



Actor portrayal.

**EVERY MOVE
MATTERS IN MCL**

MAKE YOUR NEXT MOVE WITH BEQALZI™

BEQALZI is approved for previously treated MCL after at least 2 prior treatments, and is the FIRST and ONLY APPROVED BCL-2 INHIBITOR in MCL. It is an oral, targeted therapy to help keep your cancer in check.

BCL=B-cell lymphoma; MCL=mantle cell lymphoma.

What is BEQALZI?

BEQALZI™ (sonrotoclax) is a prescription medicine used to treat adults with mantle cell lymphoma (MCL) that has come back or did not respond to previous treatment, and who have already received 2 treatments for their cancer, including a Bruton's tyrosine kinase (BTK) inhibitor. BEQALZI was approved based on patient response data. Studies are ongoing to confirm the clinical benefit of BEQALZI. It is not known if BEQALZI is safe and effective in children.

IMPORTANT SAFETY INFORMATION

BEQALZI can cause serious side effects, including:

- **Tumor Lysis Syndrome (TLS)**

- TLS has occurred in patients treated with BEQALZI. TLS is caused by the fast breakdown of cancer cells, which can cause kidney failure, the need for dialysis treatment, and can be life-threatening. TLS can happen when you first start treatment, with dose increases, or if treatment is restarted.

Please see additional Important Safety Information throughout and Medication Guide.

WHEN MCL PROGRESSES, PUT BEQALZI IN PLAY

What is BEQALZI?

BEQALZI is a medicine called a **BCL-2 inhibitor**. It is used to treat adults with MCL that has come back or did not respond to at least 2 previous treatments, including a Bruton's tyrosine kinase inhibitor (BTKi).

How does BEQALZI work?

In MCL, cancer cells can make too much of a protein called BCL-2. When this happens, the cancer cells survive and grow. As a BCL-2 inhibitor, BEQALZI:



Binds to BCL-2 protein



Results in cancer cells self-destructing (a natural process called apoptosis)



Is not chemotherapy

IMPORTANT SAFETY INFORMATION (cont'd)

BEQALZI can cause serious side effects, including: (cont'd)

• Tumor Lysis Syndrome (TLS) (cont'd)

- Before starting BEQALZI, your healthcare provider will assess your risk for TLS. You will receive other medicines and be advised to drink plenty of fluids during your treatment course. Some patients may need hospitalization for IV fluids and closer monitoring. Blood tests will be done before and during treatment. Keep all scheduled appointments.

Please see additional Important Safety Information throughout and Medication Guide.

PATIENTS ON BEQALZI SAW MEANINGFUL RESPONSES

52%

of people (54 out of 103)
in a clinical trial **responded**
to treatment

More than half
began to respond
within **2 months of**
starting treatment

63%

(34 out of 54) **of those people**
who responded to treatment
were still responding to
treatment **at 9 months**

Results are based on a study that consisted of 103 adult patients who were previously treated with anti-CD20-based therapy and at least 1 BTKi. ORR, the percentage of how many patients responded, was the main purpose of the study. The DOR, how long the response lasted, was the secondary purpose of the study.

BTKi=Bruton's tyrosine kinase inhibitor; DOR=duration of response; ORR=overall response rate.



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**ASK YOUR
HEALTHCARE
PROVIDER**

what these
results may
mean for you.

 **BEQALZI™**
(sonrotoclax) tablets

STARTING BEQALZI

Before treatment, inform your healthcare provider of all medical conditions and all current or planned medications, including prescription and over-the-counter drugs, vitamins, minerals, and herbal or alternative supplements, as they may interact with or reduce the effectiveness of therapy. Tell your healthcare provider if you are pregnant, plan on becoming pregnant, or are breastfeeding.

How do I take BEQALZI?



Take tablets with a **GLASS OF WATER DURING A MEAL**, once a day, at about the same time each day.



SWALLOW TABLETS WHOLE

Do not break, chew, or crush.



STAY WELL HYDRATED

Drink 6 to 8 glasses (~51–68 oz) of water daily, starting 1 to 2 days before your first dose, on the day of your first dose, during dose increases, and if treatment is restarted.

Ensure adequate hydration throughout treatment.

Some patients may need hospitalization for intravenous (IV) fluids and closer monitoring.



KEEP TABLETS IN THE ORIGINAL STARTER PACKAGING

for the first 4 weeks of treatment.

Please see additional **Important Safety Information** throughout and **Medication Guide**.



BEQALZI dosing schedule

The dosage for BEQALZI starts low and gradually increases over the first 4 weeks to help your body acclimate to the medication. This ramp-up period helps reduce the risk of tumor lysis syndrome (TLS), which is a serious side effect caused by the fast breakdown of cancer cells.

4-week ramp-up

- During the ramp-up, you will take a single tablet on Day 1 to Day 3 of each week, increasing to 2 tablets on Day 4 to Day 7 of each week
- Your dose will gradually increase from 1 mg to 160 mg during these 4 weeks
- Use the dosing calendar on the next page to track your progress

Ongoing treatment

- After the 4-week ramp-up, the ongoing daily dose, 320 mg (four 80 mg tablets), begins on Day 1 of Week 5
- You will stay on this dose as long as it is helpful for you. Your healthcare provider will work with you to monitor your progress and help manage any side effects you may have

When taking BEQALZI



If a dose is missed **WITHIN 8 HOURS**, take dose with a meal as soon as possible and resume normal schedule.

If it has been **MORE THAN 8 HOURS**, do not take dose; resume normal schedule the following day.



DO NOT change your dose of BEQALZI or stop taking BEQALZI unless your healthcare provider tells you to.



If you vomit after taking BEQALZI, **DO NOT TAKE AN EXTRA DOSE**. Take the next dose at your usual time the next day.



DO NOT restart BEQALZI on your own if your healthcare provider has stopped treatment.



If you have questions regarding a missed dose, **SPEAK WITH YOUR HEALTHCARE PROVIDER**

DOSING SCHEDULE FOR 4-WEEK RAMP-UP PHASE



Use this line to list the days of the week based on when the ramp-up schedule begins.

Day of the week							
WEEK 1 	DAY 1 	DAY 2 	DAY 3 	DAY 4 	DAY 5 	DAY 6 	DAY 7 
	Take one 1 mg tablet	Take one 1 mg tablet	Take one 1 mg tablet	Take two 1 mg tablets together 	Take two 1 mg tablets together 	Take two 1 mg tablets together 	Take two 1 mg tablets together 
WEEK 2 	DAY 1 	DAY 2 	DAY 3 	DAY 4 	DAY 5 	DAY 6 	DAY 7 
	Take one 5 mg tablet 	Take one 5 mg tablet 	Take one 5 mg tablet 	Take two 5 mg tablets together 	Take two 5 mg tablets together 	Take two 5 mg tablets together 	Take two 5 mg tablets together 
WEEK 3 	DAY 1 	DAY 2 	DAY 3 	DAY 4 	DAY 5 	DAY 6 	DAY 7 
	Take one 20 mg tablet 	Take one 20 mg tablet 	Take one 20 mg tablet 	Take two 20 mg tablets together 	Take two 20 mg tablets together 	Take two 20 mg tablets together 	Take two 20 mg tablets together 
WEEK 4 	DAY 1 	DAY 2 	DAY 3 	DAY 4 	DAY 5 	DAY 6 	DAY 7 
	Take one 80 mg tablet 	Take one 80 mg tablet 	Take one 80 mg tablet 	Take two 80 mg tablets together 	Take two 80 mg tablets together 	Take two 80 mg tablets together 	Take two 80 mg tablets together 

After the ramp-up, starting at Week 5, tablets will come as a 30-day supply in a pill bottle for your ongoing treatment.



 = Continue daily hydration  = Pay extra attention to hydration on these days



IT IS IMPORTANT TO STAY HYDRATED.

Drink 6 to 8 glasses (~51-68 oz) of water daily, starting 1 to 2 days before you begin BEQALZI, on the day of your first dose, during dose increases, and if treatment is restarted.
Stay well hydrated throughout treatment, especially on dose increase days.

Please see additional Important Safety Information throughout and Medication Guide.

SIDE EFFECTS YOU MIGHT ENCOUNTER WITH BEQALZI

Serious side effects

BEQALZI can cause serious side effects, including tumor lysis syndrome (TLS), serious infections, and decreased white blood cell count (neutropenia).

In a clinical trial, the majority (106 out of 115) of patients stayed on treatment, with 6% discontinuing treatment because of side effects.

Dose interruptions occurred in 27% (31 out of 115) of patients and dose reductions occurred in 0.9% (1 out of 115) of patients.

The most common side effects of BEQALZI include

- Pneumonia
- Tiredness

The most common abnormal blood tests with BEQALZI are

- Decreased white blood cell counts

These are not all of the side effects of BEQALZI.

Your care team will monitor your blood counts, check for signs of infection, and help manage any side effects that you experience. Tell your healthcare provider right away if you experience any side effects.

Please see additional Important Safety Information throughout and Medication Guide.

HELP REDUCE THE RISK OF TLS

The gradual **4-week ramp-up** may help reduce the risk of TLS, which is a serious side effect caused by the fast breakdown of cancer cells which can cause kidney failure, the need for dialysis treatment, and can be life-threatening. Because of this, it is important to follow the ramp-up dosing instructions carefully.

Ramp-up reminders



Drink about 6 to 8 glasses (~51-68 oz) of water daily, starting 1 to 2 days before your first dose, on the day of your first dose, during dose increases, and if treatment is restarted. Ensure adequate hydration throughout the treatment period. Some patients may need hospitalization for intravenous (IV) fluids and closer monitoring.



Your healthcare provider will prescribe medications before the first dose of BEQALZI to reduce the risk of TLS. Your healthcare provider may suggest additional medications based on your TLS lab results.

Monitoring during treatment

- Your healthcare provider will check your blood before your first dose, at least 4 hours after taking it, and with each dose increase
- Some patients, including those with high TLS risk, may need hospitalization for IV fluids and closer monitoring



Your healthcare team will give you instructions so you have a better idea of what to expect

Actor portrayal.



MAKE SURE TO ASK YOUR HEALTHCARE PROVIDER

what side effects you should watch for and what you can do to manage them.

 **BEQALZI**
(sonrotoclax) tablets

We want you to focus on your treatment. To help meet your needs, myBeOne Support pairs you with a dedicated Oncology Nurse Advocate who can personalize support for you.



A myBeOne Support Oncology Nurse Advocate can help eligible patients with:



Simplifying access

- Assessment of insurance coverage
- Bridge supply during insurance coverage delays*
- Co-pay support for commercially insured patients*
- Free medication for uninsured and underinsured patients*



Education about BEQALZI

Along with your healthcare team, your Oncology Nurse Advocate can help answer questions you may have about treatment with BEQALZI.



Day-to-day living support

Living with cancer takes support. Your Oncology Nurse Advocate is well trained and dedicated to identifying independent organizations† that can help address your needs.

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For any questions or to help you get started, simply call **1-833-234-4363, M-F, 8 AM to 8 PM ET**, to speak with an Oncology Nurse Advocate. Or visit **myBeOneSupport.com**.

*Terms and conditions apply. Up to \$25,000 per calendar year.
†Independent third-party organizations have their own rules for eligibility. BeOne Medicines has no involvement in their decision-making or eligibility criteria. This information is non-exhaustive and not meant as an endorsement from BeOne Medicines.
myBeOneSupport® is not insurance and does not guarantee product coverage or reimbursement.

NOTES

Use the section below to track any symptoms or side effects you may experience:

Use the section below to write down any questions you might have for your healthcare provider:

IMPORTANT SAFETY INFORMATION

BEQALZI can cause serious side effects, including:

• Tumor Lysis Syndrome (TLS)

- TLS has occurred in patients treated with BEQALZI. TLS is caused by the fast breakdown of cancer cells, which can cause kidney failure, the need for dialysis treatment, and can be life-threatening. TLS can happen when you first start treatment, with dose increases, or if treatment is restarted.
- Before starting BEQALZI, your healthcare provider will assess your risk for TLS. You will receive other medicines and be advised to drink plenty of fluids during your treatment course. Some patients may need hospitalization for IV fluids and closer monitoring. Blood tests will be done before and during treatment. Keep all scheduled appointments.
- Tell your healthcare provider right away if you develop symptoms such as nausea; vomiting; diarrhea; muscle cramps, weakness, or twitches; fatigue; decreased urination; swelling in your legs, ankles, or feet; numbness or tingling, especially around your mouth or in your hands and feet; confusion or difficulty staying alert; irregular or fast heart rate; or seizures.
- Drink 6 to 8 glasses (about 1.5 to 2 liters or 51-68 ounces) of water each day starting 1 to 2 days before your first dose, on the day of your first dose, during dose increases, and if treatment is restarted.

• **Serious infections.** BEQALZI can cause death or serious infections. Your healthcare provider will monitor you for signs and symptoms of infection and treat you as needed. Tell your healthcare provider right away if you develop a fever or any signs of an infection.

• **Decreased white blood cell count (neutropenia)**, which can be serious or severe and increase the risk of infection. Your healthcare provider will check your blood counts during treatment and may decrease your dose, temporarily stop, or completely stop treatment if you get certain side effects.

Do not take BEQALZI with certain medicines called strong CYP3A inhibitors when starting treatment and while your dose is being increased because this may increase the risk of TLS. Other medicines, including moderate CYP3A inhibitors, may require dose changes. Tell your healthcare provider about all the medicines you take, and do not start new medicines during treatment without talking to your healthcare provider. Avoid grapefruit products, Seville oranges (often used in marmalades), and star fruit. These can increase the amount of BEQALZI in your blood.

Before taking BEQALZI, tell your healthcare provider about all of your medical conditions, including if you have kidney problems, problems with body salts or electrolytes (such as potassium, phosphorus, or calcium), or a history of high uric acid or gout. Also tell your healthcare provider if you are pregnant, plan to become pregnant, or are breastfeeding or plan to breastfeed. BEQALZI may affect male and female fertility. If you receive BEQALZI while pregnant, it may harm your unborn baby. **If you are a female who can become pregnant**, your healthcare provider should do a pregnancy test before you start treatment and you should use effective birth control (contraception) during treatment and for 1 week after the last dose. Tell your healthcare provider if you become pregnant or think that you may be pregnant during treatment and for 1 week after your last dose. Do not breastfeed during treatment and for 1 week after the last dose. **If you are a male with a female partner who can become pregnant**, use effective birth control (contraception) during treatment and for 1 week after the last dose.

The most common side effects of BEQALZI include pneumonia and tiredness. **The most common abnormal blood tests with BEQALZI are** decreased white blood cell counts.

If you have side effects, your healthcare provider may tell you to stop taking BEQALZI for a period of time. Do not restart BEQALZI on your own. Call your healthcare provider before you start taking BEQALZI again.

These are not all the possible side effects of BEQALZI. Call your healthcare provider for medical advice about side effects. You may report side effects to BeOne Medicines at 1-877-828-5596 or FDA at 1-800-FDA-1088 or www.fda.gov/medwatch.



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MAKE BEQALZI YOUR NEXT MOVE IN MCL TREATMENT



BEQALZI is approved for previously treated MCL after at least 2 prior treatments, and is the **FIRST and ONLY** BCL-2 inhibitor for MCL.



Is an **ORAL, TARGETED** therapy



Patients on **BEQALZI** saw **MEANINGFUL RESPONSES**

- **52%** (54 out of 103) **of people responded to treatment**
- **63%** (34 out of 54) **of those people who responded** to treatment were still responding to treatment at 9 months

Results are based on a study that consisted of 103 adult patients who were previously treated with anti-CD20-based therapy and at least 1 BTKi. ORR, the percentage of how many patients responded, was the main purpose of the study. DOR, how long the response lasted, was the secondary purpose of the study.

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BTKi=Bruton's tyrosine kinase inhibitor; DOR=duration of response; ORR=overall response rate.

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