





DISCOVER THE POSSIBILITY OF FEWER AHP ATTACKS

Welcome to treatment with GIVLAARI® (givosiran). Use this brochure to help educate and inform you and your loved ones about AHP, how it affects your body, and to see results from the GIVLAARI clinical study. Be sure to talk to your doctor about any questions you may have about treatment with GIVLAARI.

#### **Important Safety Information**

#### GIVLAARI can cause severe allergic reaction:

Tell your doctor or nurse right away if you experience any of the following signs or symptoms of a severe allergic reaction during treatment:

- Swelling mainly of the lips, tongue or throat which makes it difficult to swallow or breathe
- Breathing problems or wheezing

- Feeling dizzy or fainting
- Rash or hives
- Itching

If you have a severe allergic reaction, your doctor or nurse will stop GIVLAARI treatment right away and you may need to take other medicines to control the symptoms.

Please see Important Safety Information on page 11 and full <u>Prescribing Information</u>.

Welcome

### WHAT IS AHP?

AHP is a family of rare, genetic diseases that can cause severe and potentially life-threatening attacks. Some people with AHP also have chronic, debilitating symptoms when they are not having an attack.

#### WHAT ARE THE SYMPTOMS OF AN AHP ATTACK?

AHP has a wide array of symptoms that can mimic those of other conditions. You may have AHP if you suffer from attacks of severe, unexplained abdominal pain, along with at least 1 other symptom, such as:

- Limb, back, or chest pain
- Anxiety
- NauseaVomiting
- Vorning

- Insomnia
- Seizures
- Confusion
   Weak limbs

- Dark or reddish urine
- Constipation
- Diarrhea
- Hallucinations

IN THE US, ABOUT

1 PERSON IN 100,000

IS DIAGNOSED WITH AHP AND HAS SYMPTOMS.

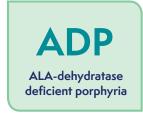


#### THERE ARE 4 TYPES OF AHP:





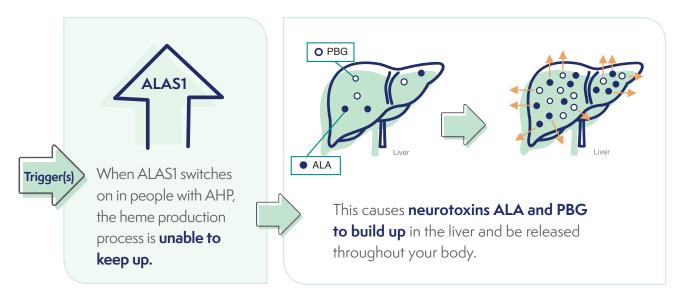




MOST COMMON LEAST COMMON

### HOW AHP AFFECTS YOUR BODY

Heme is an important molecule that is made in the liver. An enzyme called ALAS1 is the "start switch" that controls the process of making heme. When ALAS1 switches on in people with AHP, the heme production process is unable to keep up. This causes neurotoxins ALA and PBG to build up in the liver and be released throughout your body.



ALA and PBG are associated with attacks and other AHP symptoms.

ALAS1=delta-aminolevulinate synthase 1; ALA=aminolevulinic acid; PBG=porphobilinogen.

## DID YOU KNOW SOME FACTORS CAN WORSEN YOUR AHP?

Some potential attack triggers include:

- ✓ Hormonal fluctuations
- ✓ Infection
- ✓ Stress

- ✓ Use of certain medications
- ✓ Alcohol consumption
- ✓ Fasting/extreme dieting

AHP=acute hepatic porphyria.

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If these tests show abnormal results, your doctor or nurse will decide whether to temporarily interrupt or stop treatment with GIVLAARI.

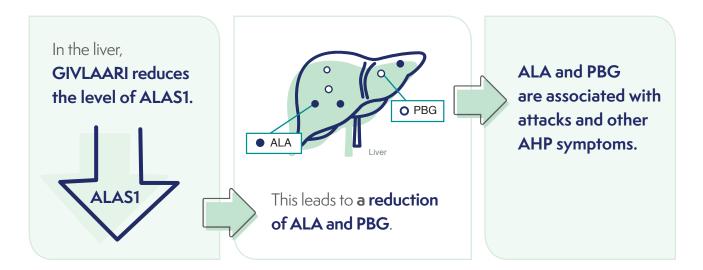
#### GIVLAARI can cause kidney problems:

Your doctor will check how your kidneys are working while you are using GIVLAARI.

Please see Important Safety Information on page 11 and full Prescribing Information.

## HOW GIVLAARI® (givosiran) WORKS

GIVLAARI is a medicine used to treat AHP in adults.



GIVLAARI reduces the amount of ALAS1 in the liver, which leads to a reduction in levels of the neurotoxins ALA and PBG.

ALAS1=delta-aminolevulinate synthase 1; ALA=delta-aminolevulinic acid; PBG=porphobilinogen.

#### **HOW GIVLAARI WAS STUDIED**

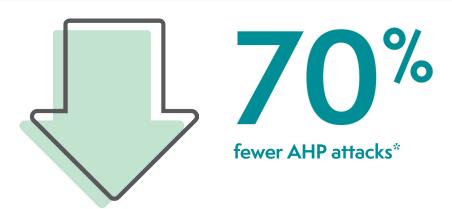
GIVLAARI was tested against a placebo in a clinical study of 94 adults with AHP who had 2 or more attacks in the 6 months prior to starting the study.

- During the study, 48 patients received GIVLAARI and 46 patients received a placebo (an injection that did not contain any medication) once monthly for 6 months
- Attacks measured in the study were defined as those that required hospitalization, urgent healthcare visit, or intravenous (IV) hemin at home



# PATIENTS TAKING GIVLAARI® (givosiran) EXPERIENCED FEWER AHP ATTACKS

In a 6-month study, on average, patients taking GIVLAARI **experienced fewer AHP attacks**\* compared to those on placebo.



Patients on GIVLAARI had an average of 1.9 AHP attacks compared to 6.5 in patients on placebo.

#### GIVLAARI may help reduce AHP attacks.

\*Attacks measured in the study were defined as those that required hospitalization, urgent healthcare visit, or intravenous (IV) hemin at home.

AHP=acute hepatic porphyria.

#### **Important Safety Information**

#### GIVLAARI can cause injection site reactions:

GIVLAARI is given as an injection under the skin (called a "subcutaneous injection"). Reactions to this injection may happen during treatment with GIVLAARI.

Tell your doctor or nurse right away if you experience any of the following symptoms of an injection site reaction during treatment: redness, pain, itchiness, rash, discoloration, or swelling around the injection site.

# ...AND FEWER DAYS OF HEMIN USE

In a 6-month study, on average, patients taking GIVLAARI **needed less hemin to treat AHP attacks** compared to those on placebo.



Patients on GIVLAARI had an average of 4.7 days of hemin use compared to 12.8 in patients on placebo.

GIVLAARI may also help reduce days of hemin use.

Patients who experienced an attack were treated according to local standard of care, which could include hemin. Using hemin to prevent an attack was not allowed during the study.

#### **Important Safety Information**

#### What are the common side effects of GIVLAARI?

The most common side effects of GIVLAARI are nausea and injection site reactions. These are not all the possible side effects of GIVLAARI. Talk to your doctor about side effects that you experience. 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.



In the same 6-month study of 94 adults with AHP:

- One patient taking GIVLAARI discontinued treatment due to elevated liver enzymes. No patients taking placebo discontinued treatment.
- The most common side effects of GIVLAARI were nausea and injection site reactions:
- Nausea was reported in 27% (13 people) receiving GIVLAARI compared to 11% (5 people) on placebo
- Injection site reactions were reported in 25% (12 people) receiving GIVLAARI compared to 0% on placebo

#### **Important Safety Information**

Do not use GIVLAARI if you have ever had a severe allergic reaction to GIVLAARI.

#### GIVLAARI can cause:

#### Severe allergic reaction

Tell your doctor or nurse right away if you experience any of the following signs or symptoms of a severe allergic reaction during treatment:

- Swelling mainly of the lips, tongue or throat which makes it difficult to swallow or breathe
- Feeling dizzy or fainting
- Rash or hives
- Breathing problems or wheezing

Itching

If you have a severe allergic reaction, your doctor or nurse will stop GIVLAARI treatment right away and you may need to take other medicines to control the symptoms.

#### Liver problems

Your doctor will check your liver function by doing blood tests:

- Before you start using GIVLAARI
- Once a month for the first 6 months of treatment
- And when they think it is needed

If these tests show abnormal results, your doctor or nurse will decide whether to temporarily interrupt or stop treatment with GIVLAARI.

#### Kidney problems

Your doctor will check how your kidneys are working while you are using GIVLAARI.

#### • Injection site reactions

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Tell your doctor or nurse right away if you experience any of the following symptoms of an injection site reaction during treatment: redness, pain, itchiness, rash, discoloration, or swelling around the injection site.

#### What are the common side effects of GIVLAARI?

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For additional information about GIVLAARI, please see full Prescribing Information.



## HOW GIVLAARI® (givosiran) IS GIVEN

GIVLAARI is given once a month as an injection under the skin (subcutaneous) by a healthcare professional. If a dose is missed, they should administer GIVLAARI as soon as possible.



GIVLAARI IS GIVEN ONCE A MONTH BY A HEALTHCARE PROFESSIONAL.



## PARTNER WITH YOUR ALNYLAM ASSIST® SUPPORT TEAM

Once you and your doctor decide to begin treatment with GIVLAARI® (givosiran) for your AHP, it's important to know that Alnylam Assist® is here for you and your family every step of the way. Alnylam Assist® is a personalized support program for patients receiving GIVLAARI.

#### LEARN FROM A PATIENT EDUCATION LIAISON (PEL)

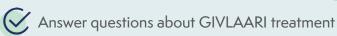
Our dedicated PELs have backgrounds in nursing and genetic counseling, and are experienced in educating people and their families about matters related to AHP.

#### Your PEL will:

Support you with disease education

Connect you to additional resources

Provide you with product information





AHP=acute hepatic porphyria.

Connect with a PEL today.
Visit GIVLAARIPEL.com to learn how.

#### SPEAK TO A DEDICATED CASE MANAGER

Case Managers are experienced in helping individuals get started on treatment and providing ongoing support. They will tailor their level of contact based on your personal needs.

#### Your case manager will:



Navigate your insurance benefits



Determine your eligibility for Alnylam financial assistance programs



Help you get started on treatment



Provide you with personalized support

For more information about Alnylam Assist® or to access downloadable materials:



Visit: AlnylamAssist.com
Call: 1-833-256-2748
Monday-Friday, 8 AM-6PM ET



## NEED HELP UNDERSTANDING FINANCIAL SUPPORT?

We are committed to making GIVLAARI® (givosiran) available to those who need it. When you and your healthcare provider decide to start treatment, Alnylam Assist® will provide you with a Case Manager who will work with you to navigate your insurance benefits and determine eligibility for one of Alnylam's financial assistance programs.\*



If you have commercial insurance, our Copay Program offers assistance with drug-related out-of-pocket expenses—including copays and co-insurance—regardless of your financial status



If you do not have insurance, or are unable to pay for treatment, our Patient Assistance Program may be able to provide you with GIVLAARI at no cost



Talk to your Case Manager to learn more about Alnylam financial assistance program eligibility

## GETTING STARTED WITH **ALNYLAM ASSIST®**

STEP 1:	Talk to your healthcare provider about whether GIVLAARI is right for you.
STEP 2:	Once you and your healthcare provider decide to start treatment with GIVLAARI, fill out the Start Form together.
STEP 3:	Your healthcare provider should then submit it to Alnylam Assist®.
STEP 4:	Upon receipt, a Case Manager will reach out to you within 1-2 business days.
STEP 5:	Thereafter, you will get dedicated support throughout your treatment with GIVLAARI.

For more information about Alnylam Assist® or to access downloadable materials:



Visit: AlnylamAssist.com Call: **1-833-256-2748** Monday-Friday, 8 AM-6 PM ET

<sup>\*</sup>Individuals must meet specified eligibility criteria to qualify for assistance. Alnylam reserves the right to make eligibility determinations and to modify or discontinue the program at any time.



Talk to your doctor about GIVLAARI® (givosiran). Visit GIVLAARI.com to learn more.