



LONG LIVE
NOW

**GETTING
STARTED WITH
KISQALI**

Please see Important Safety Information throughout, and the Summary of Important Information on pages 34-37.



WELCOME TO KISQALI

Learning you have metastatic breast cancer (mBC) is life-changing. Questions about the future can fill your days, but questions about treatment don't have to take up so much of that precious time.

Throughout this booklet, you'll learn more about KISQALI, a treatment that has helped over 27,000 people with mBC.

So you can get back to living bravely, boldly, and breaking through barriers we didn't think possible.

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INDICATIONS

KISQALI is a prescription medicine used to treat adults with hormone receptor (HR)-positive, human epidermal growth factor receptor 2 (HER2)-negative breast cancer that has gotten worse or has spread to other parts of the body (metastatic), in combination with:

- an aromatase inhibitor as the first endocrine-based therapy; or
- fulvestrant as the first endocrine-based therapy or following disease progression on endocrine therapy in postmenopausal women or in men.

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

Please see Important Safety Information throughout, and the Summary of Important Information on pages 34-37.

IMPORTANT SAFETY INFORMATION

What is the most important information I should know about KISQALI?

KISQALI may cause serious side effects, including:

Lung problems. KISQALI may cause severe or life-threatening inflammation of the lungs during treatment that may lead to death. Tell your health care provider right away if you have any new or worsening symptoms, including:

- trouble breathing or shortness of breath
- cough with or without mucus
- chest pain





**ABOUT
METASTATIC
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CANCER**

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STAGES AND SUBTYPES

The stages of breast cancer range from 0-4

Stage 4 is when breast cancer has spread beyond the breast and nearby lymph nodes to other parts of the body. This is also called metastatic or advanced breast cancer.

BREAST CANCER MOST COMMONLY SPREADS TO:



Liver



Bones



Lungs

IMPORTANT SAFETY INFORMATION (continued)

KISQALI may cause serious side effects, including: (continued)

Severe skin reactions. Tell your health care provider or get medical help right away if you get severe rash or rash that keeps getting worse; reddened skin; flu-like symptoms; skin pain/burning; blistering of the lips, eyes, or mouth; or blisters on the skin or skin peeling, with or without fever.

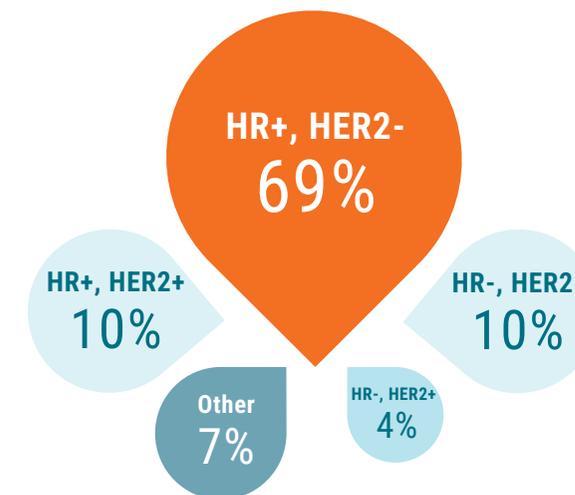


KISQALI is approved to treat HR+, HER2- mBC, the most common subtype of mBC

Hormone receptors (HR) and human epidermal growth factor receptor 2 (HER2) are proteins that can help mBC grow.

A plus sign (+) following the protein means that the proteins were found in your cancer cells, and a minus sign (-) means there was either a small amount of the protein or none at all.

HR+, HER2- mBC is fueled by the hormone estrogen



IMPORTANT SAFETY INFORMATION (continued)

KISQALI may cause serious side effects, including: (continued)

Heart rhythm problems (QT prolongation). KISQALI can cause a heart problem known as QT prolongation. This condition can cause an abnormal heartbeat and may lead to death. Your health care provider should check your heart and do blood tests before and during treatment with KISQALI. Tell your health care provider right away if you have a change in your heartbeat (a fast or irregular heartbeat), or if you feel dizzy or faint.

Please see Important Safety Information throughout, and the Summary of Important Information on pages 34-37.

THE ROLE OF MENOPAUSAL STATUS

The type of hormone therapy that you take with KISQALI is in part determined by your menopausal status

Premenopausal

means that you are still producing estrogen from your ovaries, in addition to estrogen that is created in other tissues throughout the body



Postmenopausal

means that you are no longer producing estrogen from your ovaries

Postmenopausal women are given an AI or fulvestrant along with KISQALI



IMPORTANT SAFETY INFORMATION (continued)

KISQALI may cause serious side effects, including: (continued)

Liver problems (hepatobiliary toxicity). KISQALI can cause serious liver problems. Your health care provider should do blood tests to check your liver before and during treatment with KISQALI.

IMPORTANT SAFETY INFORMATION (continued)

KISQALI may cause serious side effects, including: (continued)

Liver problems (hepatobiliary toxicity). Tell your health care provider right away if you get any of the following signs and symptoms of liver problems:

- yellowing of your skin or the whites of your eyes (jaundice)
- dark or brown (tea-colored) urine
- feeling very tired
- loss of appetite
- pain on the right side of your stomach area (abdomen)
- bleeding or bruising more easily than normal

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UNDERSTANDING OVERALL SURVIVAL

There is a difference between progression-free survival and overall survival:



PROGRESSION-FREE SURVIVAL (PFS)

The amount of time cancer doesn't grow or spread while on treatment. It's about putting cancer growth **on pause**.

OTHER WAYS TO DESCRIBE PFS

- Amount of time disease progression is delayed
- Living longer without your cancer getting worse
- More time without disease progression



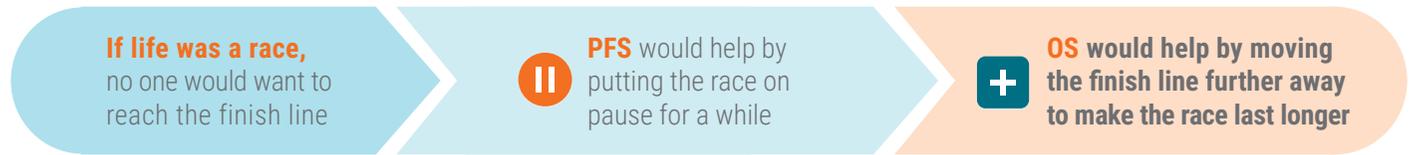
OVERALL SURVIVAL (OS)

The total time living with metastatic breast cancer. It's about adding **more days** to a person's life.

OTHER WAYS TO DESCRIBE OS

- Living longer
- More time to live
- A chance to live longer

Overall survival is the **gold standard** in cancer clinical trials. Not all treatments have proven overall survival. KISQALI has—multiple times



KISQALI with hormone therapy is proven to **extend life**

Scan here to watch a video about OS vs PFS and learn more



IMPORTANT SAFETY INFORMATION (continued)

KISQALI may cause serious side effects, including: (continued)

Low white blood cell counts (neutropenia). Low white blood cell counts are very common during treatment with KISQALI and may result in infections that may be severe. Your health care provider should check your white blood cell counts before and during treatment with KISQALI. Tell your health care provider right away if you have signs and symptoms of low white blood cell counts or infections such as fever and chills.

IMPORTANT SAFETY INFORMATION (continued)

KISQALI may cause serious side effects, including: (continued)

Low white blood cell counts (neutropenia). Your health care provider may tell you to decrease your dose, temporarily stop, or completely stop taking KISQALI if you develop certain serious side effects during treatment with KISQALI.

Please see Important Safety Information throughout, and the Summary of Important Information on pages 34-37.

LONG LIVE YOU

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KISQALI + AN AI HAS BEEN PROVEN TO HELP POSTMENOPAUSAL WOMEN LIVE A LONGER LIFE

In a clinical trial of 668 women, 334 were treated with KISQALI + an AI and 334 women were treated with an AI alone. The main result of the study, or primary end point, was PFS. OS was another result of the study, or secondary end point.

- Proven to help postmenopausal women live longer
- Significantly more effective at delaying disease progression than placebo + an AI

IMPORTANT SAFETY INFORMATION (continued)

What should I tell my health care provider before taking KISQALI?

- have any heart problems, including heart failure, irregular heartbeats, and QT prolongation
- have ever had a heart attack
- have a slow heartbeat (bradycardia)
- have problems with the amount of potassium, calcium, phosphorus, or magnesium in your blood
- have fever, chills, or any other signs or symptoms of infection
- have liver problems
- have any other medical conditions



Live longer without disease progression

In this clinical trial, KISQALI + an AI extended the length of time women were alive from the start of treatment—also called OS.

Median Overall Survival at an 80-Month Check-In

5+ YEARS



More than a 1-YEAR INCREASE in OS

At an 80-month check-in, results showed the median OS was 63.9 months for KISQALI + an AI vs 51.4 months for placebo + an AI.

Median OS is the length of time when half of the women were still alive.

Median Progression-Free Survival at a 26-Month Check-In

2+ YEARS



At a 26-month check-in, half the women taking KISQALI + an AI still showed no disease progression at 25.3 months vs 16 months for women taking placebo + an AI.

Median PFS is the length of time when half of the women had not yet progressed.

5+ years overall survival with KISQALI

Please see Important Safety Information throughout, and the Summary of Important Information on pages 34-37.

KISQALI + AN AI + GOSERELIN HAS BEEN PROVEN TO HELP PREMENOPAUSAL WOMEN LIVE A LONGER LIFE

In a clinical trial of 672 women who were premenopausal or perimenopausal when the study started, the median age was 44 years (ranging 25 to 58). In a subgroup analysis of this trial, 248 women were treated with KISQALI + an AI (letrozole or anastrozole) + goserelin, and 247 women were treated with an AI + goserelin. The main result of the study, or primary end point, was PFS. OS was another result of the study, or secondary end point.

- Proven to help premenopausal women live longer
- Significantly more effective at delaying disease progression than placebo + an AI + goserelin

IMPORTANT SAFETY INFORMATION (continued)

What should I tell my health care provider before taking KISQALI? (continued)

Before you take KISQALI, tell your health care provider if you:

- are pregnant, or plan to become pregnant. KISQALI can harm your unborn baby
- If you are able to become pregnant, your health care provider should do a pregnancy test before you start treatment with KISQALI.
- Females who are able to become pregnant and who take KISQALI should use effective birth control during treatment and for at least 3 weeks after the last dose of KISQALI.



Proven to help premenopausal women live longer without disease progression

In this clinical trial, KISQALI + an AI + goserelin extended the length of time that premenopausal women were alive from the start of treatment—also called OS.

Median Overall Survival at a 54-Month Check-In

4+ YEARS



About 1-YEAR INCREASE in OS

At a 54-month check-in, the median OS was 58.7 months for KISQALI + an AI + goserelin. Median OS was 47.7 months for placebo + an AI + goserelin. This 54-month analysis was not preplanned to detect a false positive or show a difference between treatments.

Median OS is the length of time when half of the women were still alive.

KISQALI is proven to help premenopausal women live longer

Median Progression-Free Survival at a 19-Month Check-In

2+ YEARS



In the same clinical trial at a 19-month check-in, half the women taking KISQALI + an AI + goserelin still showed no disease progression after 27.5 months vs 13.8 months for women taking placebo + an AI + goserelin.

Median PFS is the length of time when half of the women had not yet progressed.

KISQALI is not approved for use with tamoxifen. KISQALI may cause increased risk of heart rhythm problems (QT prolongation) when combined with tamoxifen.

Please see Important Safety Information throughout, and the Summary of Important Information on pages 34-37.

KISQALI + FULVESTRANT HAS BEEN PROVEN TO HELP POSTMENOPAUSAL WOMEN LIVE A LONGER LIFE

In a clinical trial of 726 women, 484 were treated with KISQALI + fulvestrant and 242 women were treated with fulvestrant alone. The main result of the study, or primary end point, was PFS. OS was another result of the study, or secondary end point.

- Proven to help postmenopausal women live longer
- Significantly more effective at delaying disease progression than placebo + fulvestrant

IMPORTANT SAFETY INFORMATION (continued)

What should I tell my health care provider before taking KISQALI? (continued)

Before you take KISQALI, tell your health care provider if you:

- are pregnant, or plan to become pregnant. KISQALI can harm your unborn baby
 - Talk to your health care provider about birth control methods that may be right for you during this time.
 - If you become pregnant or think you are pregnant, tell your health care provider right away.
- are breastfeeding or plan to breastfeed. It is not known if KISQALI passes into your breast milk. Do not breastfeed during treatment with KISQALI and for at least 3 weeks after the last dose of KISQALI



Proven to help women live a longer life

In this clinical trial, KISQALI + fulvestrant extended the length of time women were alive from the start of treatment—also called OS.

Median Overall Survival at a 56-Month Check-In

4+ YEARS



About a 1-YEAR INCREASE in OS

At a 56-month check-in, results showed the median OS was 53.7 months for KISQALI + fulvestrant vs 41.5 months for placebo + fulvestrant. This 56-month analysis was not preplanned to detect a false positive or show a difference between treatments.

Median OS is the length of time when half of the women were still alive.

4+ years overall survival with KISQALI

Median Progression-Free Survival at a 20-Month Check-In

NEARLY 2 YEARS



At the 20-month check-in, half the women taking KISQALI + fulvestrant still showed no disease progression after 20.5 months vs 12.8 months for women taking placebo + fulvestrant.

Median PFS is the length of time when half of the women had not yet progressed.

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HOW TO TAKE KISQALI

KISQALI is a convenient once-daily oral tablet

KISQALI is taken orally on a 4-week dosing cycle in combination with either an oral aromatase inhibitor (AI) (eg, letrozole or anastrozole) or fulvestrant, an injection administered by your health care provider.



For the first 3 weeks in a cycle, you'll take your 3 KISQALI pills once daily. On the fourth week, you won't take any KISQALI pills. If you're taking an oral AI, on the fourth week, you'll take only that. If you're receiving fulvestrant, talk to your doctor about your injection schedule.

IMPORTANT SAFETY INFORMATION (continued)

What should I tell my health care provider before taking KISQALI? (continued)

Tell your health care provider about all the medicines you take, including prescription and over-the-counter medicines, vitamins, and herbal supplements. KISQALI and other medicines may affect each other, causing side effects. Know the medicines you take. Keep a list of them to show your health care provider or pharmacist when you get a new medicine.



Recommended dosing for KISQALI + hormone therapy

	WEEK 1	WEEK 2	WEEK 3	WEEK 4
KISQALI 600 mg (three 200-mg tablets) once daily for 3 weeks, followed by 1 week without taking KISQALI	✓	✓	✓	✗

✓ Treatment is taken once daily during that week of the cycle.

✗ Treatment is not taken during that week of the cycle.

	WEEK 1	WEEK 2	WEEK 3	WEEK 4
AI when taken with KISQALI Follow your doctor's recommended dosing schedule	✓	✓	✓	✓

	FIRST MONTH (3 doses)			FOLLOWING MONTHS
Fulvestrant when taken with KISQALI 500-mg dose on days 1, 15, and 29 during the first month of treatment, and 500-mg dose once monthly thereafter	✓ DAY 1	✓ DAY 15	✓ DAY 29	✓ 1X MONTHLY

KISQALI gives you and your doctor the flexibility to reduce your dose to help manage side effects

Please see Important Safety Information throughout, and the Summary of Important Information on pages 34-37.



Q&A FOR TAKING KISQALI

Have more questions?
Use the QR code to get a copy
of our doctor discussion guide.



When should I take KISQALI? Take it each day at about the same time, preferably in the morning, with or without food.

How much KISQALI should I take? Take the recommended dose of KISQALI prescribed by your doctor. Do not take more than prescribed.

Can I break up the tablets? Swallow KISQALI tablets whole. Do not chew, crush, or split KISQALI tablets.

What should I do if a tablet looks damaged? Do not take any KISQALI tablets that are broken, cracked, or that look damaged.

What if I miss a dose or vomit after taking KISQALI? If you miss a dose of KISQALI or vomit after taking a dose of KISQALI, do not take another dose on that day. Take your next dose at your regular time.

What should I do if I take too much KISQALI? Call your doctor right away or go to the nearest hospital emergency room.

What should I avoid while taking KISQALI? Avoid grapefruit and grapefruit juice.

IMPORTANT SAFETY INFORMATION (continued)

What should I avoid while taking KISQALI?

Avoid eating grapefruit and avoid drinking grapefruit juice during treatment with KISQALI since these may increase the amount of KISQALI in your blood.

The most common side effects of KISQALI include:

- decreased white blood cell counts
- decreased red blood cell counts
- abnormal liver function tests
- infections
- nausea
- increased kidney function test
- tiredness
- decreased platelet counts
- diarrhea
- vomiting
- headache
- constipation
- hair loss
- cough
- rash
- back pain
- low blood sugar level

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NAVIGATING SIDE EFFECTS

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SIDE EFFECTS

It's only natural to have concerns about side effects when starting a new treatment. Your health care provider may tell you to decrease your dose, temporarily stop, or completely stop taking KISQALI if you develop certain serious side effects during treatment with KISQALI. Contact your doctor if you experience any of the following side effects.

Serious side effects

LUNG PROBLEMS

KISQALI may cause severe or life-threatening inflammation of the lungs during treatment that may lead to death. Tell your health care provider right away if you have any new or worsening symptoms, including:

- trouble breathing or shortness of breath
- cough with or without mucus
- chest pain

SEVERE SKIN REACTIONS

Tell your health care provider or get medical help right away if you get severe rash or rash that keeps getting worse; reddened skin; flu-like symptoms; skin pain/burning; blistering of the lips, eyes, or mouth; or blisters on the skin or skin peeling, with or without fever.

HEART RHYTHM PROBLEMS (QT prolongation)

KISQALI can cause a heart problem known as QT prolongation. This condition can cause an abnormal heartbeat and may lead to death. Your health care provider should check your heart and do blood tests before and during treatment with KISQALI. Tell your health care provider right away if you have a change in your heartbeat (a fast or irregular heartbeat), or if you feel dizzy or faint.

If you have any side effects, your doctor may direct you to stop taking KISQALI for a while, use a lower dose, or stop taking it permanently. Always follow your doctor's instructions.

LIVER PROBLEMS (hepatobiliary toxicity)

KISQALI can cause serious liver problems. Your health care provider should do blood tests to check your liver before and during treatment with KISQALI. Tell your health care provider right away if you get any of the following signs and symptoms of liver problems:

- yellowing of your skin or the whites of your eyes (jaundice)
- dark or brown (tea-colored) urine
- feeling very tired
- loss of appetite
- pain on the right side of your stomach area (abdomen)
- bleeding or bruising more easily than normal

LOW WHITE BLOOD CELL COUNTS (neutropenia)

Low white blood cell counts are very common during treatment with KISQALI and may result in infections that may be severe. Your health care provider should check your white blood cell counts before and during treatment with KISQALI. Tell your health care provider right away if you have signs and symptoms of low white blood cell counts or infections, such as fever and chills.

The most common side effects of KISQALI include:

- decreased white blood cell counts
- decreased red blood cell counts
- abnormal liver function tests
- infections
- nausea
- increased kidney function test
- tiredness
- decreased platelet counts
- diarrhea
- vomiting
- headache
- constipation
- hair loss
- cough
- rash
- back pain
- low blood sugar level

Monitoring requirements

As part of your treatment with KISQALI, you may be required to have some routine tests so your health care provider can monitor how your body reacts to the medication.

The majority of scheduled monitoring occurs within the first 2 cycles of therapy, and there is no scheduled monitoring beyond Cycle 6.

Tell your health care provider if you have any side effect that bothers you or that does not go away.

These are not all the possible side effects of KISQALI. For more information, ask your health care provider or pharmacist. Call your doctor for medical advice about side effects. 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.



**SUPPORT
WHEN YOU
NEED IT**

Please see Important Safety Information throughout, and the Summary of Important Information on pages 34-37.

NOVARTIS PATIENT SUPPORT™

GET PERSONALIZED SUPPORT

We understand that starting a new treatment can feel overwhelming, and that you may have a lot of questions. That's why the Novartis Patient Support team is here for you. Your free personalized program can help you and your caregivers throughout your KISQALI treatment journey. When you sign up, you'll have access to educational resources and a team of experts who can help support you.

Sign up for the Novartis Patient Support Program to receive:

- **A Patient Starter Kit** to help you have a smooth start to treatment with KISQALI
- **Email communications** tailored to your treatment journey
- **1-on-1 support** from a Patient Navigator who can guide you through various aspects of treatment

[Learn more at kisqali.com.](https://www.kisqali.com)

IMPORTANT SAFETY INFORMATION (continued)

The most common side effects of KISQALI include: (continued)

KISQALI may cause fertility problems if you are male and take KISQALI. This may affect your ability to father a child. Talk to your health care provider if this is a concern for you.

Tell your health care provider if you have any side effect that bothers you or that does not go away.

These are not all the possible side effects of KISQALI. For more information, ask your health care provider or pharmacist. Call your doctor for medical advice about side effects.



Patient Navigators are a dedicated team of specialists who support patients during their journey.* You will receive a series of phone calls from a specially trained navigator who will support and guide you through various aspects of starting KISQALI.

- Educate about KISQALI, dosing and administration, and side effects
- Educate about insurance coverage process and financial assistance information
- Provide information on lifestyle support while you're taking KISQALI
- Navigate to other Novartis patient access programs and resources

*The Patient Navigator Program is available for select Novartis Oncology products. Patient Navigator service does not involve the practice of nursing or provide clinical advice and counseling.

For more information on Novartis Patient Support programs, call 1-800-282-7630, prompt 3.

IMPORTANT SAFETY INFORMATION (continued)

The most common side effects of KISQALI include: (continued)

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 Important Safety Information throughout, and the Summary of Important Information on pages 34-37.

SUMMARY OF IMPORTANT INFORMATION

WHAT IS KISQALI?

KISQALI is a prescription medicine used to treat adults with hormone receptor (HR)-positive, human epidermal growth factor receptor 2 (HER2)-negative breast cancer that has gotten worse or has spread to other parts of the body (metastatic), in combination with:

- an aromatase inhibitor as the first endocrine-based therapy; or
- fulvestrant as the first endocrine-based therapy or following disease progression on endocrine therapy in postmenopausal women or in men.

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



WHAT IS THE MOST IMPORTANT INFORMATION I SHOULD KNOW ABOUT KISQALI?

KISQALI may cause serious side effects, including:

Lung problems. KISQALI may cause severe or life-threatening inflammation of the lungs during treatment that may lead to death. Tell your health care provider right away if you have any new or worsening symptoms, including:

- trouble breathing or shortness of breath
- cough with or without mucus
- chest pain

Severe skin reactions. Tell your health care provider or get medical help right away if you get severe rash or rash that keeps getting worse; reddened skin; flu-like symptoms; skin pain/burning; blistering of the lips, eyes, or mouth; or blisters on the skin or skin peeling, with or without fever.

Heart rhythm problems (QT prolongation). KISQALI can cause a heart problem known as QT prolongation. This condition can cause an abnormal heartbeat and may lead to death. Your health care provider should check your heart and do blood tests before and during treatment with KISQALI. Tell your health care provider right away if you have a change in your heartbeat (a fast or irregular heartbeat), or if you feel dizzy or faint.

Liver problems (hepatobiliary toxicity). KISQALI can cause serious liver problems. Your health care provider should do blood tests to check your liver before and during treatment with KISQALI. Tell your health care provider right away if you get any of the following signs and symptoms of liver problems:

- yellowing of your skin or the whites of your eyes (jaundice)
- dark or brown (tea-colored) urine
- feeling very tired
- loss of appetite
- pain on the right side of your stomach area (abdomen)
- bleeding or bruising more easily than normal

Low white blood cell counts (neutropenia). Low white blood cell counts are very common during treatment with KISQALI and may result in infections that may be severe. Your health care provider should check your white blood cell counts before and during treatment with KISQALI. Tell your health care provider right away if you have signs and symptoms of low white blood cell counts or infections such as fever and chills.

Your health care provider may tell you to decrease your dose, temporarily stop, or completely stop taking KISQALI if you develop certain serious side effects during treatment with KISQALI.



WHAT SHOULD I TELL MY HEALTH CARE PROVIDER BEFORE TAKING KISQALI?

Before you take KISQALI, tell your health care provider if you:

- have any heart problems, including heart failure, irregular heartbeats, and QT prolongation
- have ever had a heart attack
- have a slow heartbeat (bradycardia)
- have problems with the amount of potassium, calcium, phosphorus, or magnesium in your blood
- have fever, chills, or any other signs or symptoms of infection
- have liver problems
- have any other medical conditions
- are pregnant, or plan to become pregnant. KISQALI can harm your unborn baby
 - If you are able to become pregnant, your health care provider should do a pregnancy test before you start treatment with KISQALI.
 - Females who are able to become pregnant and who take KISQALI should use effective birth control during treatment and for at least 3 weeks after the last dose of KISQALI.

SUMMARY OF IMPORTANT INFORMATION (CONTINUED)

WHAT SHOULD I TELL MY HEALTH CARE PROVIDER BEFORE TAKING KISQALI? (continued)

- Talk to your health care provider about birth control methods that may be right for you during this time.
- If you become pregnant or think you are pregnant, tell your health care provider right away.
- are breastfeeding or plan to breastfeed. It is not known if KISQALI passes into your breast milk. Do not breastfeed during treatment with KISQALI and for at least 3 weeks after the last dose of KISQALI

WHAT OTHER MEDICATIONS MIGHT INTERACT WITH KISQALI?

Tell your health care provider about all of the medicines you take, including prescription and over-the-counter medicines, vitamins, and herbal supplements (especially St. John's wort). KISQALI and other medicines may affect each other, causing side effects. Know the medicines you take. Keep a list of them to show your health care provider or pharmacist when you get a new medicine.

WHAT SHOULD I AVOID WHILE TAKING KISQALI?

Avoid eating grapefruit and avoid drinking grapefruit juice during treatment with KISQALI since these may increase the amount of KISQALI in your blood.

WHAT LABORATORY TESTS DO I NEED IF I AM PRESCRIBED KISQALI?

Your doctor should check your heart rhythm, liver, and blood before you start KISQALI and periodically during your treatment with KISQALI. Your doctor may eventually stop checking some of these tests. If you are able to become pregnant, your health care provider should do a pregnancy test before you start treatment with KISQALI.

THE MOST COMMON SIDE EFFECTS OF KISQALI INCLUDE:

- decreased white blood cell counts
- decreased red blood cell counts
- abnormal liver function tests
- infections
- nausea
- tiredness
- decreased platelet counts
- diarrhea
- headache
- hair loss
- vomiting
- back pain
- constipation
- cough
- rash
- increased kidney function test
- stomach area (abdomen) pain

KISQALI may cause fertility problems if you are male and take KISQALI. This may affect your ability to father a child. Talk to your health care provider if this is a concern for you.

Tell your health care provider if you have any side effect that bothers you or that does not go away.

These are not all the possible side effects of KISQALI. For more information, ask your health care provider or pharmacist. Call your doctor for medical advice about side effects. 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 full Prescribing Information including Patient Information.

GENERAL INFORMATION ABOUT THE SAFE AND EFFECTIVE USE OF KISQALI

Medicines are sometimes prescribed for purposes other than those listed in a Patient Information leaflet. Do not use KISQALI for a condition for which it was not prescribed. Do not give it to other people, even if they have the same symptoms you have. It may harm them. You can ask your health care provider or pharmacist for more information about KISQALI.

For more information, go to www.KISQALI.com or call **1-844-KIS-QALI** (1-844-547-7254).

Hear what living longer means to actual KISQALI patients
by visiting www.KISQALI.com.



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