

For adults with extensive-stage small cell lung cancer (ES-SCLC) after the first course of therapy has successfully stopped it from getting worse,



OPEN THE CHANCE FOR MORE LIFE IN ES-SCLC WITH ZEPZELCA

Talking to your doctor about ZEPZELCA + atezolizumab

Use this guide to

- Review the basics of small cell lung cancer, explore how the condition is treated, and learn more about treatment with ZEPZELCA
- Prepare your questions, thoughts, and concerns for your next appointment
- Keep track of conversations with your healthcare team

During your appointment

- Take notes to help you remember what was discussed
 - Use the space in this guide to write down key points or new questions
- Bring a family member or friend for support
 - They can help ask questions and recall important details from the conversation

What is ZEPZELCA?

ZEPZELCA (lurbinectedin) for injection 4 mg may be used to treat adults with a kind of lung cancer called small cell lung cancer (SCLC):

- ZEPZELCA may be used in combination with atezolizumab or atezolizumab and hyaluronidase-tqjs as maintenance treatment when your lung cancer:
 - is a type called “extensive-stage,” which means it has spread or grown, **and**
 - has not progressed after first treatment with atezolizumab or atezolizumab and hyaluronidase-tqjs and the chemotherapy medicines carboplatin and etoposide.

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

IMPORTANT SAFETY INFORMATION

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

- have liver or kidney problems.
- are pregnant or plan to become pregnant. ZEPZELCA can harm your unborn baby.

See additional Important Safety Information inside.

Please see accompanying full [Prescribing Information](#), including [Patient Information](#), and discuss it with your doctor.



About SCLC /
Treating ES-SCLC

About ZEPZELCA +
atezolizumab

Taking ZEPZELCA +
atezolizumab /
Side effects and safety

Questions to ask
your doctor

Important Safety
Information

Support

What is small cell lung cancer (SCLC)?



About 1 in 3 people in the US will get cancer in their lifetime. SCLC is one type of cancer. It's relatively uncommon but can grow and spread quickly. If you or someone you know has been diagnosed, you are not alone. While it may feel overwhelming at times, learning about it can help.

Cancer happens when some cells in the body grow too fast and take over space from healthy cells. It can start anywhere in the body. When it starts in the lungs, it may be SCLC.

SCLC is a fast-growing cancer that appears under a microscope as small, oval-shaped cells that resemble oats.

SCLC is a serious condition. It tends to grow and spread quickly. It also tends to come back for most people (recurrence). However, there are safe and effective treatments available.

If you have been diagnosed with **extensive-stage SCLC (ES-SCLC)**, it means the cancer has spread to both lungs or beyond.

Please see accompanying full [Prescribing Information](#), including [Patient Information](#), and discuss it with your doctor.

Treating extensive-stage small cell lung cancer (ES-SCLC)

INITIAL TREATMENT

STEP 1: THE FIRST COURSE OF THERAPY

The first course of therapy for SCLC is usually chemotherapy, combined with immunotherapy.

CHEMOTHERAPY

Works by attacking cells that divide and spread rapidly, which makes it ideal for SCLC

IMMUNOTHERAPY

Works by stimulating or boosting your immune system to help target cancer cells

SCLC is usually first treated with chemotherapy combinations. The combinations used most often are: **carboplatin + etoposide** and **cisplatin + etoposide**.

SCLC often responds to the first course of therapy. However, many people with SCLC experience recurrence after a period of improvement.

STEP 2: MAINTENANCE THERAPY

If the first course of therapy has worked to help stop SCLC from getting worse, it's critical to keep treating it. That's where maintenance therapy fits in. It's given as the next step after the first course of therapy to help prevent cancer from coming back. Your doctor will decide if maintenance therapy is right for you.

WHY MAINTENANCE THERAPY IS IMPORTANT

Due to the serious, aggressive nature of SCLC, it's important to continue treating it aggressively. Continuing with maintenance therapy helps delay the time to progression or recurrence of your cancer.



After your first course of therapy has helped shrink tumors or slowed the progression of ES-SCLC, you may receive ZEPZELCA with atezolizumab as maintenance therapy. Atezolizumab is the same immunotherapy you've already been getting and are familiar with. Maintenance therapy can help keep ES-SCLC under control.

ZEPZELCA + atezolizumab is the first and only maintenance therapy proven to help people with ES-SCLC live longer, making it an important next step in your care plan.

Clinical results with ZEPZELCA + atezolizumab



In a clinical study, people were treated with ZEPZELCA + atezolizumab or with atezolizumab as maintenance therapy

This study included an initial phase, in which people received 4 cycles of therapy with atezolizumab + chemotherapy (carboplatin and etoposide). The initial phase was followed by the maintenance phase, in which 242 people were treated with ZEPZELCA + atezolizumab and 241 people were treated with atezolizumab.

Median overall survival*

**13.2
months**

on ZEPZELCA + atezolizumab

**10.6
months**


on atezolizumab

*Median overall survival means the midpoint between people who lived the longest and those who lived for the shortest period of time.

Together, ZEPZELCA and atezolizumab may help control your cancer and help you live longer.

Please see accompanying full [Prescribing Information](#), including [Patient Information](#), and discuss it with your doctor.

Taking ZEPZELCA + atezolizumab




ZEPZELCA is usually given:



Over 60 minutes





- By infusion into a vein
- In an outpatient setting when appropriate

Atezolizumab and ZEPZELCA can be administered on the same day.

Please see accompanying full [Prescribing Information](#), including [Patient Information](#), and discuss it with your doctor.

Side effects and safety



ZEPZELCA and atezolizumab are two established treatments. No new or unexpected side effects were reported by people who received them together during a clinical study.

IN A CLINICAL STUDY:

- 5% of people who received ZEPZELCA + atezolizumab stopped treatment with ZEPZELCA due to side effects
 - The side effect that caused more than 1% of people to stop treatment was low white blood cell count

The most common side effects of ZEPZELCA given alone include:

- | | |
|---|---|
| • tiredness | • low level of albumin in the blood |
| • low white and red blood cell counts | • constipation |
| • increased kidney function blood test (creatinine) | • trouble breathing |
| • increased liver function blood tests | • low levels of sodium and magnesium in the blood |
| • increased blood sugar (glucose) | • vomiting |
| • nausea | • cough |
| • decreased appetite | • diarrhea |
| • muscle and joint (musculoskeletal) pain | |

The most common side effects of ZEPZELCA given with atezolizumab include:

- | | |
|---------------------------------------|-------------------------|
| • low white and red blood cell counts | • tiredness or weakness |
| • nausea | |

These are not all of the possible side effects of ZEPZELCA. Call your doctor for medical advice about side effects.

You are encouraged to report suspected side effects of prescription drugs to the FDA. Visit www.fda.gov/medwatch or call 1-800-FDA-1088. You may also report side effects to Jazz Pharmaceuticals at 1-800-520-5568.



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atezolizumab /
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Questions to ask
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Important Safety
Information

Support

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Maintenance therapy basics

What is the goal of maintenance therapy?

Why is maintenance therapy important for me?

Treatment with ZEPZELCA + atezolizumab

Why are ZEPZELCA and atezolizumab prescribed together for maintenance therapy?

How would I receive ZEPZELCA + atezolizumab?

How often do I need to get ZEPZELCA + atezolizumab?

Will I get them at the same time?

How long will I be on ZEPZELCA + atezolizumab?

If I were prescribed ZEPZELCA + atezolizumab, are there any tests that need to be done before I start treatment?

Side effects

What are the potential side effects of ZEPZELCA + atezolizumab?

What should I do if I experience side effects?

Support and helpful reminders

Are there any educational resources available to help me during treatment?

Are there any resources to help with financial support for treatment?

What are my next steps?

Please see accompanying full Prescribing Information, including Patient Information, and discuss it with your doctor.

Notes



ZEPZELCA®
(lurbinectedin) for injection 4 mg

Important Safety Information

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

- have liver or kidney problems.
- are pregnant or plan to become pregnant. ZEPZELCA can harm your unborn baby.

Females who are able to become pregnant:

- Your healthcare provider should do a pregnancy test before you start treatment with ZEPZELCA.
- You should use effective birth control (contraception) during treatment with and for 6 months after your last dose of ZEPZELCA.
- Tell your healthcare provider right away if you become pregnant or think that you are pregnant during treatment with ZEPZELCA.

Males with female partners who are able to become pregnant should use effective birth control during treatment with and for 4 months after your last dose of ZEPZELCA.

- are breastfeeding or plan to breastfeed. It is not known if ZEPZELCA passes into your breastmilk. Do not breastfeed during treatment with ZEPZELCA and for 2 weeks after your last dose of ZEPZELCA. Talk to your healthcare provider about the best way to feed your baby during treatment with ZEPZELCA.

Tell your healthcare provider about all the medicines you take, including prescription and over-the-counter medicines, vitamins, and herbal supplements. Certain other medicines may affect how ZEPZELCA works.

What should I avoid while using ZEPZELCA?

Avoid eating or drinking grapefruit, Seville oranges, or products that contain grapefruit juice and Seville oranges during treatment with ZEPZELCA.

ZEPZELCA can cause serious side effects, including:

- **Low blood cell counts.** Low blood counts including low neutrophil counts (neutropenia) and low platelet counts (thrombocytopenia) are common with ZEPZELCA, and can also be severe. Some people with low white blood cell counts may get fever, or an infection throughout the body (sepsis), that can cause death. Your healthcare provider should do blood tests before you receive each treatment with ZEPZELCA to check your blood cell counts.

Tell your healthcare provider right away if you develop:

- fever or any other signs of infection
- tiredness
- unusual bruising or bleeding
- pale colored skin

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- **Liver problems.** Increased liver function tests are common with ZEPZELCA and can also be severe. Your healthcare provider should do blood tests to check your liver function before you start and during treatment with ZEPZELCA.

Tell your healthcare provider right away if you develop symptoms of liver problems including:

- loss of appetite
- nausea or vomiting
- pain on the right side of your stomach-area (abdomen)

- **Skin damage at or near the infusion site.** ZEPZELCA can cause damage and death of tissue cells if it leaks into the tissues around your infusion site. You may need to have surgery to remove any dead tissue. Tell your healthcare provider right away if you see any fluid leaking at or around the catheter during your infusion, or if you notice any redness, swelling, itching or discomfort at the infusion site at any time.
- **Severe muscle problems (rhabdomyolysis).** Treatment with ZEPZELCA may increase the level of an enzyme in your blood called creatine phosphokinase (CPK). Your healthcare provider should do blood tests to check your CPK levels before you start and during treatment with ZEPZELCA. Tell your healthcare provider if you have severe muscle pain or weakness.

Your healthcare provider may temporarily stop treatment, lower your dose, or permanently stop ZEPZELCA if you develop serious side effects during treatment with ZEPZELCA.

The most common side effects of ZEPZELCA given alone include:

- | | |
|---|---|
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| • low white and red blood cell counts | • constipation |
| • increased kidney function blood test (creatinine) | • trouble breathing |
| • increased liver function blood tests | • low levels of sodium and magnesium in the blood |
| • increased blood sugar (glucose) | • vomiting |
| • nausea | • cough |
| • decreased appetite | • diarrhea |
| • muscle and joint (musculoskeletal) pain | |

The most common side effects of ZEPZELCA given with atezolizumab include:

- | | |
|---------------------------------------|-------------------------|
| • low white and red blood cell counts | • tiredness or weakness |
| • nausea | |

These are not all of the possible side effects of ZEPZELCA.

Call your doctor for medical advice about side effects. You are encouraged to report suspected side effects of prescription drugs to the FDA.

Visit www.fda.gov/medwatch or call 1-800-FDA-1088. You may also report side effects to Jazz Pharmaceuticals at 1-800-520-5568.



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Important Safety
Information

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How to get access and support for ZEPZELCA

You don't have to face small cell lung cancer alone

There are ways to make it all feel more manageable. As you begin the next step in your treatment journey, lean on your care team. They're here to help you find the treatment plan that fits you best.

To help you get ZEPZELCA, JazzCares Specialists can assist you with

- Understanding your insurance coverage
- Other cost and coverage questions
- Referrals to other financial assistance

Lower your out-of-pocket costs for ZEPZELCA

- Savings Card—eligible, commercially insured individuals can pay as little as \$10 for their ZEPZELCA medication, subject to an annual maximum

Free drug program (if eligible)

- Financial and other eligibility criteria may apply



JazzCares is committed to helping you get access to your ZEPZELCA medication and the support you need



Learn more about JazzCares support offerings.

Call 1-833-533-JAZZ (5299)
Monday–Friday between
8 AM and 8 PM ET,
or visit [JazzCares.com](https://www.jazzcares.com)