positive* **Philadelphia chromosome–negative** [Ph(–)] **B-cell precursor** (BCP) ALL who've had initial therapy and are now in the next phase of treatment (consolidation)
- People whose CD19-positive* BCP-ALL is in **remission**, but still have detectable traces of cancer (**minimal residual disease**, or MRD) after chemotherapy
- People with CD19-positive* BCP-ALL whose cancer has returned (**relapsed**) or did not respond to treatment (**refractory**)

Q for you:

You may want to ask your care team:

What should I know about the type of BCP-ALL I have?

*CD19 is a type of protein found on the surface of leukemia cells.[1]

IMPORTANT SAFETY INFORMATION

Before receiving BLINCYTO®, tell your health care provider about all of your medical conditions, including if you or your child:

- have ever had an infusion reaction after receiving BLINCYTO® or other medications
- have a history of radiation treatment to the brain, or chemotherapy treatment
- are scheduled to receive a vaccine. You should not receive a "live vaccine" within 2 weeks before you start treatment with BLINCYTO®, during treatment, and until your immune system recovers after you receive your last cycle of BLINCYTO®. If you are not sure about the type of vaccine, ask your health care provider.

Please see additional Important Safety Information, including **BOXED WARNINGS,** for BLINCYTO® on pages 20–21.

In a trial of adults with Ph(–) BCP-ALL, after initial treatment (at consolidation)[1]

Treatment with BLINCYTO® and chemotherapy helped people who were MRD-negative live longer[1,5]

BLINCYTO® was studied in 224 adults aged 30–70 years with newly diagnosed Ph(–) BCP-ALL. The goal of the study was to see whether people who were MRD-negative lived longer when BLINCYTO® was used with chemotherapy vs chemotherapy alone (112 people in each group), after initial treatment. This period of treatment is known as the consolidation phase.[1,5]

At 3 years, **more people who received BLINCYTO® and chemotherapy were alive** vs those who received chemotherapy alone[1,*]



85% **of people on BLINCYTO® + chemotherapy were still alive at 3 years** (out of 112 people)

VS



69% **of people on chemotherapy alone were still alive at 3 years** (out of 112 people)



In this study, most people (57%) were given 4 cycles of BLINCYTO®.[9] Your doctor will decide how long you will stay on treatment.[8]

Q for you:

You may want to ask your care team:

What can I expect during treatment?

*This analysis looked at survival for a median follow-up of 3.6 years, and the proportion of people alive at 3 years was estimated.[1]

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In another trial, BLINCYTO® was given to 86 adults with BCP-ALL who were **MRD-positive** after chemotherapy. The goal was to become MRD-negative, so there were no detectable traces of cancer left.[1]

BLINCYTO® helped people become MRD-negative[1,*]

8 out of 10 (81%) became MRD-negative after 4 weeks[1,†,‡]



More than half of the people treated with BLINCYTO® were able to go on to transplant.[1,§]

*As measured by a test that can detect 1 leukemia cell out of 10,000 cells in the bone marrow. (More sensitive testing methods may be able to detect lower levels of leukemia cells.)[1,4]
†Adults studied had at least 3 rounds of chemotherapy prior to treatment with BLINCYTO®. They were in complete remission either for the first or second time. Remission is a response to treatment where signs of leukemia have disappeared but it does not always mean the leukemia is cured.[1,2]
‡One cycle of treatment with BLINCYTO® consists of four weeks of treatment followed by two weeks without treatment.[1]
§59 out of 86 patients treated with BLINCYTO® in the study proceeded to a transplant.[1]

Please see additional Important Safety Information, including **BOXED WARNINGS,** for BLINCYTO® on pages 20–21.

In a separate study of 405 adults with Ph(–) BCP-ALL, **whose leukemia had returned (relapsed) or hadn't responded to treatment (refractory)**[1]

BLINCYTO® helped people live longer[1]

In this study, BLINCYTO® was tested against commonly prescribed chemotherapy. In the study, 271 people were treated with BLINCYTO® and 134 people were treated with chemotherapy.[1]



People treated with BLINCYTO® lived nearly **twice as long**[1,*]

7.7 months (median OS) with BLINCYTO® vs 4.0 months with chemotherapy.[1]

What's more, when treated after first relapse, people on BLINCYTO® had a median survival of 11.1 months vs those on chemotherapy who had a median survival of 5.5 months.[10]

*Median overall survival is defined as the length of time from the start of treatment to when half of the patients in a treatment group are still alive.[1,2]

IMPORTANT SAFETY INFORMATION

Before receiving BLINCYTO®, tell your health care provider about all of your medical conditions, including if you or your child:

- are pregnant or plan to become pregnant. BLINCYTO® may harm your unborn baby. Tell your health care provider if you become pregnant during treatment with BLINCYTO®
  - If you are able to become pregnant, your health care provider should do a pregnancy test before you start treatment with BLINCYTO®.
  - Females who are able to become pregnant should use an effective form of birth control (contraception) during treatment with BLINCYTO®, and for 48 hours after your last dose of BLINCYTO®.

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Possible side effects

BLINCYTO® may cause serious side effects that can be severe, life-threatening, or lead to death. These include: cytokine release syndrome (CRS), infusion reactions, and neurologic problems.[8]

CRS is a condition that can happen when your **immune system has a reaction to BLINCYTO®**. It can be severe, life-threatening, or lead to death. Contact your health care provider or seek emergency medical help if you notice any signs and symptoms below:[8,11,12]

- Fever
- Tiredness or weakness
- Dizziness
- Headache
- Low blood pressure
- Nausea
- Vomiting (throwing up)
- Chills
- Face swelling
- Wheezing or trouble breathing
- Skin rash

Some facts to know

- Among people receiving BLINCYTO® in clinical trials, CRS occurred in **16%** during the consolidation phase of BCP-ALL treatment; **7%** of those in remission with a small number of leukemia cells remaining; and **15%** of those whose disease had returned or did not respond to previous treatment[1]
- In clinical trials of BLINCYTO®, patients who had CRS began experiencing symptoms a median of 2 days after starting BLINCYTO®, and in cases that resolved, these symptoms resolved a median of 5 days after they began[1]
- Your doctor may temporarily or completely stop BLINCYTO® if CRS occurs[1]

BLINCYTO® may cause **neurologic problems** that can be severe, life-threatening, or lead to death. These are issues that could harm your brain or nerves and can be dangerous. Contact your health care provider or seek emergency medical help quickly if you experience any of the symptoms below:[8,13]

- Seizures
- Difficulty in speaking or slurred speech
- Loss of consciousness
- Trouble sleeping
- Confusion and disorientation
- Loss of balance
- Headache
- Difficulty with facial movements, hearing, vision, or swallowing
- Tremors (shakiness)

Some facts to know

- In clinical trials of BLINCYTO®, around **65%** of people reported neurologic issues after starting BLINCYTO®, with **13% having severe symptoms**[1]
- In clinical trials, patients who had neurologic problems typically experienced their first symptom within the first 2 weeks after starting BLINCYTO®. Most of these symptoms resolved after BLINCYTO® treatment was interrupted, but some resulted in treatment being discontinued[1]

People with Down Syndrome may have a higher risk of seizures with BLINCYTO® treatment and may be given anti-seizure medicine before starting BLINCYTO® treatment.[8]

Please see additional Important Safety Information, including **BOXED WARNINGS,** for BLINCYTO® on pages 20–21.

IN THE HOSPITAL

The most common side effects of BLINCYTO® include:[8]

- Fever
- Reactions related to infusion of the medicine such as face swelling, low blood pressure, and high blood pressure (infusion-related reactions)
- Headache
- Infection
- Muscle, joint, and bone pain
- Low white blood cell count (neutropenia)
- Nausea
- Low red blood cell count (anemia)
- Low platelet count (thrombocytopenia)
- Diarrhea

BLINCYTO® may cause the following serious side effects:[8]

- Infections
- Tumor lysis syndrome (TLS)
- Low white blood cell counts (neutropenia)
- Abnormal liver blood tests
- Inflammation of the pancreas (pancreatitis)

These are not all the possible side effects of BLINCYTO®.
Call your health care provider for medical advice about side effects. You may report side effects to the FDA at 1-800-FDA-1088.

Q for you:

You may want to ask your care team:
Who should I call about side effects?

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How BLINCYTO® is given

BLINCYTO® is given by a continuous **intravenous (IV) infusion into your vein.** This means the medicine goes into a vein and then goes into the blood. The dosing of BLINCYTO® occurs in cycles. Here's how a cycle works:[1,2]



One cycle is 4 weeks of infusion followed by 2 weeks without infusion. Your doctor will decide how long you will need to stay on treatment.[1]

Q for you:

You may want to ask your care team:

How many cycles of BLINCYTO® could I receive and how long will my treatment last?

IMPORTANT SAFETY INFORMATION

Before receiving BLINCYTO®, tell your health care provider about all of your medical conditions, including if you or your child:

- are breastfeeding or plan to breastfeed. It is not known if BLINCYTO® passes into your breast milk. You should not breastfeed during treatment with BLINCYTO® and for 48 hours after your last dose.

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

Please see additional Important Safety Information, including **BOXED WARNINGS,** for BLINCYTO® on pages 20–21.

Preparing for and getting treatment

Treatment with BLINCYTO® starts in the hospital to make sure that it is safe and to watch for any side effects that may occur.[8]

- You'll be given a medicine to help reduce the likelihood of infusion reactions, which are common for medicines like BLINCYTO®[8] (see page 12–13 to learn more about side effects)
- You will be monitored and treated for any serious reactions to BLINCYTO® if they happen[8]

One cycle of BLINCYTO® treatment is 28 days (4 weeks)[8]

CYCLE 1

First 3 or 9 days*
in the hospital (in-patient)[8]

CYCLE 2*

First 2 days
in the hospital (in-patient)[8]

The remaining days of the cycle may be out-patient, as determined by your health care provider[8]

- After the hospital stay, your doctor will decide if the rest of the treatment can be given at home with a small portable pump[8]
- Your doctor may refer you to an outpatient clinic or an infusion center to manage treatment[8]
- The medicine will need to be refilled every 24 hours, 48 hours, 72 hours, 96 hours, or 7 days by a health care professional[1,8]
- If additional treatment cycles of BLINCYTO® are necessary or if treatment is stopped for a period of time and restarted, treatment may also be provided in a hospital or clinic.[8]

The length of your hospital stay will depend on whether you are receiving BLINCYTO® early after initial therapy (consolidation), to treat MRD, or to treat leukemia that has returned (relapsed) or not responded to treatment (refractory).[1]

*Your doctor will determine how many days you will spend in the hospital and the number of BLINCYTO® treatment cycles you will need.[1,8]

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Customizing your treatment

After the hospital stay, your doctor will decide if you can get the rest of your BLINCYTO® treatment at home, if that is right for you. Or your doctor may refer you to an outpatient clinic or an infusion center to manage your treatment.[1]

BLINCYTO® outside the hospital

When you receive BLINCYTO® outside of the hospital, you will continue treatment with a small, portable IV infusion pump.[8]

BLINCYTO® is available in 5 infusion bags[1]



The times indicate how long before a bag change is needed. Your doctor will help decide which bag schedule is best for you, based on a variety of factors. Someone from your health care team will assist you when it's time to change your bag.

IMPORTANT SAFETY INFORMATION

What should I avoid while receiving BLINCYTO®?

- Do not drive, operate heavy machinery, or do other dangerous activities while you are receiving BLINCYTO® because BLINCYTO® can cause neurological symptoms such as dizziness, seizures, and confusion.

Please see additional Important Safety Information, including **BOXED WARNINGS,** for BLINCYTO® on pages 20–21.

Receiving BLINCYTO® at home

If your doctor and health care team decide that continuing BLINCYTO® treatment at home is right for you, it may feel overwhelming at first.

Thankfully, your health care team is there to help make sure you are fully prepared. They will be able to answer any questions you may have before and during treatment.

Here are just some of the ways to help keep you safe and feel confident when BLINCYTO® is given at home:

- Talk to your health care provider about whether the IV bag will be changed at an outpatient center or by a home health care provider
- Call your doctor if there are any problems or side effects. For more information on side effects, see pages 12–13
- Do not change the settings on the pump, even if the alarm sounds. Any setting changes may cause you to receive too much or too little medicine[8]
- If there are any problems with the pump or the pump alarm sounds, contact your health care provider immediately[8]
- If tubing detaches or if you detect leakage from your pump or bag, contact your health care provider immediately
- Keep BLINCYTO® and all medicines out of the reach of other children in the household

Your health care provider will explain how to store and dispose of BLINCYTO® and used supplies.

Q for you:

You may want to ask your care team:

How might BLINCYTO® affect my daily activities?

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With personalized solutions, Amgen® SupportPlus is here to help

AMGEN® Support+



Amgen® Patient Navigator

A single point of contact for answers about starting your Amgen therapy, navigating your treatment journey, and support to help as you start and stay on therapy as prescribed.



Financial Support

Every patient has unique needs. Amgen SupportPlus is here to provide financial support information and resources, regardless of your current financial situation or the type of insurance you have.*



Amgen SupportPlus

CALL 866-264-2778 Monday to Friday, 8:30 AM to 8:00 PM ET, or visit www.AmgenSupportPlus.com to learn how Amgen can help.

*The Amgen Patient Navigator is not part of a patient's treatment team and does not provide medical advice or case management services. The Amgen Patient Navigator does not administer Amgen medications. Patients should always consult their health care provider regarding medical decisions or treatment concerns.

Please see additional Important Safety Information, including **BOXED WARNINGS,** for BLINCYTO® on pages 20–21.

Your care team

Health care providers may be only one part of your support network. Your loved ones can be a huge help on your treatment journey.

Friends and family want to be there for you but may not know how. Let them know it's okay to ask questions and check in with you—and remember, you can ask for help, too. They are there for you.

In addition to personal caregivers, there are patient support groups that can provide invaluable support throughout the treatment process, such as **Blood Cancer United** at **bloodcancerunited.org**

You may also want to reach out to the **American Cancer Society** at **cancer.org**

Adolescents and young adults may want to check out **Stupid Cancer** at **stupidcancer.org**

Q for you:

You may want to ask your care team:

Can you recommend any local or online support groups?

These third-party resources are for your information only. The organizations listed have not endorsed Amgen or any of its respective products and services. Amgen does not endorse and is not responsible for the content included in these resources.

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WHAT IS BLINCYTO® (blinatumomab)?

BLINCYTO® is a prescription medicine used to treat adults and children 1 month and older with:

- B-cell precursor acute lymphoblastic leukemia (ALL) in remission when only a small number of cancer cells remain in the body (minimal residual disease)
- B-cell precursor ALL that has come back or did not respond to previous treatments
- Philadelphia chromosome-negative B-cell precursor ALL in the consolidation phase of chemotherapy treatment with multiple phases

ALL is a cancer of the blood in which a particular kind of white blood cell is growing out of control.

It is not known if BLINCYTO® is safe and effective in children less than 1 month of age.

IMPORTANT SAFETY INFORMATION

What is the most important information I should know about BLINCYTO®?

- **Call your health care provider or get emergency medical help right away if you get any of the symptoms listed below:**
  - **BLINCYTO® may cause serious side effects that can be severe, life-threatening, or lead to death, including:**
    - **Cytokine Release Syndrome (CRS) and infusion reactions.** Symptoms of CRS and infusion reactions may include: fever, tiredness or weakness, dizziness, headache, low blood pressure, nausea, vomiting, chills, face swelling, wheezing or trouble breathing, and skin rash.
    - **Neurologic problems.** Symptoms of neurologic problems may include: seizures, difficulty in speaking or slurred speech, loss of consciousness, trouble sleeping, confusion and disorientation, loss of balance, headache, difficulty with facial movements, hearing, vision, or swallowing, and tremors. People with Down Syndrome may have a higher risk of seizures with BLINCYTO® treatment and may be given anti-seizure medicine before starting BLINCYTO® treatment.
  - Your health care provider will check for these problems during treatment with BLINCYTO®. Your health care provider may temporarily or completely stop your treatment with BLINCYTO® if you have severe side effects.

Who should not receive BLINCYTO®?

- Do not receive BLINCYTO® if you are allergic to blinatumomab or to any of the ingredients of BLINCYTO®.

Before receiving BLINCYTO®, tell your health care provider about all of your medical conditions, including if you or your child:

- have a history of neurological problems, such as seizures, confusion, trouble speaking or loss of balance
- have Down Syndrome
- have an infection
- have ever had an infusion reaction after receiving BLINCYTO® or other medications
- have a history of radiation treatment to the brain, or chemotherapy treatment
- are scheduled to receive a vaccine. You should not receive a "live vaccine" within 2 weeks before you start treatment with BLINCYTO®, during treatment, and until your immune system recovers after you receive your last cycle of BLINCYTO®. If you are not sure about the type of vaccine, ask your health care provider.
- are pregnant or plan to become pregnant. BLINCYTO® may harm your unborn baby. Tell your health care provider if you become pregnant during treatment with BLINCYTO®.
  - If you are able to become pregnant, your health care provider should do a pregnancy test before you start treatment with BLINCYTO®.
  - Females who are able to become pregnant should use an effective form of birth control (contraception) during treatment with BLINCYTO®, and for 48 hours after your last dose of BLINCYTO®

- are breastfeeding or plan to breastfeed. It is not known if BLINCYTO® passes into your breast milk. You should not breastfeed during treatment with BLINCYTO® and for 48 hours after your last dose.

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

What should I avoid while receiving BLINCYTO®?

- Do not drive, operate heavy machinery, or do other dangerous activities while you are receiving BLINCYTO® because BLINCYTO® can cause neurological symptoms such as dizziness, seizures, and confusion.

BLINCYTO® may cause serious side effects, including:

- **Infections.** BLINCYTO® may cause life-threatening infections that may lead to death. Tell your health care provider right away in case you develop any signs or symptoms of an infection.
- **Tumor Lysis Syndrome (TLS).** TLS is caused by the fast breakdown of cancer cells. TLS can be life-threatening and may lead to death. Tell your healthcare provider right away if you have any symptoms of TLS during treatment with BLINCYTO®, including: nausea and vomiting, confusion, shortness of breath, irregular heartbeat, dark or cloudy urine, reduced amount of urine, unusual tiredness, muscle cramps.
- **Low white blood cell counts (neutropenia).** Neutropenia is common with BLINCYTO® treatment and may sometimes be life-threatening. Low white blood cell counts can increase your risk of infection. Your health care provider will do blood tests to check your white blood cell counts during treatment with BLINCYTO®. Tell your health care provider right away if you get a fever.
- **Abnormal liver blood test.** Your health care provider will do blood tests to check your liver before you start BLINCYTO® and during treatment with BLINCYTO®.
- **Inflammation of the pancreas (pancreatitis).** Pancreatitis may happen in patients treated with BLINCYTO® and corticosteroids. It may be severe and lead to death. Tell your health care provider right away if you have severe stomach-area pain that does not go away. The pain may happen with or without nausea and vomiting.
- Your health care provider will do blood tests during treatment to check for side effects.

The most common side effects

- The most common side effects of BLINCYTO® include:
  - Fever
  - Reactions related to infusion of the medicine such as face swelling, low blood pressure, and high blood pressure (infusion-related reactions)
  - Headache
  - Infection
  - Muscle, joint, and bone pain
  - Low white blood cell count (neutropenia)
  - Nausea
  - Low red blood cell count (anemia)
  - Low platelet count (thrombocytopenia)
  - Diarrhea

These are not all the possible side effects of BLINCYTO®.

Call your health care provider for medical advice about side effects. You may report side effects to FDA at 1-800-FDA-1088.

Please read the accompanying Medication Guide before you or your child receives BLINCYTO® and before each BLINCYTO® infusion and discuss it with your doctor.

Please see BLINCYTO® full Prescribing Information, including BOXED WARNINGS and Medication Guide.

BLINCYTO® (blinatumomab) for injection
35 mcg single-dose vial



Not an actual patient.

Learn more on BLINCYTO.com

References: 1. BLINCYTO® (blinatumomab) prescribing information, Amgen. **2.** National Cancer Institute. NCI Dictionary of Cancer Terms. https://www.cancer.gov/publications/dictionaries/cancer-terms. Accessed April 4, 2026. **3.** Children's Hospital of Philadelphia. Acute Lymphoblastic Leukemia (ALL). https://www.chop.edu/conditions-diseases/acute-lymphoblastic-leukemia-all. Accessed April 4, 2026. **4.** Brüggemann M, Gökbuget N, Kneba M. Acute lymphoblastic leukemia: monitoring minimal residual disease as a therapeutic principle. *Semin Oncol*. 2012;39:47-57. **5.** Litzow MR, Sun Z, Mattison RJ, et al. Blinatumomab for MRD-negative acute lymphoblastic leukemia in adults. *N Engl J Med*. 2024;391:320-333. **6.** Gupta S, Rau RE, Kairalla JA, et al. Blinatumomab in standard-risk B-cell acute lymphoblastic leukemia in children. *N Engl J Med*. 2025;392:875-891. **7.** Nagorsen D, Baeuerle PA. Immunomodulatory therapy of cancer with T cell-engaging BiTE antibody blinatumomab. *Exp Cell Res*. 2011;317:1255-1260. **8.** BLINCYTO® (blinatumomab) medication guide, Amgen. **9.** Data on file, Amgen; 2021. **10.** Dombret H, Topp MS, Schuh A, et al. Blinatumomab versus chemotherapy in first salvage or in later salvage for B-cell precursor acute lymphoblastic leukemia. *Leuk Lymphoma*. 2019;60:2214-2222. **11.** National Cancer Institute. Common Terminology Criteria for Adverse Events (CTCAE) Version 4.0. https://ctep.cancer.gov/protocolDevelopment/electronic_applications/docs/CTCAE_v4_Quick_Reference_8.5x11.pdf. Accessed April 4, 2026. **12.** Shimabukuro-Vornhagen A, Gödel P, Subklewe M, et al. Cytokine release syndrome. *J ImmunoTher Cancer*. 2018;6:56. **13.** Lee DW, Santomasso BD, Locke FL, et al. ASTCT consensus grading for cytokine release syndrome and neurologic toxicity associated with immune effector cells. *Bio Blood Marrow Transport*. 2019;25:625-638.

Please see BLINCYTO® full Prescribing Information, including BOXED WARNINGS and Medication Guide.

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BLINCYTO® (blinatumomab) for injection
35 mcg single-dose vial