

Nypozi[®] filgrastim injection

Biosimilar of reference biologic drug Neupogen^{*}

**BIO
CARE**™ PATIENT
SUPPORT
PROGRAM

Introducing the new option in short-acting G-CSF[†] treatment

- Not made with natural rubber latex
- Single use pre-filled graduated syringe with an UltraSafe Passive[®] Needle-Guard
- Offered in two different strengths: 300 mcg / 0.5 mL and 480 mcg / 0.8 mL
- Out-of-fridge stability at room temperature up to 15 days for one single period
- Patient Support Program designed to help patients based on their unique needs

	DIN	STRENGTH [‡]	FORMAT	UPC
Nypozi [®] 300 mcg / 0.5 mL	02520990	300 mcg/0.5 mL	1 Syringe/Box	372374101011
	02520990	300 mcg/0.5 mL	10 Syringes/Box	372374101103



	DIN	STRENGTH [‡]	FORMAT	UPC
Nypozi [®] 480 mcg / 0.8 mL	02521008	480 mcg/0.8 mL	1 Syringe/Box	372374102018
	02521008	480 mcg/0.8 mL	10 Syringes/Box	372374102100



‡Contain 600 mcg/mL of filgrastim

Now offering a portfolio of both long- and short-acting G-CSFs[†] under the same Patient Support Program.

NYPOZI[®] (filgrastim) is indicated:

- * to decrease the incidence of infection, as manifested by febrile neutropenia, in patients with non-myeloid malignancies receiving myelosuppressive anti-neoplastic drugs.
- * in adult and pediatric patients with cancer receiving myelosuppressive chemotherapy.
- * for the reduction in the duration of neutropenia, fever, antibiotic use and hospitalization, following induction and consolidation treatment for acute myeloid leukemia.
- * to reduce the duration of neutropenia and neutropenia-related clinical sequelae, e.g., febrile neutropenia, in patients undergoing myeloablative therapy followed by bone marrow transplantation.
- * for the mobilization of autologous peripheral blood progenitor cells in order to accelerate haematopoietic recovery by infusion of such cells, supported by NYPOZI[®], after myelosuppressive or myeloablative chemotherapy.
- * for chronic administration to increase neutrophil counts and to reduce the incidence and duration of infection in patients with a diagnosis of congenital, cyclic or idiopathic neutropenia.
- * in patients with HIV infection for the prevention and treatment of neutropenia, to maintain a normal ANC (e.g., between $2 \times 10^9/L$ and $10 \times 10^9/L$).

Consult the Product Monograph at https://pdf.hres.ca/dpd_pm/00063182.PDF for contraindications, warnings, precautions, adverse reactions, interactions, dosing, and conditions of clinical use. The Product Monograph is available by calling 1-833-TANVEX-8 or by consulting the Health Canada's Drug Product Database.

[†]G-CSF=granulocyte colony-stimulating factors.

References: 1. NYPOZI (filgrastim) Product Monograph. TanvexBioPharma USA, Inc. October 8, 2021. 2. <https://www.bd.com/en-us/products-and-solutions/solutions/drug-delivery-systems>. 3. Aapro M, Boccia R, Leonard R, et al. Refining the role of pegfilgrastim [a long-acting G-CSF] for prevention of chemotherapy-induced febrile neutropenia: consensus guidance recommendations. Support Care Cancer. 2017;25(11):3295-3304.

FROM SANDOZ, WORLD'S LEADING BIOSIMILARS AND GENERICS COMPANY

Bio Care™ Patient Support Program

Continuous help and support through your treatment journey



The Bio Care™ Patient Support Program offers services designed to help Canadian patients who have been prescribed NYPOZI® and support them throughout their treatment.

Sandoz offers two options based on patients' needs

1 No patient enrollment required



Pre-approved Financial Assistance

Pre-approved certificates downloadable online for immediate access to financial assistance **CLICK HERE:** www.patientenrolment.ca/sandoz



To visit **SANDOZ** Pre-Approved financial assistance portal, please click or scan this QR code

2 Patient enrollment in the program required



Reimbursement Navigation

Regional expertise to help complete coverage requests.



Financial Assistance

Financial support tailored to each patient to facilitate access to the drug.



Personalized Injection Training

Step-by-step patient self-injection training provided virtually, in a pharmacy or as needed at home.



Educational Material

Treatment and safety information for patients; patient leaflet, self-injection video and guide for patients.



Access to a dedicated Patient Care Specialist

Drug-specific support for reimbursement, financial assistance, injection training, educational materials, education and other questions related to treatment.



Please click or scan this QR code to access the ZIEXTENZO® or NYPOZI® **SANDOZ** Enrollment Form and enroll your patient.

If you have any questions or for additional support please contact the Bio Care™ Patient Support Program

1 833 726-3690 1 833 726-3698 **Monday-Friday 8 AM-8 PM EST**



To access the **NYPOZI®** Patient Leaflet, please click or scan this QR code



To access the **NYPOZI®** Self-injection Video, please click or scan this QR code



To access the **NYPOZI®** Patient Self-injection Guide, please click or scan this QR code

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