

PROVEN IRON REDUCTION FOR REAL LIFE^{1,2,12}



Jesse, actual Ferriprox patient

Serum ferritin[†] reduction

- In the clinical trial, 50% of patients experienced at least a 20% reduction in serum ferritin within 1 year of therapy.^{1,12}

Heart iron reduction

- In the clinical trial, there was an increase in cardiac MRI T2* from a mean at baseline of 11.8±4.9 ms to a mean of 15.1±7.0 ms after approximately 1 year of treatment.^{1,12†}

Liver iron reduction

- In the clinical trial, 42% of patients experienced at least a 20% reduction in liver iron within 1 year of therapy (95% CI, 32%-51%).^{2†}

ms=milliseconds

† The clinical significance of this observation is not known.

‡ Serum ferritin indicates total body iron level.

§ Ferriprox was not studied in patients with severely reduced liver function.

What is Ferriprox® (deferiprone)?

Ferriprox is a prescription medicine used to treat people with thalassemia syndromes who have iron overload from blood transfusions, when current iron removal (chelation) therapy does not work well enough.

Approval is based on a reduction in serum ferritin levels. There are no controlled trials demonstrating a direct treatment benefit, such as improvement in disease-related symptoms, functioning, or increased survival.

It is not known if Ferriprox is safe and effective to treat iron overload due to blood transfusions in people with any other type of anemia that is long lasting (chronic) or in children.

Important Safety Information

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

Ferriprox can cause serious side effects, including a very low white blood cell count. One type of white blood cell that is important for fighting infections is called a neutrophil. If your neutrophil count is low (neutropenia), you may be at risk of developing a serious infection that can lead to death. Neutropenia is common with Ferriprox and can become severe in some people. Severe neutropenia is known as agranulocytosis. If you develop agranulocytosis, you will be at risk of developing serious infections that can lead to death.

Your healthcare provider should do a blood test before you start Ferriprox and weekly during treatment to check your neutrophil count. If you develop neutropenia, your healthcare provider should check your blood counts every day until your white blood cell count improves. Your healthcare provider may temporarily stop treatment with Ferriprox if you develop neutropenia or infection.

Stop taking Ferriprox and get medical help right away if you develop any of these symptoms of infection: fever, sore throat or mouth sores, flu-like symptoms, or chills and severe shaking.

Please see additional Important Safety Information, and the full Prescribing Information, including important WARNING and Medication Guide, in the back pocket.

 **Ferriprox**TM
deferiprone
1000 mg tablets

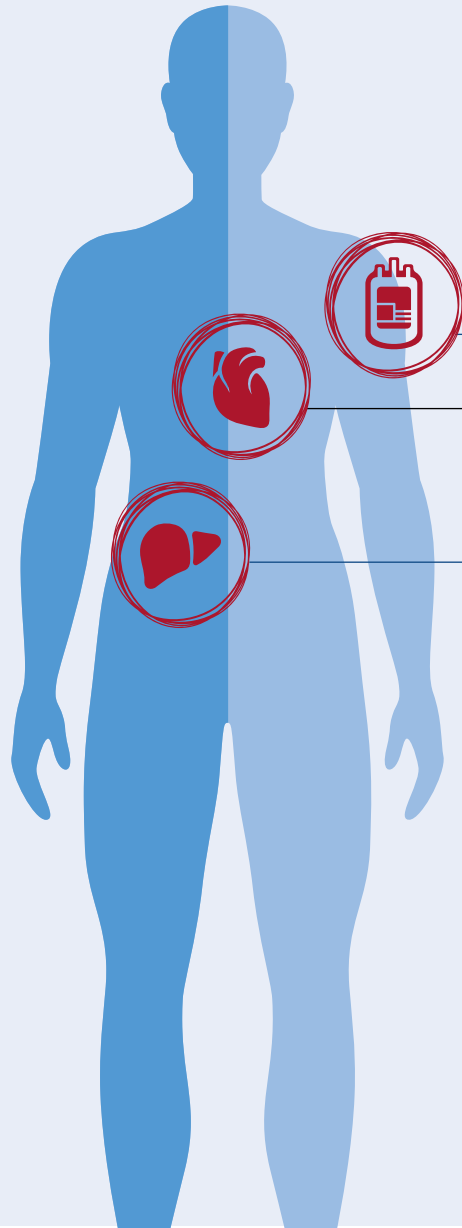
 **Ferriprox**
deferiprone
1000 mg tablets
500 mg tablets
Oral solution 100 mg/mL

Iron overload affects the whole body

Iron removal (chelation) is important for you if you receive repeated blood transfusions for the treatment of thalassemia syndromes.

Repeated blood transfusions cause extra iron to build up in the body.³

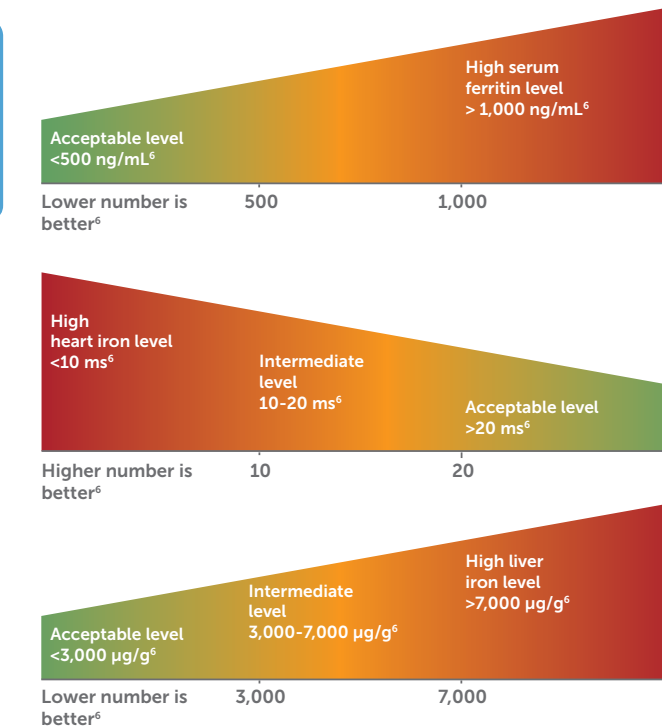
Heart-related problems are the leading cause of death in thalassemia major patients with inadequate iron chelation⁵



<p>Repeated blood transfusions cause extra iron to build up in the body.³</p>	<p>Recommended target levels⁶</p> <p>Serum ferritin <500 ng/mL⁶</p> <p>Standards of Care Guidelines for Thalassemia recommend serum ferritin levels should be measured monthly.⁶</p>
<p>The iron that builds up in the heart is harder to remove.⁴</p>	<p>Heart MRI[¶] T2* >20 ms^{¶¶}</p> <p>The American Heart Association (AHA) recommends heart MRI[¶] T2* assessments to be completed annually.^{7,¶¶}</p>
<p>The liver is the main site for iron storage. Extra iron can be removed with iron removal (chelation) therapy.^{3,4}</p>	<p>Liver iron level^{§§} <3,000 µg/g dry weight^{6,8}</p> <p>Cooley's Anemia Foundation recommends liver iron concentration (LIC) assessments to be completed annually.⁹</p>

Serum ferritin level and heart and liver iron should all be checked regularly⁶

Depending on the organ, it can take a long time to reduce iron – so treatment guidelines recommend preventing iron loading from the start.⁶



Iron loads differently in each organ. Serum ferritin (total body iron level) and the iron level in the liver are not related to the iron level in the heart^{3,7}



Find an MRI T2* facility near you with our online search tool.

¶ MRI=magnetic resonance imaging; ¶¶ ms=milliseconds; ¶¶ Or every 6 months for those patients with T2* <10 ms; §§ LIC=liver iron concentration

What is Ferriprox® (deferiprone)?

Ferriprox is a prescription medicine used to treat people with thalassemia syndromes who have iron overload from blood transfusions, when current iron removal (chelation) therapy does not work well enough.

It is not known if Ferriprox is safe and effective:

- to treat iron overload due to blood transfusions in people with any other type of anemia that is long lasting (chronic)
- in children

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

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Stop taking Ferriprox and get medical help right away if you develop any of these symptoms of infection:

- fever
- sore throat or mouth sores
- flu-like symptoms
- chills and severe shaking



Maria, actual Ferriprox patient

Do not take Ferriprox® if you are allergic to deferiprone or any of the ingredients in Ferriprox

See page 11 for a complete list of ingredients in Ferriprox.

Before you take Ferriprox, tell your healthcare provider about all of your medical conditions, including if you:

- Have liver problems
- Are pregnant or plan to become pregnant. Ferriprox can harm your unborn baby. You should avoid becoming pregnant during treatment with Ferriprox. Tell your healthcare provider right away if you become pregnant during treatment with Ferriprox.

Females who are able to become pregnant:

- Your healthcare provider should do a pregnancy test before you start treatment with Ferriprox.
- You should use effective birth control during treatment with Ferriprox and for at least 6 months after the last dose.

Males with female partners who are able to become pregnant:

- You should use effective birth control during treatment with Ferriprox and for at least 3 months after the last dose.

- Are breastfeeding or plan to breastfeed. It is not known if Ferriprox passes into your breast milk. Do not breastfeed during treatment with Ferriprox and for at least 2 weeks after the last dose.

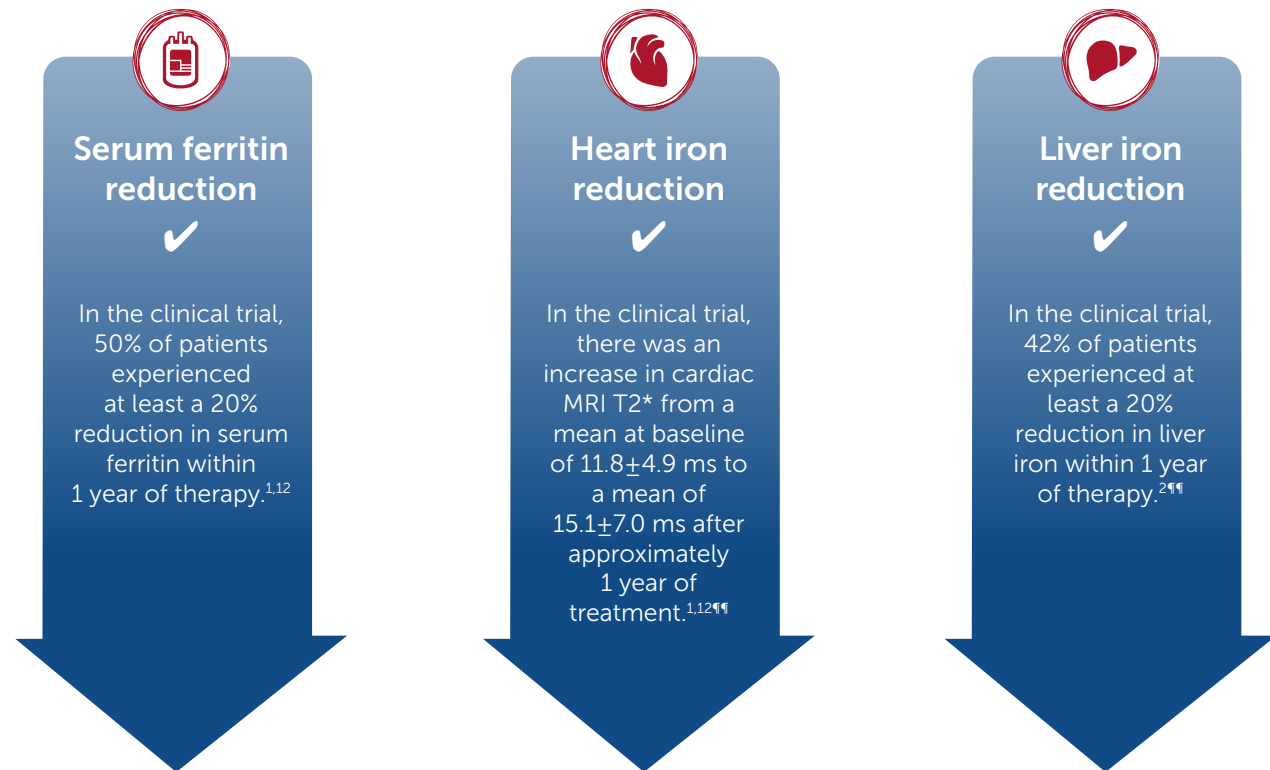
Tell your healthcare provider about all the medicines you take, including prescription and over-the-counter medicines, vitamins and herbal supplements.

Please see additional Important Safety Information, and the full Prescribing Information, including important WARNING and Medication Guide, in the back pocket.



Pranav, actual Ferriprox patient

Ferriprox® has been demonstrated to reduce serum ferritin, and heart and liver iron^{1,2,12}



¶¶ The clinical significance of this observation is not known.

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Ferriprox® has been proven to reduce iron buildup especially in the heart – this efficacy may be related to its high ability to enter heart cells¹⁰



If you are taking the lower dose of 75 mg per kg per day, and your iron levels remain high, your doctor may consider increasing your dose up to 99 mg per kg per day

Your doctor is optimizing your Ferriprox treatment to help you reach your iron level goals.

Alicia, actual Ferriprox patient

What are the possible side effects of Ferriprox?

Ferriprox can cause serious side effects, including:

- See "What is the most important information I should know about Ferriprox?"
- **Increased liver enzyme levels in your blood.** Your healthcare provider should do monthly blood tests to check your liver function during treatment with Ferriprox.
- **Decreased levels of zinc in your blood.** Your healthcare provider will do blood tests to check your zinc levels during treatment with Ferriprox and may prescribe a zinc supplement for you if your zinc levels are low.

The most common side effects of Ferriprox include:

- nausea
- vomiting
- stomach-area (abdominal) pain
- joint pain

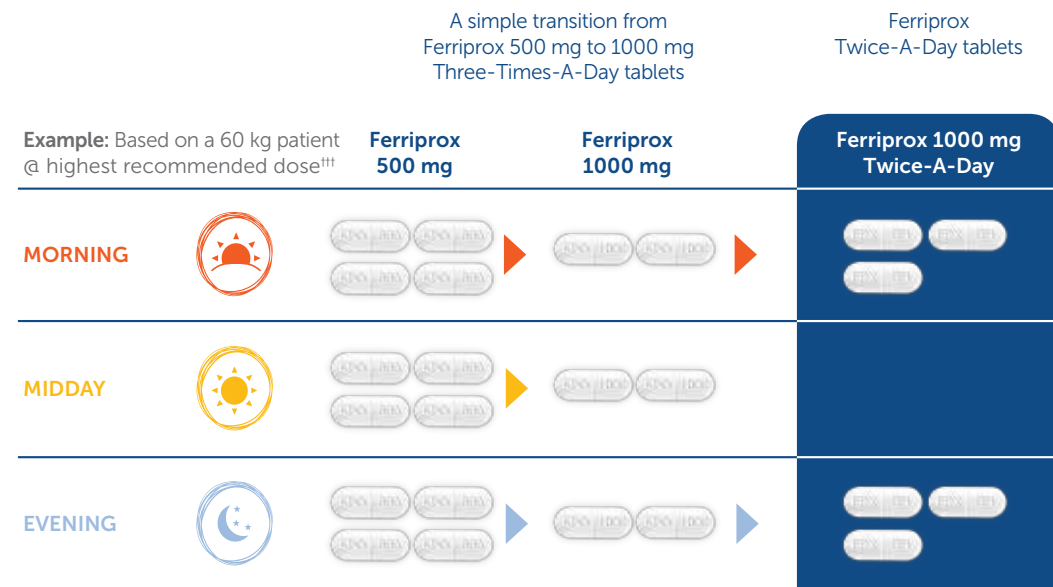
Ferriprox may cause a change in urine color to reddish-brown. This is not harmful and is expected during treatment with Ferriprox.

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

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

Ferriprox® offers twice-daily dosing

Take Ferriprox with food to help reduce the risk of nausea and vomiting.



††† Initial dose is 37.5 mg/kg to 49.5 mg/kg actual body weight, orally, twice daily with food for a total daily dose of 75 mg/kg to 99 mg/kg actual body weight.



Ferriprox is suitable for patients with reduced kidney or liver^{†††} function.^{1,12}

††† Ferriprox was not studied in patients with severely reduced liver function.

Please see additional Important Safety Information, and the full Prescribing Information, including important WARNING and Medication Guide, in the back pocket.



How should I take Ferriprox®?

- Take Ferriprox exactly as your healthcare provider tells you.
- Your healthcare provider will check your body iron level during treatment with Ferriprox and may change your dose if needed. Your healthcare provider may also change your dose of Ferriprox if you have certain side effects. Do not change your dose of Ferriprox unless your healthcare provider tells you to.
- There are 2 types of Ferriprox tablets that are taken on different schedules. Be sure you are taking the correct tablet and ask your healthcare provider if unsure.
 - **Ferriprox tablets (3 times a day):** Take these Ferriprox tablets 3 times each day. Take your first dose in the morning, the second dose at midday, and the third dose in the evening. Taking Ferriprox tablets with meals may help reduce nausea.
 - **Ferriprox tablets (2 times a day):** Take these Ferriprox tablets 2 times each day. Take your first dose in the morning and the second dose in the evening. Taking Ferriprox tablets with meals may help reduce nausea.
- **If you must take a medicine to treat indigestion (antacid), or supplements that contain iron, aluminum, or zinc during treatment with Ferriprox, allow at least 4 hours between taking Ferriprox and these products.**
- If you take too much Ferriprox, call your healthcare provider.
- If you miss a dose, take it as soon as you remember. If it is almost time for your next dose, skip the missed dose and then continue with your regular schedule. Do not try to catch up or take 2 doses at the same time to make up for a missed dose.

What should be avoided during treatment with Ferriprox?

- **Ferriprox tablets (2 times a day):** Avoid drinking alcohol during treatment with Ferriprox tablets (2 times a day). This may cause a faster release of the medicine.

Are you on the optimal Ferriprox dose?

Your Ferriprox dose requirements may change over time.

Ferriprox dose may be increased from 75 mg/kg/day to 99 mg/kg/day to improve chelation or to help you reach your iron level goals.^{1,11,12†††}

††† Initial dose is 37.5 mg/kg to 49.5 mg/kg actual body weight, orally, twice daily with food for a total daily dose of 75 mg/kg to 99 mg/kg actual body weight.



Alicia, actual Ferriprox patient

The safety of Ferriprox® has been studied in 70+ studies worldwide²

Ferriprox Twice-A-Day tablets have a safety profile similar to Ferriprox 500 mg and 1000 mg Three-Times-A-Day tablets.

How should I store Ferriprox?

- Store Ferriprox at room temperature, 68°F to 77°F (20°C to 25°C).
- Store Ferriprox tablets (3 times a day) in the original bottle and tightly closed to protect from moisture.

Keep Ferriprox and all medicines out of the reach of children.

General information about the safe and effective use of Ferriprox

Medicines are sometimes prescribed for purposes other than those listed in a Medication Guide. Do not use Ferriprox for a condition for which it was not prescribed. Do not give Ferriprox to other people, even if they have the same symptoms that you have. It may harm them. You can ask your pharmacist or healthcare provider for information about Ferriprox that is written for health professionals.

Please see additional Important Safety Information, and the full Prescribing Information, including important WARNING and Medication Guide, in the back pocket.

If you develop a fever, a sore throat or mouth sores, flu-like symptoms, or chills and severe shaking, follow the 3 steps below:



Stop the drug immediately



Seek medical attention immediately

(i.e., go to the ER or your doctor for blood monitoring)



Notify the ER provider or your doctor

that you are taking a medication that can cause agranulocytosis

What are the ingredients in Ferriprox®?

Active ingredient: deferiprone

Inactive ingredients:

- **Ferriprox tablets (3 times a day):** Tablet core: methylcellulose, crospovidone, and magnesium stearate. Coating: hypromellose, hydroxypropyl cellulose, macrogol, and titanium dioxide.
- **Ferriprox tablets (2 times a day):** Tablet core: hypromellose acetate succinate, magnesium oxide, colloidal silicon dioxide and magnesium stearate. Coating: triethyl citrate, talc, titanium dioxide, and methacrylic acid and ethyl acrylate copolymer.



Jesse, actual Ferriprox patient

References: 1. Ferriprox® (deferiprone) Prescribing Information. Chiesi, May 2020. 2. Data on file. 3. United Kingdom Thalassaemia Society. *Standards for the Clinical Care of Children and Adults with Thalassaemia in the UK*. 3rd edition; 2016. Editors Yardumian A, Telfer P, Shah F, et al. Available online at: <https://ukts.org/wp-content/uploads/2019/12/Standards-2016final.pdf>. 4. Noetzli LJ, et al. Longitudinal analysis of heart and liver iron in thalassaemia major. *Blood* 2008;112(7):2973-2978. 5. Modell B, Khan M, Darlison M, et al. Improved survival of thalassaemia major in the UK and relation to T2* cardiovascular magnetic resonance. *J Cardiovasc Magn Reson* 2008;10:42. doi:10.1186/1532-429X-10-42. 6. Standards of care guidelines for thalassaemia. Children's Hospital & Research Center Oakland. 2012. Available online at: <https://thalassaemia.com/documents/SOCGuidelines2012.pdf>. 7. Pennell DJ, et al. Cardiovascular function and treatment in β -thalassaemia major: a consensus statement from the American Heart Association. *Circulation* 2013;128(3):281-308. 8. Thalassaemia International Federation. *Guidelines for the Management of Transfusion Dependent Thalassaemia (TDT)*. 3rd edition. Nicosia (CY): Thalassaemia International Federation; 2014. Editors Cappellini MD, Cohen A, Porter J, Taher A, Viprakasit V. Available online at: <http://www.ncbi.nlm.nih.gov/books/NBK269382/>. 9. Sheth S. Monitoring of iron overload in transfusion-dependent thalassaemia (TDT). Cooley's Anemia Foundation. Accessed online October 10, 2019 at: <https://thalassaemia.com/documents/monitoring-iron-overload-in-transfusion-dependent-thalassaemia.pdf>. 10. Jamuar SS and Lai AHM. Safety and efficacy of iron chelation therapy with deferiprone in patients with transfusion-dependent thalassaemia. *Ther Adv Hematol* 2012;3(5):299-307. 11. Binding A, et al. Deferiprone exerts a dose-dependent reduction of liver iron in adults with iron overload. *Eur J Haematol* 2019;103(2):80-87. 12. Ferriprox® (deferiprone) Prescribing Information. Chiesi, April 2020.





A single call to your dedicated Chiesi Total Care™ team is all it takes and you'll receive:



Individual support

from your Patient Service Coordinator to understand your medication and your medical needs.



Insurance assistance

so that you receive what you qualify for.

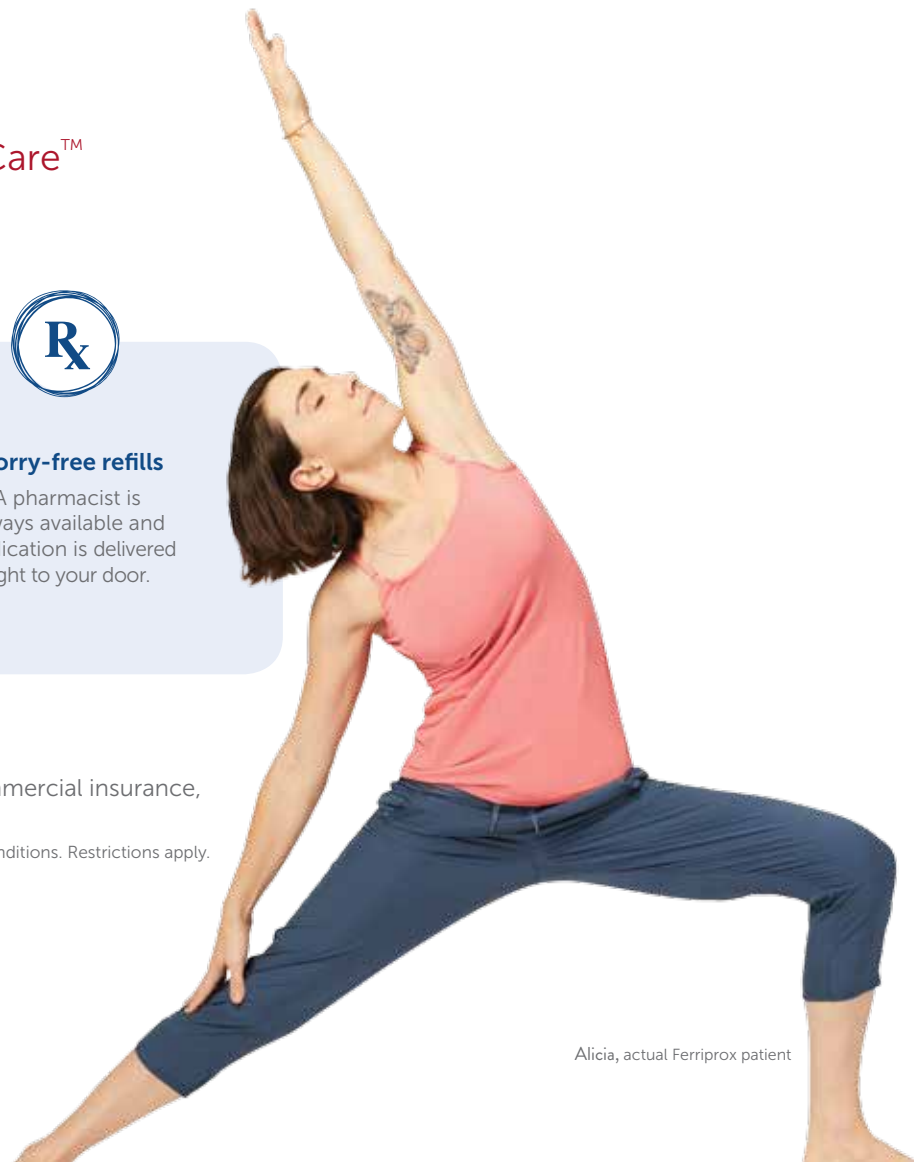


Worry-free refills

A pharmacist is always available and medication is delivered right to your door.

Chiesi Total Care provides assistance to patients with or without commercial insurance, Medicaid, and Medicare.^{¶¶¶}

^{¶¶¶} Call the toll-free number to determine patient eligibility and learn more about terms and conditions. Restrictions apply.



Alicia, actual Ferriprox patient



The Ferriprox® Copay Program

For commercially insured:

- Most patients pay as little as \$0 per month
- Up to \$10,000 out-of-pocket fees are covered annually

The Copay Program is available to patients subject to eligibility. You can learn about the Copay Program by calling the Chiesi Total Care™ team directly via the toll-free number.^{¶¶¶}



Lesa, Chiesi Total Care Pharmacist

Visit chiesitotalcare.com or call 1-866-758-7071 we're ready to help!

^{¶¶¶} Not valid for patients with health coverage under Medicaid, Medicare, or any other federal or state program. Copay Program subject to further terms and conditions. Call the Chiesi Total Care team for complete Copay Program terms and conditions.

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These organizations and online communities provide valuable tools, information, and support for you and your family.

Centers for Disease Control and Prevention – Thalassemia

<https://www.cdc.gov/ncbddd/thalassemia/index.html>

Centers for Disease Control and Prevention – Thalassemia Profiles

<https://www.flickr.com/photos/cdcsocialmedia/sets/72157631636182411/with/8029955042/>

Cooley's Anemia Foundation

<https://www.thalassemia.org/>

Iron Warriors

<https://ironwarriors.com>

Thalassemia Action Group (TAG)

<https://www.facebook.com/Haidarusmani356/>

Thalassaemia International Foundation

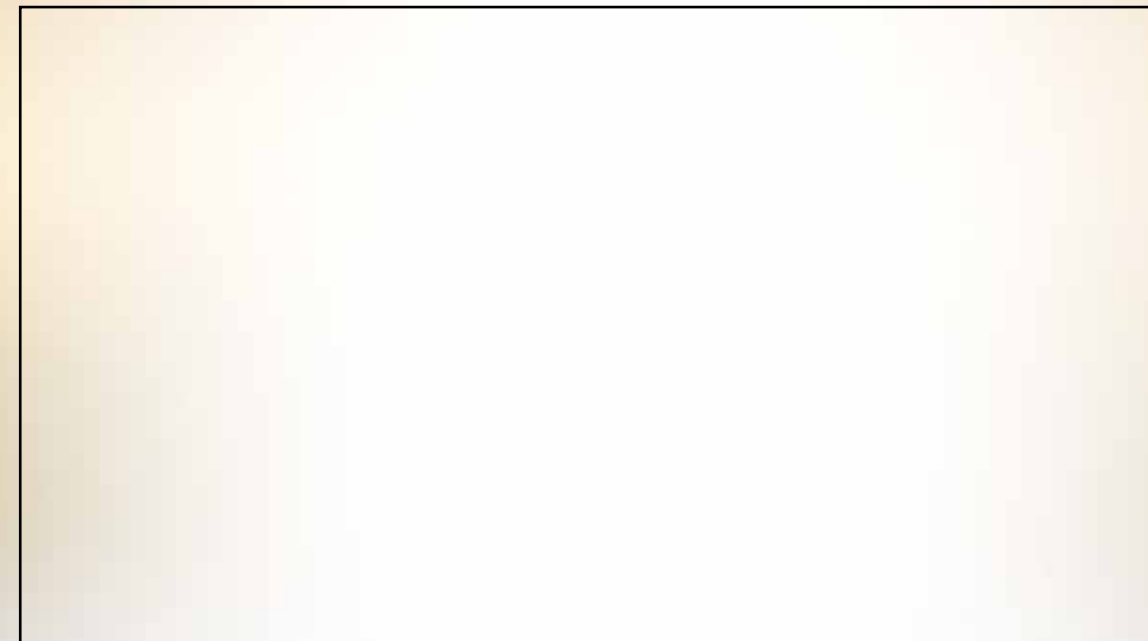
<https://thalassaemia.org.cy>

Thalpal.com

<https://www.thalassemiapatientsandfriends.com/>



Patient videos



Travel



Self-care



Connection



Family

Click the POWER button to hear how thalassemia patients balance treatment with real life.
Click the buttons above to learn more about each topic.

Proven iron reduction. Established safety profile. Twice-daily dosing with Ferriprox®.

EFFICACY

Ferriprox has been proven to reduce:

Serum ferritin^{††††}

- In the clinical trial, 50% of patients experienced at least a 20% reduction in serum ferritin within 1 year of therapy.^{1,12}

Heart iron levels

- In the clinical trial, there was an increase in cardiac MRI T2* from a mean at baseline of 11.8±4.9 ms to a mean of 15.1±7.0 ms after approximately 1 year of treatment.^{1,12,††††}

Liver iron levels

- In the clinical trial, 42% of patients experienced at least a 20% reduction in liver iron within 1 year of therapy (95% CI, 32%-51%).^{2,††††}

†††† Serum ferritin indicates total body iron level.

†††† The clinical significance of this observation is not known.

EXPANDED DOSING OPTIONS

- Ferriprox offers twice-a-day dosing.
- Suitable for patients with reduced kidney or liver^{§§§§} function.^{1,12}

ESTABLISHED SAFETY

- Used in 70+ clinical studies worldwide.²
- Ferriprox Twice-A-Day tablets have the same safety profile as 500 mg and 1000 mg Three-Times-A-Day tablets.^{1,12}

EXCEPTIONAL PATIENT SUPPORT

- The Ferriprox Copay Program – most patients pay as little as \$0 per month.^{¶¶¶¶}
- Chiesi Total Care™ Program – individual support, insurance and financial assistance, and worry-free refills.

ms=milliseconds

§§§§ Ferriprox was not studied in patients with severely reduced liver function.

¶¶¶¶ Chiesi covers up to \$10,000 annually for commercially insured patients.

For more information, visit ferriprox.com.

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Chiesi Total Care™ is a trademark of CHIESI FARMACEUTICI S.p.A.

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Maria, actual Ferriprox patient



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