YOUR INTRODUCTION TO

"TRAZIMERA"

(trastuzumab)







Getting started on my TRAZIMERA treatment

Starting any new treatment can be a challenge—which is why it's important for you to reach out for support. This TRAZIMERA brochure has been designed with exactly that in mind: to help support and inform you on the medicine you've been prescribed.

Be sure to read this brochure to learn the basics about TRAZIMERA, and remember to keep it handy to help you better understand your treatment and how to cope with your condition. Also, be honest with yourself and your healthcare team about how you're doing, and speak to them when you have any questions or concerns about your treatment plan.

What is TRAZIMERA used for?

- TRAZIMERA is used for certain patients with gastric cancer that has spread to other parts or organs of the body to slow down the growth of specific gastric cancer cells that produce large amounts of HER2 protein
- TRAZIMERA is used in combination with chemotherapy (capecitabine or intravenous 5-fluorouracil and cisplatin) for the treatment of gastric cancer that has spread to other parts or organs of the body



When should TRAZIMERA be used?

- Patients whose gastric cancer tumour cells produce large amounts of the HER2 protein can use TRAZIMERA
- TRAZIMERA is used in combination with chemotherapy (capecitabine or intravenous 5-fluorouracil and cisplatin) for the treatment of gastric cancer that has spread to other parts or organs of the body in patients that have not received prior anti-cancer treatment for their disease

How does TRAZIMERA work?

TRAZIMERA is part of a family of medicines called monoclonal antibodies. Monoclonal antibodies have the ability to attach to proteins on cancer cells.

TRAZIMERA attaches to the HER2 receptor on the cancer cell, and it works to help stop the growth of the cancer cells and possibly destroy them.

What formats are available for TRAZIMERA?

TRAZIMERA is available as sterile powder to be reconstituted with a diluent.

- 150 mg vial of TRAZIMERA
- 440 mg vial of TRAZIMERA

The vial stopper is not manufactured with natural rubber latex.





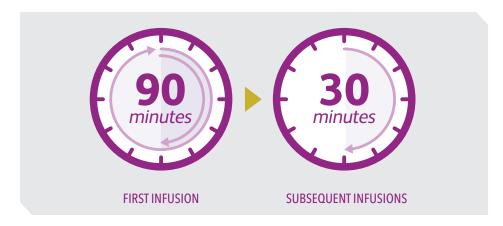
How will I receive TRAZIMERA?

TRAZIMERA is given as an intravenous (IV) infusion (through a needle placed in a vein in the arm or hand).

How often will I receive TRAZIMERA?

Your registered nurse will give your dose of TRAZIMERA at regular intervals determined by your physician (usually every 3 weeks).

The first time your TRAZIMERA infusion is given, it will take about 90 minutes. If you tolerate this infusion well, the following infusions after that may require less time, usually about 30 minutes.



Your TRAZIMERA treatment period and how long it takes will depend on your response. Your physician will monitor your response and decide how many rounds of treatment you will receive.

Important safety information

What should I know before I take TRAZIMERA?

Do not use TRAZIMERA if you are allergic to trastuzumab, Chinese Hamster Ovary cell proteins, or any of the other ingredients.

To help avoid side effects and ensure proper use, talk to your healthcare professional before you take TRAZIMERA

Talk about any health conditions or problems you may have, including if you:

- have ever had a bad reaction to TRAZIMERA, benzyl alcohol, or any of the inactive ingredients
- are allergic to other medicines, food and dyes
- are taking any other medicines, including those not prescribed by your doctor
- have any other illness or diseases, such as heart problems, heart disease, breathing problems or lung disease
- are pregnant, plan to become pregnant or are breast-feeding a child. Please note that a reduction in the amount of amniotic fluid has been observed in pregnant women receiving trastuzumab
- have difficulty breathing at rest





Important safety information

What are possible side effects of TRAZIMERA?

These are not all the possible side effects that you may feel when taking TRAZIMERA. If you experience any side effects not listed here, contact your healthcare professional. Unwanted effects are possible with all medicines. Talk to your doctor, nurse or pharmacist if you are worried about side effects or find them very bothersome, and report any new or continuing symptoms to your doctor immediately. Your doctor will be able to tell you what to do and may be able to help you with these side effects.

Some unwanted effects happen during the first infusion or shortly after it is completed. The effects usually do not last long but may need treatment. The infusion may be stopped, and may be restarted and/or given over a longer time.

These unwanted effects related to the infusion may include:

Itching

Dizziness

Wheezing

Racing heart

Taking certain medications before the next infusion of TRAZIMERA may prevent these unwanted effects.

In the main clinical study in gastric cancer, the most common unwanted effects which are known to be associated with both the chemotherapy drugs used in the study and with trastuzumab administration were:

- Stomach disorders such as nausea, vomiting, diarrhea and constipation
- Blood disorders such as neutropenia (reduced number of white blood cells), anemia (reduced number of red blood cells) and thrombocytopenia (reduced number of platelet cells [colourless blood cells that play an important role in blood clotting]).

Call your doctor immediately if you notice any of the following:

- Shortness of breath
- Increased cough
- Swelling of the legs as a result of water retention
- Diarrhea—if you have an extra four bowel movements each day or any diarrhea at night
- Symptoms of infection that include:
- Fever (a temperature of 38°C or greater)
- Any redness or swelling
- Pain when you pass urine

- Sore throat
- Cough
- Symptoms of an allergic reaction that include:

Closing of the throat

Rash

Swelling of lips and tongue

- Dizziness

Hives

Fast heartbeat

For more information on possible side effects of TRAZIMERA, please refer to the Package Insert provided by your healthcare team.





Important safety information

Serious warnings and precautions



MEDICATION ERRORS

There is a risk of medication errors between TRAZIMERA (trastuzumab) and Kadcyla® (trastuzumab emtansine). Verify with the healthcare provider that the recommended TRAZIMERA (trastuzumab) dose and NOT Kadcyla (trastuzumab emtansine) dose is used.



CARDIOTOXICITY (HARM TO THE HEART)

TRAZIMERA can result in the development of heart problems, including heart failure. The appearance of heart failure can be delayed and can occur after treatment with TRAZIMERA is completed. In early breast cancer, the incidence of cardiac dysfunction was higher in patients who received trastuzumab plus chemotherapy versus chemotherapy alone, with higher risk when trastuzumab was administered together with a taxane following an anthracycline and cyclophosphamide. In patients with breast cancer that has spread to other parts or organs of the body, the incidence and severity of cardiac dysfunction was particularly high in patients who received trastuzumab at the same time as anthracyclines and cyclophosphamide. You should have your heart function evaluated by your doctor before and during treatment with TRAZIMERA.



INFUSION REACTIONS; LUNG PROBLEMS

Some patients have had serious infusion reactions and lung problems; infusion reactions causing death have been reported. In most cases, these reactions occurred during or within 24 hours of receiving trastuzumab. Your TRAZIMERA infusion should be temporarily stopped if you have shortness of breath or very low blood pressure. Your doctor will monitor you until these symptoms go away. If you have a severe allergic reaction, swelling, lung problems, inflammation of the lung, or severe shortness of breath, your doctor may need to completely stop your TRAZIMERA treatment.



TOXICITY TO FETUS (UNBORN BABY)

TRAZIMERA can cause harm to the fetus (unborn baby), in some cases death of the fetus, when taken by a pregnant woman. Women who could become pregnant need to use effective birth control methods during TRAZIMERA treatment and for at least 7 months after treatment with TRAZIMERA. Nursing mothers treated with TRAZIMERA should discontinue nursing or discontinue TRAZIMERA.

Preparing for my next appointment

It's important to ask questions and let your healthcare team know if you have any concerns about your treatment. Use the space below to write down anything you would like to bring up with your team at any of your next few visits.

1.			
2.			
3.			
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8.			
9.			
10.			



My healthcare team contact information

 Name:
 Phone #:

 Name:
 Phone #:



Support may help

Support may help you navigate your treatment experience. If you'd like to join a support group, ask your healthcare team if there's one in your area.

Additional resources

Canadian Cancer Society

The Canadian Cancer Society (CCS) is a national, community-based organization that provides information and support services to patients and families affected by cancer.

The CCS' online community—Cancerconnection.ca—is a place where patients and families affected by cancer can share their experiences and build supportive relationships. No matter where you are, you can connect with others online and know that you are not alone.

Visit www.cancerconnection.ca or www.cancer.ca, or call 1-888-939-3333.

My Gut Feeling

My Gut Feeling is a support network for patients with gastric cancer—also called stomach cancer—as well as their caregivers.

Visit www.mygutfeeling.ca or call 1-647-478-5414.

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Pfizer Liaison

Patient Support Program

Connecting you to resources that support your treatment and complement the care provided by your healthcare team

- Reimbursement navigation and assessment
- Coordination of insurance benefits
- Financial assistance*
- Treatment information

To enrol into Pfizer Liaison, contact us by: Phone 1-844-616-6888; Fax 1-844-636-6888; or Email pfizerliaison@bayshore.ca



For more information, please refer to mypfizer.ca



Program administered by Bayshore Healthcare Ltd.

* Financial assistance cannot be guaranteed





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