Learn more about RYBREVANT® (amivantamab-vmjw), a treatment that you and your healthcare team may choose to use during your lung cancer treatment journey

What is RYBREVANT® (amivantamab-vmjw)?

RYBREVANT® is a prescription medicine used to treat adults with non-small cell lung cancer (NSCLC) that:

- has spread to other parts of the body (metastatic) or cannot be removed by surgery, **and**
- has a certain abnormal epidermal growth factor receptor "EGFR" gene(s) **and**
- whose disease has worsened while on or after chemotherapy that contains platinum.

Your healthcare provider will perform a test to make sure that RYBREVANT® is right for you.

It is not known if RYBREVANT® is safe and effective in children.

RYBREVANT® is approved based on medical studies that measured how many patients responded to treatment. There are ongoing studies to confirm the continued approval of RYBREVANT®.

IMPORTANT SAFETY INFORMATION

What are the possible side effects of RYBREVANT®?

RYBREVANT® may cause serious side effects, including:

- **infusion-related reactions.** Infusion-related reactions are common with RYBREVANT® and can be severe or serious. Tell your healthcare provider right away if you get any of the following symptoms during your infusion of RYBREVANT®:
  - shortness of breath
  - fever
  - chills
  - nausea
  - flushing
  - chest discomfort
  - lightheadedness
  - vomiting

Please read Important Safety Information throughout and on pages 12-13.
Please read enclosed full Prescribing Information for RYBREVANT®.

RYBREVANT®
(amivantamab-vmjw)
Injection for IV Use | 350 mg/7 mL (50 mg/mL)

Non-small cell lung cancer is the most common type of lung cancer

Metastatic non-small cell lung cancer (mNSCLC) occurs when healthy cells in the lungs start to change or grow uncontrollably and become cancerous

As these cells grow, they form tumors. When cells from the primary tumor travel through the body, they can develop new tumors in other places, causing the cancer to spread. That means that the lung cancer has metastasized, or become metastatic.

In mNSCLC, biomarker testing can help doctors create a more personalized treatment plan

A biomarker is any molecule that can be measured in tissues, blood, or other bodily fluids. Biomarkers can show that your body is working normally or abnormally, or even show signs of disease.

By identifying mutations in certain cells associated with mNSCLC, biomarker testing can help you and your doctor get more details about the disease and find the right treatment option.

An *EGFR* exon 20 insertion mutation is a biomarker of certain mutated cancer cells

A protein called an epidermal growth factor receptor (EGFR) is found on both normal and cancer cells and drives cells to survive and spread

In mNSCLC, an *EGFR* gene with an exon 20 insertion mutation can cause cancer cells to lose control over their growth, allowing them to multiply and spread to other parts of the body. Exon 20 insertion mutations not only cause cancers to grow and spread but common treatments, such as some tyrosine kinase inhibitors (TKIs), may not work for these mutations.

Ask your doctor about getting tested for biomarkers like *EGFR* exon 20 insertion mutations using an FDA-approved test

A certain kind of biomarker test, next-generation sequencing (NGS), can most reliably detect *EGFR* exon 20 insertion mutations.

Biomarker testing with NGS will help you and your doctor understand your disease so you can get a treatment personalized for your specific type of mNSCLC.

EGFR, epidermal growth factor receptor; FDA, Food and Drug Administration; mNSCLC, metastatic non-small cell lung cancer; NGS, next-generation sequencing; TKI, tyrosine kinase inhibitor.

RYBREVANT® is the first approved treatment for this kind of lung cancer

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RYBREVANT® is the only treatment of its kind designed to target mNSCLC with *EGFR* exon 20 insertion mutations after chemotherapy that contains platinum

RYBREVANT® (amivantamab-vmjw) is a targeted antibody that:

- Directly blocks EGFR on the outside of the cell to stop tumors from growing
- Works with your body's immune system to identify and destroy cancer cells with EGFR

EGFR, epidermal growth factor receptor; mNSCLC, metastatic non-small cell lung cancer.

IMPORTANT SAFETY INFORMATION (CONTINUED)

Before you receive RYBREVANT®, tell your healthcare provider about all of your medical conditions, including if you:

- have a history of lung or breathing problems
- are pregnant or plan to become pregnant. RYBREVANT® 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 RYBREVANT®.
  - You should use effective birth control (contraception) during treatment and for 3 months after your final dose of RYBREVANT®.
  - Tell your healthcare provider right away if you become pregnant or think you might be pregnant during treatment with RYBREVANT®.
- are breastfeeding or plan to breastfeed. It is not known if RYBREVANT® passes into your breast milk. Do not breastfeed during treatment and for 3 months after your final dose of RYBREVANT®.

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

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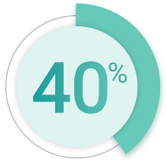
RYBREVANT® is designed to help treat your mNSCLC with *EGFR* exon 20 insertion mutations after chemotherapy that contains platinum

In a clinical trial, RYBREVANT® (amivantamab-vmjw) was studied in 81 people who had mNSCLC with *EGFR* exon 20 insertion mutations whose disease had worsened while on or after chemotherapy that contains platinum

- Most people in the trial were women (59%)
- Over half never smoked (53%)
- The main goal of the trial was to measure the number of people who responded to RYBREVANT® overall



40% of people treated with RYBREVANT® after chemotherapy that contains platinum saw their tumors disappear* (3.7%) or get smaller (36%).

*The disappearance of all signs of cancer in response to treatment does not always mean the cancer has been cured.

The median response time for people treated with RYBREVANT® was 11.1 months.

- This means half of people responded to RYBREVANT® for 11.1 months or longer, and half responded for less than 11.1 months
- 63% of people responded to RYBREVANT® for 6 months or longer

EGFR, epidermal growth factor receptor; mNSCLC, metastatic non-small cell lung cancer.

IMPORTANT SAFETY INFORMATION (CONTINUED)

The most common side effects of RYBREVANT® include:

- rash
- infusion-related reactions
- infected skin around the nail
- muscle and joint pain
- shortness of breath
- nausea
- feeling very tired
- swelling of hands, ankles, feet, face, or all of your body
- sores in the mouth
- cough
- constipation
- vomiting
- changes in certain blood tests

Your healthcare provider may temporarily stop, decrease your dose or completely stop your treatment with RYBREVANT® if you have serious side effects.

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

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

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You may experience some side effects while on treatment with RYBREVANT®

There can be common or serious side effects that happen while on treatment. Possible serious side effects of RYBREVANT® (amivantamab-vmjw) include

Infusion-related reactions. Infusion-related reactions are common with RYBREVANT® and can be severe or serious. Tell your healthcare provider right away if you get any of the following symptoms during your infusion of RYBREVANT®: shortness of breath, fever, chills, nausea, flushing, chest discomfort, lightheadedness, vomiting.

Lung problems. RYBREVANT® may cause lung problems that may lead to death. Symptoms may be similar to those symptoms from lung cancer. Tell your healthcare provider right away if you have any new or worsening lung symptoms, including shortness of breath, cough, or fever.

The most common side effects of RYBREVANT® include

- rash
- infusion-related reactions
- infected skin around the nail
- muscle and joint pain
- shortness of breath
- nausea
- feeling very tired
- swelling of hands, ankles, feet, face, or all of your body
- sores in the mouth
- cough
- constipation
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- changes in certain blood tests

11% of people stopped treatment with RYBREVANT® because of side effects. 78% of people had their treatment interrupted due to side effects, and 59% of people had their infusion interrupted because of an infusion-related reaction (IRR).

Skin problems. RYBREVANT® may cause rash, itching, and dry skin. You may use alcohol-free moisturizing cream for dry skin. Tell your healthcare provider right away if you get any skin reactions. Your healthcare provider may treat you with a medicine(s) or send you to see a skin specialist (dermatologist) if you get skin reactions during treatment with RYBREVANT®. You should limit your time in the sun during and for 2 months after your treatment with RYBREVANT®. Wear protective clothing and use sunscreen during treatment with RYBREVANT®.

Eye problems. RYBREVANT® may cause eye problems. Tell your healthcare provider right away if you have symptoms of eye problems which may include: eye pain, dry eyes, eye redness, blurred vision, changes in vision, itchy eyes, excessive tearing, or sensitivity to light. Your healthcare provider may send you to see an eye specialist (ophthalmologist) if you get eye problems during treatment with RYBREVANT®. You should not use contact lenses until your eye symptoms are checked by a healthcare provider.

IMPORTANT SAFETY INFORMATION (CONTINUED)

What should I avoid while receiving RYBREVANT®?

RYBREVANT® can cause skin reactions. You should limit your time in the sun during and for 2 months after your treatment with RYBREVANT®. Wear protective clothing and use sunscreen during treatment with RYBREVANT®.

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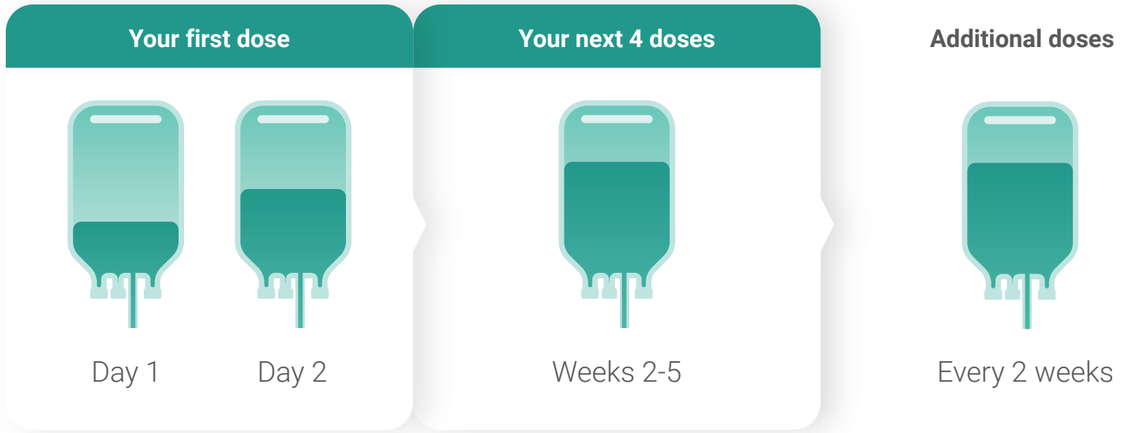
RYBREVANT® is given through an intravenous infusion under the attention of your care team

With RYBREVANT®, the dosing schedule may change and become less frequent after your first dose



Your first dose will be given over 2 infusions and may be adjusted to help manage possible infusion-related reactions.

After your first dose (2 infusions), you'll get one infusion each week for the next 4 weeks.

Then, you'll get one infusion every 2 weeks.

While everyone's experience is unique, infusion times may get shorter after your first dose.

- Without an infusion-related reaction (IRR):
  - Your first dose (the infusion on Day 1 and Day 2) can take about 4 to 6 hours
  - Infusions can get shorter starting on Week 2, and can take about 2 to 4 hours

However, your healthcare provider may interrupt or stop your infusion if an adverse reaction occurs.

Your healthcare provider will decide:

- The time between doses
- How many treatments you will receive
- The appropriate dose of RYBREVANT® based on your body weight

Ask your care team any questions you have about treatment with RYBREVANT®

IMPORTANT SAFETY INFORMATION (CONTINUED)

How will I receive RYBREVANT®?

- RYBREVANT® will be given to you by your healthcare provider by intravenous infusion into your vein.
- Your healthcare provider will decide the time between doses as well as how many treatments you will receive.
- Your healthcare provider will give you medicines before each dose of RYBREVANT® to help reduce the risk of infusion-related reactions.
- If you miss any appointments, call your healthcare provider as soon as possible to reschedule your appointment.

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    - flushing
    - chest discomfort
    - lightheadedness
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  - dry eyes
  - eye redness
  - blurred vision
  - changes in vision
  - itchy eyes
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General information about safe and effective use of RYBREVANT®

Medicines are sometimes prescribed for purposes other than those listed in a Patient Information leaflet. You can ask your healthcare provider or pharmacist for information about RYBREVANT® that is written for health professionals.

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Janssen Oncology

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