

PREPARE YOUR PATIENTS TO INTERACT WITH A SPECIALTY PHARMACY

Some patients may be new to receiving specialty drugs, like TYMLOS, from a specialty pharmacy. The information below can help you answer questions your patients may have about receiving their prescriptions from a specialty pharmacy.

COMMON QUESTIONS FROM PATIENTS ABOUT SPECIALTY PHARMACIES

Q What should I expect when getting TYMLOS from a specialty pharmacy?

A You should expect to speak directly with the specialty pharmacy **before your prescription can be dispensed**. These calls will likely come from a **toll-free number** and failure to pick up these calls can lead to not receiving your prescription.

Q How often should I expect to talk to a specialty pharmacy?

A	You should expect 3 calls:	Topics covered during each call:
	Welcome call Introduces you to the specialty pharmacy and the services it provides	<ul style="list-style-type: none"> Type of support offered Information you need for future calls Information on who to contact if questions arise
	Delivery call Notifies you that your prescription has been filled, and determines shipment options and out-of-pocket costs	<ul style="list-style-type: none"> Delivery requirements (e.g., if you need to be present) Information on who to contact if you have problems or questions around taking TYMLOS Availability of a savings card
	Refill call Reminds you that the specialty pharmacy is preparing a refill and shipment	<ul style="list-style-type: none"> Monthly adherence and setting up automatic refills Need for supplemental supplies (e.g., needles), counseling, or support

IMPORTANT SAFETY INFORMATION

WARNING: RISK OF OSTEOSARCOMA

- Abaloparatide caused a dose-dependent increase in the incidence of osteosarcoma (a malignant bone tumor) in male and female rats. The effect was observed at systemic exposures to abaloparatide ranging from 4 to 28 times the exposure in humans receiving the 80 mcg dose. It is unknown if TYMLOS will cause osteosarcoma in humans.
- The use of TYMLOS is not recommended in patients at increased risk of osteosarcoma including those with Paget's disease of bone or unexplained elevations of alkaline phosphatase, open epiphyses, bone metastases or skeletal malignancies, hereditary disorders predisposing to osteosarcoma, or prior external beam or implant radiation therapy involving the skeleton.
- Cumulative use of TYMLOS and parathyroid hormone analogs (e.g., teriparatide) for more than 2 years during a patient's lifetime is not recommended.

Please see additional Important Safety Information on next page and [click here](#) for full Prescribing Information, including Boxed Warning.

REMIND YOUR PATIENTS THAT SPECIALTY PHARMACIES OFFER CONVENIENT SERVICES SUCH AS:



Prescription refill reminders

Patients can set up helpful reminders to help ensure they receive TYMLOS regularly and stay on track with their treatment regimen.



Dedicated support staff

In addition to receiving guidance from you and your office staff, your patients can speak with a knowledgeable and dedicated nurse or support staff member about their treatment.



At-home delivery

Patients can receive TYMLOS at home or at a location of their choosing, including their local retail pharmacy.



Clinical counseling and support

Specialty pharmacies can help educate patients about dosing and administration of TYMLOS and may be able to provide at-home tutorials and visits to ensure patients are administering their medications correctly.

IMPORTANT SAFETY INFORMATION (CONT'D)

Orthostatic Hypotension: Orthostatic hypotension may occur with TYMLOS, typically within 4 hours of injection. Associated symptoms may include dizziness, palpitations, tachycardia or nausea, and may resolve by having the patient lie down. For the first several doses, TYMLOS should be administered where the patient can sit or lie down if necessary.

Hypercalcemia: TYMLOS may cause hypercalcemia. TYMLOS is not recommended in patients with pre-existing hypercalcemia or in patients who have an underlying hypercalcemic disorder, such as primary hyperparathyroidism, because of the possibility of exacerbating hypercalcemia.

Hypercalciuria and Urolithiasis: TYMLOS may cause hypercalciuria. It is unknown whether TYMLOS may exacerbate urolithiasis in patients with active or a history of urolithiasis. If active urolithiasis or pre-existing hypercalciuria is suspected, measurement of urinary calcium excretion should be considered.

Adverse Reactions: The most common adverse reactions (incidence $\geq 2\%$) are hypercalciuria, dizziness, nausea, headache, palpitations, fatigue, upper abdominal pain and vertigo.

INDICATIONS AND USAGE

TYMLOS is indicated for the treatment of postmenopausal women with osteoporosis at high risk for fracture defined as a history of osteoporotic fracture, multiple risk factors for fracture, or patients who have failed or are intolerant to other available osteoporosis therapy. In postmenopausal women with osteoporosis, TYMLOS reduces the risk of vertebral fractures and nonvertebral fractures.

Limitations of Use

Because of the unknown relevance of the rodent osteosarcoma findings to humans, cumulative use of TYMLOS and parathyroid hormone analogs (e.g., teriparatide) for more than 2 years during a patient's lifetime is not recommended.

Please [click here](#) for full Prescribing Information, including Boxed Warning.

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