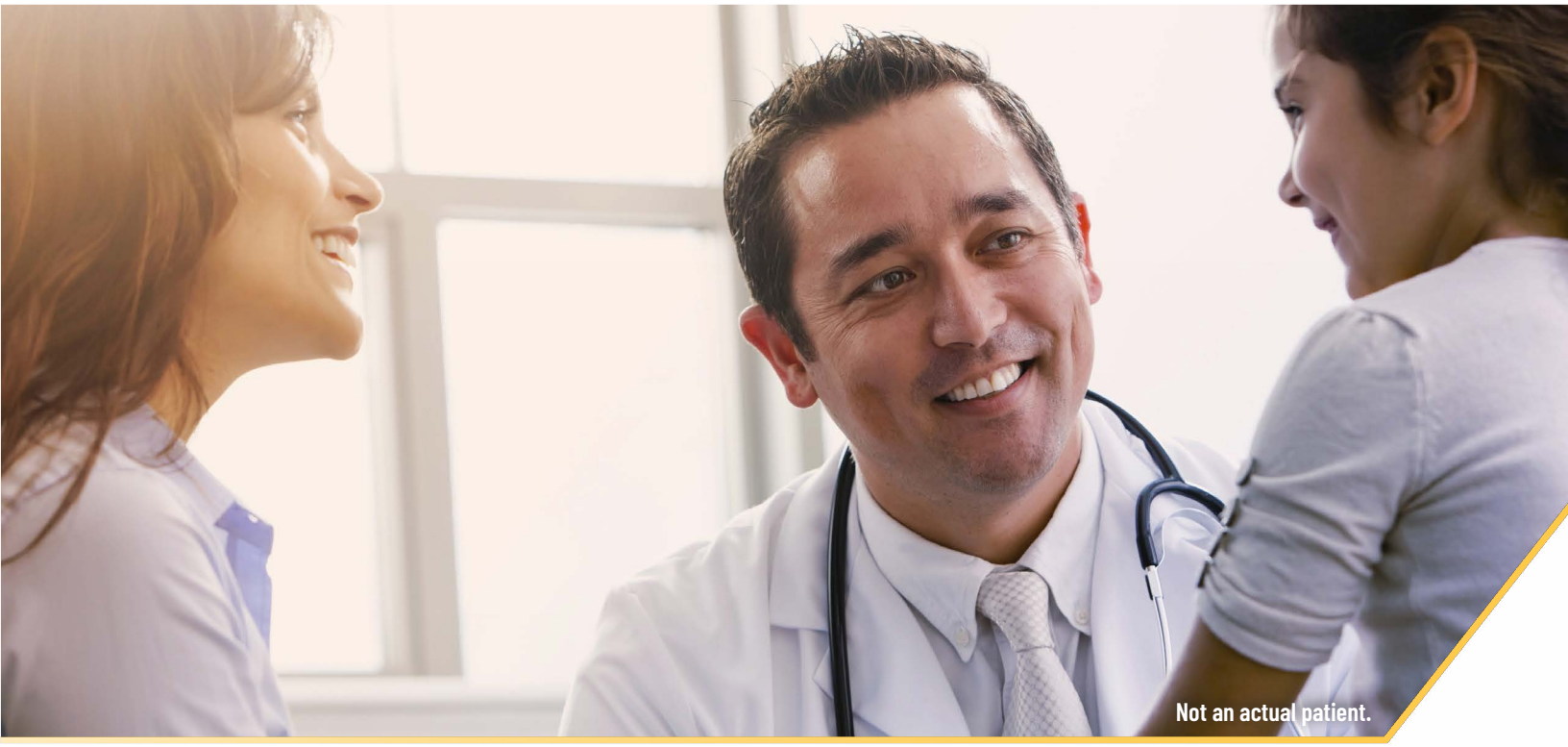
TALKING WITH YOUR DOCTOR ABOUT TREATMENT FOR ASMD (NON-CNS MANIFESTATIONS)

Xenpozyme®
(olipudase alfa-rpcp)
For Injection, 20 mg

IT IS IMPORTANT TO DISCUSS WITH YOUR DOCTOR HOW ASMD IS AFFECTING YOU. THIS GUIDE CAN HELP FACILITATE A DISCUSSION AT YOUR NEXT APPOINTMENT.



ASMD=acid sphingomyelinase deficiency; CNS=central nervous system.

INDICATION

XENPOZYME® (olipudase alfa-rpcp) is indicated for treatment of non–central nervous system manifestations of acid sphingomyelinase deficiency (ASMD) in adult and pediatric patients.

IMPORTANT SAFETY INFORMATION

WARNING: SEVERE ALLERGIC REACTIONS

Allergic Reactions Including Anaphylaxis

Allergic reactions, including severe reactions that may be serious or life-threatening (known as anaphylaxis), have occurred during and after XENPOZYME treatment. Tell your healthcare provider right away if you develop any reactions, and seek immediate medical care if severe reactions occur. If a severe allergic reaction occurs, your doctor may decide to discontinue XENPOZYME immediately and provide appropriate medical care. Appropriate medical support measures may be administered, and you may require close observation during and after XENPOZYME administration.

Please see Important Safety Information throughout and full Prescribing Information for complete details, including Boxed WARNING.

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WHAT ARE YOUR ASMD SYMPTOMS?

ASMD symptoms vary from person to person. They can also worsen over time. That is why it is important to keep track of them and discuss them with your doctor.

WHAT ASMD SYMPTOMS ARE YOU EXPERIENCING?

HOW OFTEN DO THESE SYMPTOMS OCCUR?

- ☐ Not very often
- ☐ Somewhat often
- ☐ Very often

WHICH ASMD SYMPTOMS SEEM TO BE WORSENING, IF ANY?

WHAT NEW ASMD SYMPTOMS HAVE YOU BEEN EXPERIENCING SINCE YOUR LAST VISIT WITH THE DOCTOR, IF ANY?

HOW HAVE YOUR SYMPTOMS BEEN MANAGED TO DATE?

IS THERE ANYTHING ELSE YOU WOULD LIKE TO DISCUSS?

ASMD IS A GENETIC DISEASE THAT CAN RUN IN FAMILIES. WHAT QUESTIONS MIGHT YOU HAVE FOR YOUR DOCTOR ABOUT FAMILY TESTING?

SINCE ASMD IS AN INHERITED CONDITION, CONSIDER FAMILY TESTING.

IMPORTANT SAFETY INFORMATION *(CONTINUED)*

WARNINGS AND PRECAUTIONS

Allergic Reactions (Including Anaphylaxis) and Infusion-Associated Reactions (IARs)

See Boxed WARNING for more information. Your doctor may decide to give you antihistamine, anti-fever, and/or steroid medications before your infusions. Signs of allergic reactions and infusion-associated reactions (IARs) included hives, itchy skin, skin redness, rash, swelling underneath the skin, tender bumps under the skin, and localized swelling, as well as headache, vomiting, nausea, fever, and diarrhea.

Reactions may occur during and/or after the infusion. Tell your healthcare provider right away if you experience any reactions. Your healthcare provider may slow or stop the infusion or may lower the next dose.

Elevated Transaminases Levels

XENPOZYME may be associated with elevated liver enzymes (known as transaminases) within 24 to 48 hours after infusion. Your doctor should check your liver enzyme levels with a blood test:

- within one month before starting XENPOZYME;
- within 72 hours before any infusion during the dose escalation phase, or before your next scheduled XENPOZYME infusion if you missed a dose.

Based on the results of your blood tests, your doctor may make changes to your dose or infusion schedule. Upon reaching the recommended maintenance dose, your doctor may continue to monitor your liver enzyme levels.

Risk to Unborn Babies

Starting or increasing the dose of XENPOZYME is not recommended in a pregnant female as it may cause harm (birth defects) to the developing baby. If you are pregnant or plan to become pregnant, tell your doctor right away.

If you are a female of reproductive potential, your doctor will verify your pregnancy status before you start treatment with XENPOZYME. You should use effective contraception during XENPOZYME treatment and for 14 days after your last dose if XENPOZYME is discontinued.

ADVERSE REACTIONS

- Most frequently reported adverse drug reactions in adults (incidence ≥10%) were headache, cough, diarrhea, low blood pressure, and redness in the eye.
- Most frequently reported adverse drug reactions in pediatric patients (incidence ≥20%) were fever, cough, diarrhea, runny nose, abdominal pain, vomiting, headache, hives, nausea, rash, joint pain, itchy skin, fatigue, and sore throat.

ASK YOUR DOCTOR ABOUT XENPOZYME—

THE FIRST AND ONLY DISEASE-SPECIFIC TREATMENT FOR ASMD (NON-CNS MANIFESTATIONS)

When it comes to non-CNS manifestations of ASMD, did you know there is only one disease-specific treatment option approved by the FDA? Here are a few questions and discussion points you can bring up with your doctor to find out if XENPOZYME is right for you or your child.

WHAT IS XENPOZYME?

XENPOZYME is an enzyme replacement therapy that provides the acid sphingomyelinase (ASM) enzyme that is deficient in people with ASMD.

WHAT RESULTS HAVE BEEN SEEN WITH XENPOZYME?

XENPOZYME is approved for the treatment of non-CNS manifestations of ASMD. XENPOZYME was studied in 3 clinical trials with adults and children. Your doctor can share information on the safety and efficacy results from the trials.

HOW IS XENPOZYME GIVEN?

XENPOZYME is given as an intravenous infusion once every 2 weeks.

HOW CAN I GET STARTED?

Ask your doctor about whether XENPOZYME is right for you or your child. You can also access personalized support and resources with CareConnect Personalized Support Services.

LEARN MORE ABOUT ASMD TREATMENT AT XENPOZYME.COM

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Access personalized support and resources at CareConnectPSS.com.
Services are also available at **1-800-745-4447** (toll free), Option 3, or email **Info@CareConnectPSS.com.**

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PERSONALIZED SUPPORT SERVICES

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MAT-US-2603438-v1.0-05/2026

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