YOUR METASTATIC COLORECTAL CANCER MAY HAVE MET ITS MATCH

In a clinical study of wild-type RAS metastatic colorectal cancer, Vectibix® + FOLFOX helped patients live longer than FOLFOX alone (25.8 months compared to 20.2 months).¹

What to expect during treatment with Vectibix®

Indication

Vectibix® (panitumumab) is for treating patients with wild-type RAS metastatic colorectal cancer (cancer that has spread outside of the colon and rectum). RAS status is determined by an FDA-approved test. Wild-type RAS is a cancer without mutations in the KRAS and NRAS genes.

Vectibix® can be used:
• As a first-time treatment given with chemotherapy called FOLFOX (folinic acid, fluorouracil, oxaliplatin)
• Alone, following disease progression with the following chemotherapies: fluoropyrimidine-, oxaliplatin-, and irinotecan-containing chemotherapy

Vectibix® is not to be used to treat patients with tumors that have mutations in the RAS gene (called RAS mutant), or when the RAS mutation status is unknown. Talk to your doctor about your RAS status.

Important Safety Information

In a clinical study, nearly all patients (90%) taking Vectibix® experienced skin rash or other skin reactions. Skin reactions included but were not limited to:
• Acne-like skin rash
• Itching
• Redness
• Skin rash
• Skin peeling

Of these patients, 15% had severe skin reactions that involved, for some, pain, disfigurement, ulceration, or loss of outer layers of skin when receiving Vectibix® alone. Some patients who developed severe skin reactions also developed infections in the blood, skin, fat, or tissue that sometimes resulted in death.

Please see full Important Safety Information on pages 16-17.
Beginning your Vectibix® experience

If your metastatic colorectal cancer is wild-type RAS, Vectibix® in combination with chemotherapy (FOLFOX) may help you live longer.

- Vectibix® + FOLFOX vs FOLFOX alone were studied in 1,183 patients with metastatic colorectal cancer. After the initial results were reported, 512 wild-type RAS patients were analyzed.
- Half the patients on Vectibix® + FOLFOX were still alive at 25.8 months, compared to 20.2 months with FOLFOX alone.

Please see full Important Safety Information on pages 16-17.

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Important Safety Information

Your doctor may need to make changes to your dose to address your side effects or, in the event of severe or life-threatening side effects, stop Vectibix® treatment. It is important that you tell your doctor right away if you have any skin reactions or any signs of infection (such as chills, fever, or increased redness or swelling of an existing skin reaction).
What is metastatic colorectal cancer?

Metastatic colorectal cancer means cancer that began in the colon or rectum and has spread to other parts of the body.

A metastatic colorectal cancer diagnosis can be frightening, but remember that you are not alone in your fight. Colorectal cancer is the third most common cancer in men and women. Up to half of patients with colorectal cancer will have their cancer spread to their liver and/or lung at some point, but cancer can spread to other parts of the body as well.

Treatment options for metastatic colorectal cancer

The good news is that doctors and scientists have made important advances in treating metastatic colorectal cancer. There are treatment options available. Some treatment options, like Vectibix®, are just for specific tumor types.

Read on to understand why Vectibix® is a match for your specific type of metastatic colorectal cancer.

Why Vectibix® is a match for your metastatic colorectal cancer

Not all metastatic colorectal cancers are the same. Some tumor types may respond to certain treatments, while others do not.

Vectibix® is for treating patients with wild-type RAS metastatic colorectal cancer.

Your doctor must perform a RAS test to help determine if Vectibix® is right for you. If your results show that you have a specific kind of metastatic colorectal cancer called wild-type RAS, Vectibix® can help you fight your type of metastatic colorectal cancer.

Important Safety Information

Patients who have metastatic colorectal cancer with RAS-mutant tumors should not receive Vectibix®. Several clinical trials have been done evaluating treatments that block part of the pathway that increases tumor cell growth (anti-epidermal growth factor receptor [EGFR]). Anti-EGFR treatments include Vectibix® and Erbitux® (cetuximab). In studies of these medicines, patients with RAS-mutant tumors experienced serious side effects without any benefit from the treatment. In one study, patients with RAS-mutant tumors who received Vectibix® + FOLFOX did not live as long as patients who received FOLFOX alone.
HOW VECTIBIX® WORKS

Cells receive signals that tell them to create new cells

Cells in the body can receive signals through structures on their surface called receptors. Some receptors receive signals that tell the cell to grow and divide.

One of these growth signal receptors is called epidermal growth factor receptor or EGFR. EGFR can be found on normal cells, including skin and hair follicles.

In metastatic colorectal cancer, cells divide too much

EGFR can also be found on cancer cells. Some cancer cells have more than normal amounts of the EGFR, allowing them to grow and divide out of control.

Vectibix® blocks growth signals

Vectibix® is designed to block growth signals from getting to EGFR on both cancer cells and normal cells. In cancer cells, this blockage may help prevent these cells from growing and surviving.

Important Safety Information

Some patients who were taking Vectibix® developed low levels of certain electrolytes, including:

- Magnesium
- Calcium
- Potassium

Your doctor may check the levels of these electrolytes in your blood while you are on treatment and for up to 2 months after you finish treatment. Your doctor may add other oral or intravenous medications to your Vectibix® treatment.

Please see full Important Safety Information on pages 16-17.
Vectibix® + FOLFOX was studied in a large clinical trial of 1,183 patients with metastatic colorectal cancer versus FOLFOX alone. The study included patients with wild-type and mutant RAS metastatic colorectal cancer. After the initial results were reported, the investigators decided to look at how well Vectibix® worked in these patients with wild-type RAS tumors. The investigators found that Vectibix® did not work for patients with mutant RAS. Vectibix® should not be used to treat patients with mutant RAS, or whose RAS status is not known. The results shown here are only for the patients who were wild-type.

This clinical study showed that Vectibix® + FOLFOX helped patients with wild-type RAS metastatic colorectal cancer.

### Important Safety Information

Vectibix® is given by infusion into a vein. Some patients may develop an infusion reaction, which can be severe and in rare cases has resulted in death. In one clinical study, infusion reactions developed in 4% of patients, and 1% of patients experienced serious infusion reactions. Infusion reactions included:

- Fever
- Chills
- Shortness of breath
- Throat spasms
- Low blood pressure

Depending on how severe the reaction is, your doctor may decide to slow the rate of the infusion, stop the infusion, or stop your Vectibix® treatment completely. Tell your doctor right away if you experience severe diarrhea or dehydration. Some patients treated with Vectibix® and chemotherapy developed kidney failure and other complications because of severe diarrhea and dehydration.

### Results of the clinical trial in patients with wild-type RAS

<table>
<thead>
<tr>
<th>Outcome</th>
<th>Vectibix® + FOLFOX</th>
<th>FOLFOX alone</th>
</tr>
</thead>
<tbody>
<tr>
<td>Living longer</td>
<td>25.8 months</td>
<td>20.2 months</td>
</tr>
<tr>
<td>Response to treatment</td>
<td>58%</td>
<td>45%</td>
</tr>
<tr>
<td>Longer time tumors not growing</td>
<td>10.1 months</td>
<td>7.9 months</td>
</tr>
<tr>
<td>More patients tumors shrunk</td>
<td>58%</td>
<td>45%</td>
</tr>
</tbody>
</table>

*Survival events were measured in 82% of patients.
TALK TO YOUR DOCTOR ABOUT THE POSSIBLE SIDE EFFECTS OF VECTIBIX®

Many patients experience a skin rash, which may be severe or life-threatening.

In clinical studies, 90% of patients using Vectibix® experienced some form of skin rash or other skin reactions. Severe or life-threatening skin reactions have been reported.

**SKIN REACTIONS INCLUDED BUT WERE NOT LIMITED TO:**

- Acne-like skin rash
- Redness
- Skin rash
- Skin peeling
- Nail infections
- Openings in the skin
- Dry skin
- Itching

Fifteen percent of these patients had severe skin reactions, which involved pain, disfigurement, ulceration, or loss of outer layers of skin. Some patients who developed severe skin reactions also developed infections in the blood, skin, fat, or tissue that sometimes resulted in death.

Depending on the severity of the rash, your doctor may choose to adjust your dose, delay your next dose, or stop your treatment. It is important that you immediately report skin rash changes to your doctor.

**Precautions to take while receiving Vectibix®**

While you are receiving Vectibix® and for 2 months after your treatment ends, take the following precautions:

- Avoid the sun when possible, and wear a hat and sunscreen when you are out in the sun.
- Use mild lotions or creams.
- Apply over-the-counter topical treatments, such as hydrocortisone creams.

Talk to your doctor if you experience any side effects.

**Important Safety Information**

Lung disease, including fatal lung disease, occurred in 1% or less of patients who had taken Vectibix®. Tell your doctor if you have problems breathing, wheezing, or a cough that doesn’t go away or keeps coming back. If you have had lung problems in the past, be sure to tell your doctor. Your doctor may decide to stop Vectibix® treatment.

Being in the sun may make skin reactions worse. Wear sunscreen and protective clothing (such as a hat) and avoid direct sunlight while you are on treatment with Vectibix®. Tell your doctor if you have new or worsening skin reactions.

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Vectibix® is given as an infusion into a vein every 2 weeks.

Your Vectibix® dose is given as an infusion by a health care professional every 2 weeks. It may be given during the same visit as your chemotherapy.

For most patients, the first dose of Vectibix® is given over 60 minutes.

After that, Vectibix® may take 30-60 minutes, based on how well you tolerate the medicine.

Administration will take 90 minutes or more for patients who need a larger dose of Vectibix®.

Your doctor may adjust your Vectibix® dose and infusion time based on how well you tolerate the medicine.

Please see full Important Safety Information on pages 16-17.
NEED HELP FINDING FINANCIAL RESOURCES FOR VECTIBIX®?

THE AMGEN FIRST STEP™ PROGRAM

The Amgen FIRST STEP™ Program can help eligible commercially insured patients cover their out-of-pocket prescription costs, including deductible, co-insurance, and co-payment.*

• $0 out of pocket for first dose or cycle
• $5 out of pocket for subsequent doses or cycles, up to the brand program benefit maximum. See AmgenFIRSTSTEP.com for terms and conditions
• No income eligibility requirement

*Terms, conditions, and program maximums apply. This program is not open to patients receiving prescription reimbursement under any federal-, state-, or government-funded healthcare program. Not valid where prohibited by law.

AMGEN ASSIST 360™

If you’ve been prescribed an Amgen medication, you might have questions about your medicine, how it may be covered by your insurance, or resources within your community†. That’s why we created Amgen Assist 360™—to support you in every way we can, so you can focus on what’s most important to you.

†Resources include referrals to independent nonprofit patient assistance programs. Eligibility for resources provided by independent nonprofit patient assistance programs is based on the nonprofits’ criteria. Amgen has no control over these programs and provides referrals as a courtesy only.

SEE HOW WE CAN HELP
CALL 1-888-4ASSIST (1-888-427-7478)
Monday to Friday 9:00 am to 8:00 pm ET
www.amgenassist360.com/patient/vectibix-cost-assistance/

SUPPORT GROUPS FOR PATIENTS WITH COLORECTAL CANCER

American Cancer Society
Cancer information, programs, and services for patients and caregivers
Call: 800-227-2345
Visit: www.cancer.org

Colon Cancer Alliance
A leader in patient support and empowerment, offering information, resources, and tools to help patients and families
Call: 877-422-2030
Visit: www.ccalliance.org

Fight Colorectal Cancer
A nonprofit organization primarily focused on advocacy for colorectal cancer patients
Call: 877-427-2111
Visit: www.fightcolorectalcancer.org

Colontown
An online support community of more than 50 Facebook groups for patients and caregivers
Visit: www.colontown.org

Amgen does not endorse and is not responsible for the content included in these resources.
IMPORTANT SAFETY INFORMATION

In a clinical study, nearly all patients (90%) taking Vectibix® experienced skin rash or other skin reactions. Skin reactions included but were not limited to:

- Acne-like skin rash
- Itching
- Redness
- Skin rash
- Skin peeling

Of these patients, 15% had severe skin reactions that involved, for some, pain, disfigurement, ulceration, or loss of outer layers of skin when receiving Vectibix® alone. Some patients who developed severe skin reactions also developed infections in the blood, skin, fat, or tissue that sometimes resulted in death.

Your doctor may need to make changes to your dose to address your side effects or, in the event of severe or life-threatening side effects, stop Vectibix® treatment. It is important that you tell your doctor right away if you have any skin reactions or any signs of infection (such as chills, fever, or increased redness or swelling of an existing skin reaction).

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Some patients who were taking Vectibix® developed low levels of certain electrolytes, including:

- Magnesium
- Calcium
- Potassium

Your doctor may check the levels of these electrolytes in your blood while you are on treatment and for up to 2 months after you finish treatment. Your doctor may add other oral or intravenous medications to your Vectibix® treatment.

Patients who had taken Vectibix® reported. Tell your doctor if you have any vision changes or eye problems. If you experience any of these side effects or they worsen, your doctor should interrupt or discontinue Vectibix®.

In a study of patients treated for mCRC, the addition of Vectibix® to the combination of Avastin® (bevacizumab) and chemotherapy caused patients to experience severe side effects and to not live as long as patients receiving only Avastin® and chemotherapy. Do not take Avastin® with Vectibix®.

Important Safety Information (continued)

Depending on how severe the reaction is, your doctor may decide to slow the rate of the infusion, stop the infusion, or stop your Vectibix® treatment completely.

Tell your doctor right away if you experience severe diarrhea or dehydration. Some patients treated with Vectibix® and chemotherapy developed kidney failure and other complications because of severe diarrhea and dehydration.

Tell your doctor if you have problems breathing, wheezing, or a cough that doesn’t go away or keeps coming back. If you have had lung problems in the past, be sure to tell your doctor. Your doctor may decide to stop Vectibix® treatment.

Some moderate to severe side effects happened at a higher rate for Vectibix® patients, including acne-like rash, diarrhea, dehydration, painful ulcers and mouth sores, and abnormally low levels of potassium and magnesium in the blood.

Serious or potentially fatal blood clots that traveled to the lungs occurred more in Vectibix®-treated patients, and less than 1% of Vectibix®-treated patients died.

Because of the side effects experienced, patients receiving Vectibix®, Avastin®, and chemotherapy received less chemotherapy for the first 24 weeks of the study compared with those receiving Avastin® and chemotherapy.

Vectibix® can cause harm to an unborn child. Use effective birth control to avoid pregnancy while taking Vectibix® and for at least 2 months after the last dose.

In patients who received Vectibix® alone, the most commonly reported side effects (experienced by 20% or more of patients) were different types of skin rash, infections at the side of the nail beds of the fingers or toes, fatigue (extreme tiredness), nausea, and diarrhea.

In patients who received Vectibix® + FOLFOX, the most commonly reported side effects (experienced by 20% or more of patients) were diarrhea, mouth sores, inflammation of mucous membranes, weakness, infection of the nail beds, loss of appetite, low magnesium, low potassium, rash, acne-like skin rash, itching, and dry skin. The most common serious side effects were diarrhea and dehydration.

Please read the full Prescribing Information and discuss it with your doctor.
Indication

Vectibix® (panitumumab) is for treating patients with wild-type RAS metastatic colorectal cancer (cancer that has spread outside of the colon and rectum). RAS status is determined by an FDA-approved test. Wild-type RAS is a cancer without mutations in the KRAS and NRAS genes. Vectibix® can be used:

- As a first-time treatment given with chemotherapy called FOLFOX (folinic acid, fluorouracil, oxaliplatin)
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Please visit Vectibix.com for more information.

References:
1. Vectibix® (panitumumab) prescribing information, Amgen.