I’m hopeful. I’m determined. I’m ready.
What is ERLEADA® (apalutamide)?

ERLEADA® is a prescription medicine used for the treatment of prostate cancer:

- That has spread to other parts of the body and still responds to a medical or surgical treatment that lowers testosterone

OR

- That has not spread to other parts of the body and no longer responds to a medical or surgical treatment that lowers testosterone

It is not known if ERLEADA® is safe and effective in females.

It is not known if ERLEADA® is safe and effective in children.

Important Safety Information

ERLEADA® may cause serious side effects including:

- Heart disease, fractures and falls, and seizure

- The most common side effects of ERLEADA® include feeling very tired, joint pain, rash—tell your healthcare provider if you get a rash, decreased appetite, fall, weight loss, hypertension, hot flash, diarrhea, fracture

Please see the Important Safety Information on pages 13-15 and click here to see the full Important Product Information for ERLEADA®.
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Please see the Important Safety Information on pages 13-15 and click here to see the full Important Product Information for ERLEADA®.
You and your doctor have made an important decision in your fight against prostate cancer

Living with prostate cancer is challenging.

The treatment decision made by you and your doctor is an important step in continuing that fight. The fight against prostate cancer and starting a new treatment isn’t easy. Know that support is available to you along the way, beginning with this brochure.

Inside, you’ll find helpful and practical information for you and your loved ones. You’ll also discover useful tools and support services to help you get started and stay on track with your therapy.

So stay hopeful and determined. Now you have an option to help you keep fighting.

Please see the Important Safety Information on pages 13-15 and click here to see the full Important Product Information for ERLEADA® (apalutamide).
About prostate cancer

Men who are first diagnosed with prostate cancer that has not spread beyond the prostate have several treatment options. Your individual condition and other factors are considered when choosing a treatment course. Options include:

**ACTIVE SURVEILLANCE**
A treatment plan that involves closely monitoring the cancer but not giving any treatment unless there are changes in test results that show the condition is getting worse.

Certain exams, such as digital rectal exam (DRE), prostate-specific antigen (PSA) blood tests, and sometimes biopsies, are done on a regular schedule.

**WATCHFUL WAITING**
This treatment plan includes monitoring the patient’s condition but usually involves fewer tests and not giving treatment unless symptoms appear or change.

**SURGERY**
Prostatectomy is a surgery to remove part or all of the prostate and some of the tissue around it.

**RADIATION THERAPY**
Radiation therapy uses high-energy rays or particles to kill cancer cells.

The majority of men respond to treatment at this stage and don’t need further treatment. For some men, the cancer may progress at some point.

Please see the Important Safety Information on pages 13-15 and click here to see the full Important Product Information for ERLEADA® (apalutamide).
If the cancer continues to progress:

These men may receive hormone treatment called androgen deprivation therapy, or ADT. ADT is a treatment given to reduce or block the production and action of male hormones in the body called androgens, such as testosterone, which can help fuel prostate cancer cells.

There are different types of ADT. Two types that work by reducing testosterone are:

Surgical
- Orchiectomy (surgery to remove the testicles)

Medical
- There are several medical treatments that work to lower testosterone by reducing androgen production by the testicles or blocking the action of androgen in the body
  - One type: Medications called gonadotropin-releasing hormone (GnRH) analogs
  - You may be familiar with Lupron Depot® (leuprolide acetate for depot suspension), a type of long-acting GnRH analog that is given as an injection
  - Ask your doctor which type of ADT you have been receiving or have received

NOTE: Lupron Depot® is provided as an example of ADT and is not an endorsement by Janssen Biotech, Inc. Lupron Depot® (leuprolide acetate for depot suspension) is a registered trademark of AbbVie Inc.

ADT is often an effective treatment. After time, some prostate cancer can adapt and progress. When that happens, another treatment needs to be considered.

Please see the Important Safety Information on pages 13-15 and click here to see the full Important Product Information for ERLEADA® (apalutamide).
What is nmCRPC?

When prostate cancer progresses
After initial treatment (i.e., surgery or radiation), men may receive medical or surgical treatments that lower testosterone, also referred to as androgen deprivation therapy (ADT).

ADT includes treatments to suppress or block the production or action of male hormones called androgens, of which testosterone is the primary androgen. While ADT is often effective, in certain men prostate cancer adapts and can progress.

About nmCRPC
Prostate-specific antigen (PSA) is one of the ways your doctor may monitor your prostate cancer. Often, PSA levels rise, which could be one of the indicators that the cancer may be progressing. Bone and other types of scans are used to detect whether the cancer has spread to different parts of the body.

Prostate cancer that has not spread to other parts of the body and no longer responds to a medical or surgical treatment that lowers testosterone is called non-metastatic castration-resistant prostate cancer or nmCRPC.

- Scans showing no sign of cancer metastasizing (spreading)
- Have had a surgical treatment or are currently on a medical treatment that lowers testosterone
- Rising PSA levels while having low testosterone levels in the blood

Please see the Important Safety Information on pages 13-15 and click here to see the full Important Product Information for ERLEADA® (apalutamide).
What is metastasis?

Developing metastasis

Metastasis is the spread of cancer from the place where it first formed to another part of the body. Men with nmCRPC (non-metastatic castration-resistant prostate cancer) are at risk of developing metastasis.

The most common sites where prostate cancer can spread are bones, lymph nodes, liver, lungs, and brain.

Talk to your doctor to find out what metastasis could mean for you.

Please see the Important Safety Information on pages 13-15 and click here to see the full Important Product Information for ERLEADA® (apalutamide).
ERLEADA® (apalutamide) + ADT helped certain patients live without metastasis 2 years longer than placebo + ADT

In a clinical trial, ERLEADA® + ADT* delayed the spread of cancer to other parts of the body (metastasis) or death by 2 years (24.3 months) compared with placebo† + ADT.

**MEDIAN‡ MONTHS:** Median number of months living without metastasis.

16.2 MONTHS PLACEBO + ADT

40.5 MONTHS ERLEADA®+ ADT

24.3 ADDITIONAL MONTHS VS PLACEBO + ADT

*ADT includes medical or surgical treatments that lower testosterone.

†Pronounced “pluh-see-bow”: a pill that looks like “real” medicine but contains nothing to affect health.

‡Median means that for 50% of the patients, living without metastasis was longer than 40.5 months, and for 50% of the patients, it was shorter than 40.5 months.

ERLEADA® + ADT was compared with placebo + ADT in a clinical trial of more than 1200 men with non-metastatic castration-resistant prostate cancer (nmCRPC).

One group of men received ERLEADA® (240 mg once daily) with ADT (had surgical treatment or were receiving treatment that lowers testosterone). The other group of men received a placebo with ADT.

Please see the Important Safety Information on pages 13-15 and click here to see the full Important Product Information for ERLEADA®.
The clinical study also evaluated these additional measures:

**Time to Metastasis**
Length of time from when patients began study to when prostate cancer had spread to other parts of the body (based on imaging).

<table>
<thead>
<tr>
<th>Median Months</th>
<th>ERLEADA® + ADT</th>
<th>Placebo + ADT</th>
</tr>
</thead>
<tbody>
<tr>
<td>40.5</td>
<td>VS</td>
<td>16.6</td>
</tr>
</tbody>
</table>

**Progression-Free Survival**
Length of time patients lived without their prostate cancer spreading to local or distant parts of the body or death.

<table>
<thead>
<tr>
<th>Median Months</th>
<th>ERLEADA® + ADT</th>
<th>Placebo + ADT</th>
</tr>
</thead>
<tbody>
<tr>
<td>40.5</td>
<td>VS</td>
<td>14.7</td>
</tr>
</tbody>
</table>

**Overall Survival**
Length of time patients lived after starting treatment as part of the study.

This study is ongoing and continues to evaluate overall survival.

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**Important Safety Information**

Before taking ERLEADA® (apalutamide), tell your healthcare provider about all your medical conditions, including if you:

- Have a history of heart disease
- Have high blood pressure
- Have diabetes
- Have abnormal amounts of fat or cholesterol in your blood (dyslipidemia)
- Have a history of seizures, brain injury, stroke, or brain tumors
- Are pregnant or plan to become pregnant. ERLEADA® can cause harm to your unborn baby and loss of pregnancy (miscarriage)
- Have a partner who is pregnant or may become pregnant
  - Males who have female partners who are able to become pregnant should use effective birth control (contraception) during treatment and for 3 months after the last dose of ERLEADA®
  - Males should use a condom during sex with a pregnant female
- Talk with your healthcare provider if you have questions about birth control.
- Are breastfeeding or plan to breastfeed. It is not known if ERLEADA® passes into breast milk

Please see the Important Safety Information on pages 13-15 and click here to see the full Important Product Information for ERLEADA®.
How ERLEADA® (apalutamide) works

See how ERLEADA® + ADT fight prostate cancer together

Androgens can fuel cancer growth.

- Androgens are male hormones, primarily testosterone, that are needed for the prostate to function normally.
- However, when androgens attach to androgen receptors, they can help fuel prostate cancer cell growth.

The goal of ADT is to lower testosterone levels, but in certain cases, the cancer adapts.

- Medical or surgical treatments that lower testosterone are also referred to as androgen deprivation therapy (ADT). ADT includes treatment to suppress or block the production or action of male hormones called androgens, primarily testosterone.
- While ADT is often effective, in certain men prostate cancer adapts to low levels of androgens.

ERLEADA® works differently than ADT.

- ERLEADA® blocks androgens from attaching to receptors to help prevent cancer cells from growing.
- ERLEADA®, an androgen receptor inhibitor, is the first prescription medicine approved for men with nmCRPC.

ERLEADA® + ADT: working together to lower androgens that can help fuel prostate cancer.

Please see the Important Safety Information on pages 13-15 and click here to see the full Important Product Information for ERLEADA®.
Tell your healthcare provider about all the medicines you take, including prescription and over-the-counter medicines, vitamins, and herbal supplements. ERLEADA® (apalutamide) can interact with many other medicines.

You should not start or stop any medicine before you talk with the healthcare provider that prescribed ERLEADA®.

Know the medicines you take. Keep a list of them with you to show to your healthcare provider and pharmacist when you get a new medicine.

Please see the Important Safety Information on pages 13-15 and click here to see the full Important Product Information for ERLEADA®.
Before taking ERLEADA® (apalutamide), tell your healthcare provider about all your medical conditions, including if you:

- Have a history of heart disease
- Have high blood pressure
- Have diabetes
- Have abnormal amounts of fat or cholesterol in your blood (dyslipidemia)
- Have a history of seizures, brain injury, stroke, or brain tumors
- Are pregnant or plan to become pregnant. ERLEADA® can cause harm to your unborn baby and loss of pregnancy (miscarriage)
- Have a partner who is pregnant or may become pregnant
  - Males who have female partners who are able to become pregnant should use effective birth control (contraception) during treatment and for 3 months after the last dose of ERLEADA®
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  Talk with your healthcare provider if you have questions about birth control.
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Tell your healthcare provider about all the medicines you take, including prescription and over-the-counter medicines, vitamins, and herbal supplements. ERLEADA® can interact with many other medicines. You should not start or stop any medicine before you talk with the healthcare provider that prescribed ERLEADA®.

Know the medicines you take. Keep a list of them with you to show to your healthcare provider and pharmacist when you get a new medicine.
How should I take ERLEADA® (apalutamide)?

- Take ERLEADA® exactly as your healthcare provider tells you
- Your healthcare provider may change your dose if needed
- Do not stop taking your prescribed dose of ERLEADA® without talking with your healthcare provider first
- Take your prescribed dose of ERLEADA® 1 time a day, at the same time each day
- Take ERLEADA® with or without food
- Swallow ERLEADA® tablets whole
- If you miss a dose of ERLEADA®, take your normal dose as soon as possible on the same day. Return to your normal schedule on the following day. You should not take extra tablets to make up the missed dose
- You should start or continue a gonadotropin-releasing hormone (GnRH) analog therapy during your treatment with ERLEADA® unless you have had a surgery to lower the amount of testosterone in your body (surgical castration)
- If you take too much ERLEADA®, call your healthcare provider or go to the nearest hospital emergency room

What are the possible side effects of ERLEADA®?

ERLEADA® may cause serious side effects including:

- **Heart Disease.** Blockage of the arteries in the heart that can lead to death has happened in some people during treatment with ERLEADA®. Your healthcare provider will monitor you for signs and symptoms of heart problems during your treatment with ERLEADA®. Call your healthcare provider or go to the nearest emergency room right away if you get chest pain or discomfort at rest or with activity, or shortness of breath during your treatment with ERLEADA®

Click here to see the full [Important Product Information](#) for ERLEADA®.
Fractures and Falls. ERLEADA® (apalutamide) treatment can cause bones and muscles to weaken and may increase your risk for falls and fractures. Falls and fractures have happened in people during treatment with ERLEADA®. Your healthcare provider will monitor your risks for falls and fractures during treatment with ERLEADA®.

Seizure. Treatment with ERLEADA® may increase your risk of having a seizure. You should avoid activities where a sudden loss of consciousness could cause serious harm to yourself or others. Tell your healthcare provider right away if you have a loss of consciousness or seizure. Your healthcare provider will stop ERLEADA® if you have a seizure during treatment.

The most common side effects of ERLEADA® include:

- Feeling very tired
- Joint pain
- Rash. Tell your healthcare provider if you get a rash
- Decreased appetite
- Fall
- Weight loss
- Hypertension
- Hot flash
- Diarrhea
- Fracture

ERLEADA® may cause fertility problems in males, which may affect the ability to father children. Talk to your healthcare provider if you have concerns about fertility. Do not donate sperm during treatment with ERLEADA® and for 3 months after the last dose of ERLEADA®.

Tell your healthcare provider if you have any side effect that bothers you or that does not go away.

These are not all the possible side effects of ERLEADA®.

Call your doctor for medical advice about side effects. You may report side effects to FDA at 1-800-FDA-1088.

Click here to see the full Important Product Information for ERLEADA®.
How should I take ERLEADA® (apalutamide)?

Take ERLEADA® as directed by your doctor. The recommended dose of ERLEADA® is 240 mg (four 60 mg tablets) taken orally once daily.

- Take ERLEADA® exactly as your healthcare provider tells you
- Your healthcare provider may change your dose if needed
- Do not stop taking your prescribed dose of ERLEADA® without talking with your healthcare provider first
- Take your prescribed dose of ERLEADA® 1 time a day, at the same time each day
- Take ERLEADA® with or without food
- Swallow ERLEADA® tablets whole
- If you miss a dose of ERLEADA®, take your normal dose as soon as possible on the same day. Return to your normal schedule on the following day. You should not take extra tablets to make up the missed dose
- You should start or continue a gonadotropin-releasing hormone (GnRH) analog therapy during your treatment with ERLEADA® unless you have had a surgery to lower the amount of testosterone in your body (surgical castration)
- If you take too much ERLEADA®, call your healthcare provider or go to the nearest hospital emergency room

Please see the Important Safety Information on pages 13-15 and click here to see the full Important Product Information for ERLEADA®.
Once you and your doctor have decided ERLEADA® is right for you

Your ERLEADA® prescription will not be filled at your local retail pharmacy. If your doctor’s office has its own pharmacy, they can fill your prescription and you can pick it up there.

Otherwise, your doctor will send your prescription to a specialty pharmacy. A specialty pharmacy fills prescriptions for certain medicines that are not available at regular pharmacies.

Here’s what will happen:

1. Your doctor orders ERLEADA®.
   - Your doctor’s office will let the specialty pharmacy know that you have been prescribed ERLEADA®
   - Download a list of specialty pharmacies that distribute ERLEADA®

2. Wait for a call from the specialty pharmacy.
   - The specialty pharmacy will call you to arrange delivery of your ERLEADA®. Make sure you return their call so that you receive your medicine on time. (You may want to ask your doctor’s office for the specialty pharmacy’s number so that you recognize it when they call.)
   - If you don’t hear from the specialty pharmacy in a few days, call your doctor’s office

3. Receive your ERLEADA®.
   - Your ERLEADA® will be delivered right to your home in about 2 weeks

Please see the Important Safety Information on pages 13-15 and click here to see the full Important Product Information for ERLEADA®.
Once your doctor decides that ERLEADA® (apalutamide) is right for you, Janssen CarePath can help you find the resources you may need to get started on your medication and stay on track.

**Paying for ERLEADA®**
Janssen CarePath can identify cost support options that may help with managing your out-of-pocket costs—whether you have commercial or private health insurance, government coverage such as Medicare or Medicaid, or have no insurance coverage.

**Getting Started:**
Janssen CarePath can:
- Review your health plan benefits and insurance coverage for ERLEADA®
- Offer treatment education resources
- Connect you with a nurse* to answer questions about treatment with ERLEADA®
- Identify and coordinate with a pharmacy to arrange shipment of ERLEADA® to your home

**Staying on Track:**
We understand how important it is for you to take your medication just as your doctor prescribed. Janssen CarePath provides ongoing support to help you stay on track with your ERLEADA® treatment.
- Personalized refill reminders
- Access to Care4Today® Connect, a helpful medication and appointment tracking and reminder tool
- Information about AdvocacyConnector.com, a Janssen-sponsored website that connects patients and caregivers to national and/or state advocacy groups that offer resources that may be relevant to your needs

**Personalized Account:**
Sign up or log in to your personal Janssen CarePath Account at MyJanssenCarePath.com
- Check your insurance coverage
- Enroll in the Janssen CarePath Savings Program, if eligible
- Sign up for treatment reminders

Please see the Important Safety Information on pages 13-15 and click here to see the full Important Product Information for ERLEADA®.
Get help paying for your ERLEADA® (apalutamide)

At Janssen, we don’t want cost to get in the way of treatment you need. We can help you explore options to lower your out-of-pocket cost for ERLEADA®. No matter what type of insurance you have or even if you don’t have insurance, Janssen CarePath can help explain your medication insurance coverage and benefits, and help find programs that may help you pay for ERLEADA®.

If you use commercial or private health insurance to pay for ERLEADA®:

Janssen CarePath Savings Program for ERLEADA®

If you are eligible, the Janssen CarePath Savings Program may provide instant savings on your out-of-pocket costs for ERLEADA®. Eligible patients **pay $0 per month, with a $15,000 maximum program benefit** per calendar year or one-year supply, whichever comes first. Not valid for patients using Medicare, Medicaid, or other government-funded programs to pay for their medications. Terms expire at the end of each calendar year and may change. There is no income requirement. For full eligibility requirements, please visit Erleada.JanssenCarePathSavings.com.

**ELIGIBLE PATIENTS PAY $0 A MONTH***

Create an online account and enroll in the Janssen CarePath Savings Program at MyJanssenCarePath.com or call a Janssen CarePath Care Coordinator at **1-833-ERLEADA (1-833-375-3232)**.

If you are using a government-funded healthcare program to pay for ERLEADA® or have no insurance coverage and need help paying for your medication:

• Janssen CarePath can provide information about other resources that may be able to help your out-of-pocket medication costs. Call Janssen CarePath to speak with a Care Coordinator or visit JanssenPrescriptionAssistance.com for more information about affordability programs that may be available.

Questions? Call a Janssen CarePath Care Coordinator at **1-833-ERLEADA (1-833-375-3232)**, Monday - Friday, **8:00 AM - 8:00 PM ET**. Multilingual phone support is available.

Please see the Important Safety Information on pages **13-15** and click here to see the full Important Product Information for ERLEADA®.
Talking to your doctor

Always remember that your healthcare team should be your main source of treatment direction and information. You should have an open and honest conversation with them.

Here are some questions to help get you started:

1. Do I have low levels of testosterone?

2. Are my PSA levels rising?

3. Could ERLEADA® (apalutamide) help slow my type of prostate cancer from advancing?

4. Is ERLEADA® right for me?

5. What are the benefits and risks of ERLEADA®?

Please see the Important Safety Information on pages 13-15 and click here to see the full Important Product Information for ERLEADA®.

**TALK** to your doctor and healthcare team to be sure you receive clear instructions and information going forward.

If you have questions or concerns about your condition or treatment, don’t hesitate to:

**CALL** Janssen CarePath at **1-833-ERLEADA (1-833-375-3232)** for resources to help you stay on track. Monday - Friday, 8:00 AM - 8:00 PM ET.

**VISIT** [www.erleada.com](http://www.erleada.com) to find educational tools to help you stay on track.

**LEARN** about prostate cancer and how it can affect caregivers and families at [www.MyProstateCancerRoadmap.com](http://www.MyProstateCancerRoadmap.com).

**CONNECT** with organizations providing information and support at [www.cancer.com](http://www.cancer.com).

Please see the Important Safety Information on pages 13-15 and click here to see the full [Important Product Information](http://www.erleada.com) for ERLEADA®.