

# Now offering the complete G-CSF portfolio

Two treatment alternatives offered by Sandoz for your patients, supported by the Bio Care™ Patient Support Program.



## Nyprozi® filgrastim injection



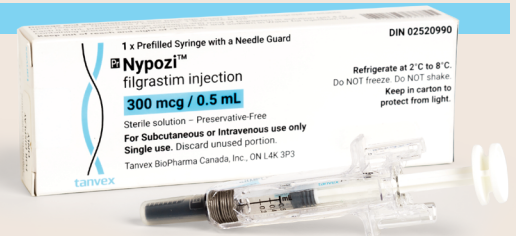
- Not made with natural rubber latex
- Single use pre-filled graduated syringe with a 29 gauge, ½ inch needle, and BD UltraSafe Passive® Needle-Guard.

## ZIEXTENZO® (pegfilgrastim)



- A biosimilar with global experience; launched in 58 countries.
- Single use pre-filled syringe with a 29 gauge, ½ inch needle, and BD UltraSafe Passive® Needle Guard.

	DIN	STRENGTH*	FORMAT	UPC
Nyprozi® 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

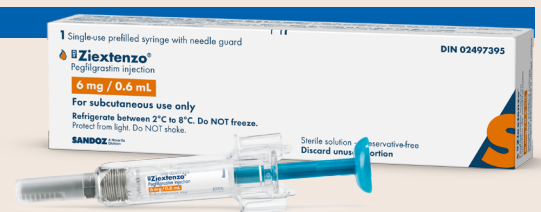


Nyprozi® 480 mcg / 0.8 mL	02521008	480 mcg / 0.8 mL	1 Syringe / Box	372374102018
	02521008	480 mcg / 0.8 mL	10 Syringes / Box	372374102100



\*Contain 600 mcg/mL of filgrastim

ZIEXTENZO® 6 mg / 0.6 mL	02497395	6 mg / 0.6 mL	1 Syringe / Box	057513220739
-----------------------------	----------	---------------	-----------------	--------------



NYPROZI® (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 NYPROZI®, 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 x 10<sup>9</sup>/L and 10 x 10<sup>9</sup>/L).

Consult the Product Monograph at [https://pdf.hres.ca/dpd\\_pm/00063182.PDF](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.

ZIEXTENZO® (pegfilgrastim) is indicated to decrease the incidence of infection, as manifested by febrile neutropenia, in patients with non-myeloid malignancies receiving myelosuppressive anti-neoplastic drugs. Consult the Product Monograph at <https://www.sandoz.ca/en/products/biopharmaceuticals/biosimilars/> for contraindications, warnings, precautions, adverse reactions, interactions, dosing, and conditions of clinical use. The Product Monograph is also available by calling 1-800-343-8839 Ext. 4636.

G-CSF=granulocyte colony-stimulating factors.

References: 1. NYPROZI (filgrastim) Product Monograph. TanvexBioPharma USA, Inc. October 8, 2021. 2. ZIEXTENZO® (pegfilgrastim) Product Monograph. Sandoz Canada Inc. July 9, 2021. 3. Data on file.

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® or ZIEXTENZO® 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.patiëntenrolment.ca/sandoz](http://www.patiëntenrolment.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 question 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® Patient Self-injection Guide**, please click or scan this QR code



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



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



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



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

Ziextenzo® is a registered trademark owned or used under license by Sandoz Canada Inc. BioCare™ is a trademark owned or used under license by Sandoz Canada Inc. Nypozzi® is a registered trademark of Tanvez Bipharma Inc. used under license by Sandoz Canada Inc. Printed in Canada 24-02-MKT002 © Sandoz Canada Inc. 02 2024