

Getting started with XPOVIO® (selinexor)

the first and only FDA-approved oral medicine of its kind

XPOVIO® (selinexor) is a prescription medicine used to treat adults with certain types of diffuse large B-cell lymphoma (DLBCL) that has come back (relapsed) or that did not respond to previous treatment (refractory) and who have received at least 2 prior therapies.

XPOVIO is approved based on patient response rate. There are ongoing studies to confirm the clinical benefit of XPOVIO for this use.

It is not known if XPOVIO is safe and effective in children less than 18 years of age.

What is the most important information I should know about XPOVIO?

Your healthcare provider will do blood tests before you start taking XPOVIO, and often during the first 3 months of treatment, and then as needed during treatment to monitor you for side effects.

Your healthcare provider may change your dose of XPOVIO, stop your treatment for a period of time, or completely stop your treatment if you have certain side effects during treatment with XPOVIO.





What is XPOVIO?

XPOVIO® (selinexor) is a prescription medicine used to treat adults with certain types of diffuse large B-cell lymphoma (DLBCL) that has come back (relapsed) or that did not respond to previous treatment (refractory) and who have received at least 2 prior therapies.

XPOVIO is approved based on patient response rate. There are ongoing studies to confirm the clinical benefit of XPOVIO for this use.

It is not known if XPOVIO is safe and effective in children less than 18 years of age.

What is the most important information I should know about XPOVIO? (continued)

XPOVIO can cause serious side effects, including:

• Low platelet counts. Low platelet counts are common with XPOVIO and can lead to bleeding, which can be severe and can sometimes cause death. Your healthcare provider may prescribe platelet transfusions or other treatments for your low platelet counts.

Tell your healthcare provider right away if you have any bleeding or easy bruising during treatment with XPOVIO.



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What is relapsed or refractory diffuse large B-cell lymphoma (RR DLBCL)?



Diffuse large B-cell lymphoma (DLBCL)

is a cancer that starts in B cells, a type of white blood cell. White blood cells are part of the immune system, which helps the body fight infection and disease. DLBCL can spread to other cells, organs, and tissues in the body.

RR DLBCL is cancer that has come back after treatment (relapse) or stopped responding to certain treatments (refractory).

RR DLBCL is treatable.

When DLBCL relapses, your doctor may start you on another type of treatment to help you get your disease under control.

How will my healthcare provider treat RR DLBCL?



Chemotherapy

Usually taken by mouth, injection, or infusion with or without other treatment to kill cancer cells

Stem cell transplants

Gives patients healthy stem cells (the blood-forming cells in the body) to replace their damaged cells

Cell therapies

A treatment in which
T cells, a type of immune
system cell, are collected
from a patient's blood and
modified in a laboratory.
These modified cells can
now help fight cancer cells
and are returned to the
patient's body via infusion.

Newer therapies

New types of medicines that fight RR DLBCL in different ways

How will my healthcare provider and I choose a treatment?



You and your healthcare provider will decide together which treatments are right for you

Some factors you may consider are:



How long the treatment has been shown to work in patients with RR DLBCL



Other health issues you may have



Possible **side effects** of treatment



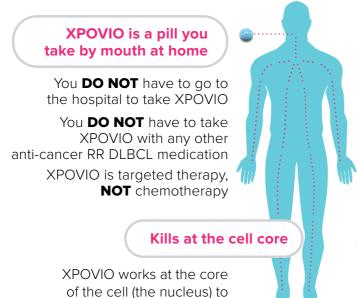
Treatments you have taken before



If you are able to get to a clinic for your treatment

Why XPOVIO® (selinexor)?

XPOVIO is the first and only FDA-approved oral medicine of its kind that may treat RR DLBCL, even if other treatments no longer work for you



Responses were meaningful

29% of patients showed improvement with XPOVIO

The National Comprehensive Cancer Network® (NCCN) recommends selinexor (XPOVIO) for patients with RR DLBCL who have had at least 2 prior lines of systemic therapy and whose disease no longer responds to certain treatment options*

*Referenced with permission from the NCCN Clinical Practice Guidelines in Oncology (NCCN Guidelines®) for B-cell Lymphomas. V1.2023.

© 2023 National Comprehensive Cancer Network, Inc. All rights reserved. Accessed February 9, 2023. To view the most recent and complete version of the NCCN Guidelines, go online to NCCN.org. NCCN makes no warranties of any kind whatsoever regarding their content, use or application and disclaims any responsibility for their application or use in any way.

What is the most important information I should know about XPOVIO? (continued)

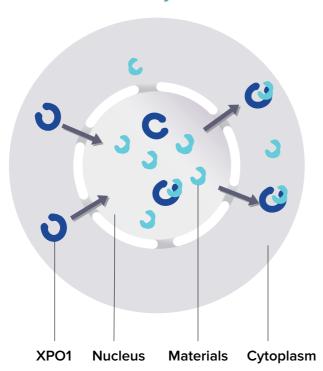
kill some cancer cells

• Low white blood cell counts. Low white blood cell counts are common with XPOVIO and can sometimes be severe. You may have an increased risk of getting bacterial infections during treatment with XPOVIO. If needed, your healthcare provider may prescribe antibiotics if you have signs or symptoms of infection, or may prescribe certain medicines to help increase your white blood cell count.

XPOVIO® (selinexor)

What is XPO1 and why does it matter?

Healthy cell



For illustrative purposes only.

XPO1 is a protein that maintains balance in healthy cells so they can function properly

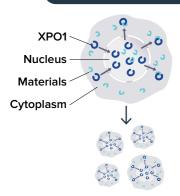
- Cells have important anti-cancer materials that can only work in the cell's core (the nucleus)
- XPO1 is a protein that carries these materials from the nucleus to another part of the cell (the cytoplasm)
- To keep the cell in balance, XPO1 only carries the right amount of anti-cancer materials out of the nucleus

How does XPOVIO® (selinexor) work to block XPO1?

Some cancer cells have too much XPO1



In this cancer cell not exposed to XPOVIO



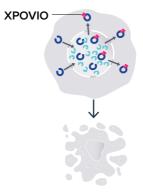
Cancer cell

XPO1 moves too many anti-cancer materials from the nucleus to the cytoplasm, so they can't work to fight the cancer.

Cancer cell growth

The cancer cells are able to grow and survive.

In this cancer cell exposed to XPOVIO



XPOVIO blocks XPO1 to kill the cancer cell at its core

In this cancer cell, XPOVIO stops XPO1 from carrying too many of the important anti-cancer materials out of the nucleus

- Anti-cancer materials stay in the nucleus
- · Cancer cell dies

For illustrative purposes only.

What is the most important information I should know about XPOVIO? (continued)

• Nausea and vomiting and/or diarrhea. Nausea and vomiting and/or diarrhea can occur when you take XPOVIO and can sometimes be severe. You may be at risk for becoming dehydrated and may need treatments. Your healthcare provider may prescribe anti-nausea or anti-diarrhea medicines for you to take before you start and during treatment with XPOVIO.

XPOVIO® (selinexor)



How did patients respond to treatment with XPOVIO® (selinexor)?

In the clinical trial, 134 adults with RR DLBCL were treated with XPOVIO 60 mg on Days 1 and 3 of every week. FDA approval was based upon the results of this trial, and additional trials may be needed.



29%

of patients

whose other treatments stopped working showed improvement when treated with XPOVIO

Response to XPOVIO was evaluated in patients regardless of status (n=39):

- Their age
- The number of treatments they have taken before
- The type of DLBCL they have
- If DLBCL had stopped responding to other treatments
- If they had a stem cell transplant



XPOVIO has been shown to work when taken by itself in patients with RR DLBCL. Patients who responded did not need to take XPOVIO with another anti-cancer medicine.

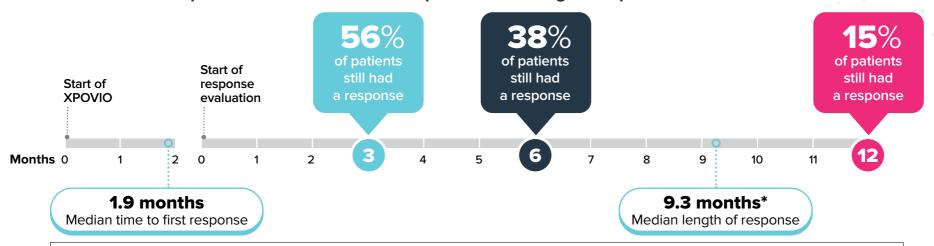
What is the most important information I should know about XPOVIO? (continued)

- Loss of appetite and weight loss. Loss of appetite and weight loss are common with XPOVIO and can sometimes be severe. Tell your healthcare provider if you have a decrease or loss of appetite and if you are losing weight. Your healthcare provider may prescribe medicines or advise on nutritional support.
- **Decreased sodium levels in your blood.** Decreased sodium levels in your blood are common with XPOVIO and can also sometimes be severe. You may not have any symptoms. Your healthcare provider may talk with you about your diet and prescribe IV fluids or salt tablets.



How long did responses to XPOVIO® (selinexor) last?

Patients who responded to XPOVIO had a rapid and meaningful response



*The median duration of response (DOR) was a pre-specified secondary outcome, determined by a particular statistical analysis. Limitations to this analysis for the data from this study include a small number of patients and the effect of data from patients with prolonged remission durations. Approximately half of the responders in this analysis had a DOR lasting less than 3 months.

The analysis of DOR is presented alongside an analysis demonstrating the number of patients responding at certain timepoints (3, 6, 12 months).

The **median** number is the middle point of a set of numbers, in which half the numbers are above the median and half are below.

What is the most important information I should know about XPOVIO? (continued)

• Serious infections. Infections are common with XPOVIO and can be serious and can sometimes cause death. This includes upper or lower respiratory tract infections, such as pneumonia, and an infection throughout your body (sepsis). Tell your healthcare provider right away if you have any signs or symptoms of an infection such as cough, chills, or fever during treatment with XPOVIO.

XPOVIO® (selinexor)

What are the possible side effects with XPOVIO® (selinexor)?

Serious side effects

- Low platelet counts
- · Low white blood cell counts
- Nausea and vomiting
- Diarrhea
- Loss of appetite and weight loss
- Decreased sodium levels in your blood
- Serious infections
- Neurologic side effects

Common side effects

- Tiredness
- Low red blood cell count (anemia). Symptoms may include tiredness and shortness of breath
- Constipation
- Shortness of breath
- Increased blood sugar
- Changes in body salt and mineral levels in your blood
- Changes in kidney and liver function blood tests

These are not all the possible side effects of XPOVIO.

Call your healthcare provider for medical advice about side effects. You may report side effects to the FDA at 1-800-FDA-1088 or fda.gov/medwatch.



In the clinical trial, the amount of time patients took XPOVIO ranged from 1 to 193 weeks, with the median amount of time being 9 weeks.

What is the most important information I should know about XPOVIO? (continued)

Neurologic side effects. XPOVIO can cause dizziness, fainting, decreased alertness, and changes in your mental status, including confusion and decreased awareness of things around you. XPOVIO may also cause problems with thinking (cognitive problems), seeing or hearing things that are not really there (hallucinations), and may cause you to become very sleepy or drowsy. These problems can sometimes be severe and life-threatening. Tell your healthcare provider right away if you get any of these symptoms.



How do I take XPOVIO® (selinexor)?

The recommended dosage of XPOVIO is 60 mg taken by mouth on Days 1 and 3 of each week



Each tablet of XPOVIO is 20 mg



- Days 1 and 3 depend on which day of the week you start XPOVIO. For example, if you start XPOVIO on Tuesday, Tuesday is Day 1 and Thursday is Day 3
- You don't need to take XPOVIO with another anti-cancer medicine for RR DLBCL
- Take your medication as prescribed by your healthcare provider and be sure to let them know how you are feeling along the way
- Be sure to take any medicines prescribed by your healthcare provider before and during treatment with XPOVIO to help prevent nausea and vomiting. Tell your healthcare provider if the prescribed medicine does not control your nausea and vomiting



During treatment, your healthcare provider may change your dose of XPOVIO. Always take XPOVIO exactly as prescribed.

What is the most important information I should know about XPOVIO? (continued)

• **Do not drive or operate heavy or dangerous machinery** until you know how XPOVIO affects you. XPOVIO may cause dizziness and confusion. Take precautions to prevent a fall.

Please see Important Safety Information throughout, and full $\underline{\text{Prescribing Information}} \text{ and } \underline{\text{Medication Guide}}.$



What else should I know about taking XPOVIO® (selinexor)?



Talk to your healthcare provider before you change your dose or stop taking XPOVIO



Swallow XPOVIO whole with water. Never break, chew, crush, or divide the tablet



Take any medicines your healthcare provider prescribes for nausea/vomiting before and during treatment with XPOVIO



Tell your healthcare provider if the medicines don't help with nausea/vomiting



Drink enough fluids during treatment to prevent dehydration



Eat enough calories to prevent weight loss during treatment



If you miss a dose of XPOVIO, take your next dose at your next regularly scheduled day and time



If you vomit after taking a dose of XPOVIO, do not take an extra dose. Take your next dose at your next regularly scheduled day and time



If you take too much XPOVIO, call your healthcare provider right away



Do not share your XPOVIO prescription with other people



Your healthcare provider will do blood tests before you start taking XPOVIO, more often during the first 3 months of treatment, and then as needed

What is the most important information I should know about XPOVIO? (continued)

Common side effects of XPOVIO include:

- tiredness
- low red blood cell count (anemia). Symptoms may include tiredness and shortness of breath
- constipation

- shortness of breath
- increased blood sugar
- changes in body salt and mineral levels in your blood
- changes in kidney and liver function blood tests

These are not all of the possible side effects of XPOVIO.

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



What else should I ask my healthcare team before taking XPOVIO® (selinexor)?

- 1 Which anti-nausea medicines will I take prior to treatment with XPOVIO?
- 2 How often will I need a **blood test** while taking XPOVIO?
- **3** How do I ensure I **stay hydrated** while taking XPOVIO?
- **4** Should I expect to **lose weight** while taking XPOVIO? How much?
- **5** Will my **dose** be changed throughout treatment with XPOVIO?
- **6** How will my **side effects** be managed?
- **7** What should I do if I have a **new side effect or symptom**?
- **8** What should I know if I'm taking **other medications**?



Always ask your healthcare provider any questions you may have about treatment with XPOVIO.

What is the most important information I should know about XPOVIO? (continued)

Before taking XPOVIO, tell your healthcare provider about all of your medical conditions, including if you:

- have or have had a recent or active infection
- have or have had bleeding problems
- are pregnant or plan to become pregnant. XPOVIO can harm your unborn baby
- are taking prescription and over-the-counter medicines, vitamins, and herbal supplements





FOR CAREGIVERS:

How do I take care of myself when I'm caring for someone taking XPOVIO® (selinexor)?

Taking care of a loved one with RR DLBCL can be emotionally and physically demanding. It's important not to lose sight of your own well-being.

A support group that's online or in your local area may help you connect with people who understand what you're going through.

Your loved one's healthcare providers and social worker are there for you to answer your questions or support needs.

(selinexor)

Doing activities like yoga and meditation may help relieve stress.

What is the most important information I should know about XPOVIO? (continued)

Ability to have children: XPOVIO may affect the ability of both women and men to have children. Talk to your healthcare provider if you have concerns about fertility.

Females who are able to become pregnant: Your healthcare provider will check to see if you are pregnant before you start taking XPOVIO. You should use effective birth control (contraception) during treatment with XPOVIO and for 1 week after your last dose, as XPOVIO can harm an unborn baby. Tell your healthcare provider right away if you become pregnant or think you might be pregnant during treatment with XPOVIO. Do not breastfeed during treatment with XPOVIO and for 1 week after your last dose of XPOVIO. It is not known if XPOVIO passes into your breast milk.

FOR CAREGIVERS:

What else should I know about caring for someone taking XPOVIO[®] (selinexor)?

When caring for patients taking XPOVIO, keep in mind:



The dosing schedule for XPOVIO and anti-nausea medicines will be determined by the healthcare provider



Call the healthcare provider if your loved one experiences any side effects



The healthcare team will do **blood tests** before your loved one starts taking XPOVIO, more often during the first 3 months of treatment, and then as needed



Encourage your loved one to **drink lots of fluids and eat nutritious food** while on XPOVIO

What is the most important information I should know about XPOVIO? (continued)

Males with female partners who are able to become pregnant should use effective birth control during treatment with XPOVIO and for 1 week after your last dose.

To report SUSPECTED ADVERSE REACTIONS, contact Karyopharm Therapeutics Inc. at 1-888-209-9326 or FDA at 1-800-FDA-1088 or www.fda.gov/medwatch.



What is KaryForward and how do I join?

KaryForward is a patient support program by Karyopharm Therapeutics dedicated to providing assistance and resources to you and your caregiver for XPOVIO® (selinexor)

KaryForward can help you with:



Insurance Coverage*

- Understand your benefits
- File claims
- Provide support during insurance appeals
- Find out what is covered by your insurance
- Access Karyopharm medications, even if there are unexpected delays or interruptions



Financial Assistance

- Qualify for the XPOVIO Copay Program and pay as little as \$5 for each XPOVIO prescription, or
- If eligible, get XPOVIO at no cost to you



Support and Resources

- Nurse Case Managers who can provide education and support during treatment
- Referrals to additional third-party support, such as transportation assistance



IF YOU'RE READY TO ENROLL OR HAVE QUESTIONS ABOUT KARYFORWARD:

CALL US

1-877-KARY4WD (1-877-527-9493)

Monday through Friday, 8 AM to 8 PM ET

VISIT US

KaryForward.com



^{*}Reimbursement Specialists are available to answer questions about the insurance approval process.

What additional support is available for my caregiver and me?

DLBCL Resources

Leukemia & Lymphoma Society

www.lls.org 800-955-4572

Lymphoma Research Foundation

www.lymphoma.org

800-500-9976

Lymphoma Coalition

www.lymphomacoalition.org

Caregiver Support Resources

Caregiver Action Network

www.caregiveraction.org 202-454-3970

Family Caregiver Alliance

www.caregiver.org 800-445-8106

General Cancer Resources

American Cancer Society

www.cancer.org 800-227-2345

Cancer Care

www.cancercare.org 800-813-HOPE (4673)

Cancer Hope Network

www.cancerhopenetwork.org 877-HOPENET (467-3638)

Cancer Support Community

www.cancersupportcommunity.org 888-793-9355



In order to maintain the independence of these organizations, Karyopharm does not endorse or recommend any of the advocacy groups or services on this list and is not responsible for the content of these sites or services. Always talk to your healthcare team with any questions.

XPOVIO® (selinexor) is the first and only FDA-approved oral medicine of its kind that may treat RR DLBCL even if other treatments no longer work for you

- XPOVIO is a pill you take by mouth at home
- XPOVIO works at the core of the cell (the nucleus) to kill some cancer cells
- Patients who responded to treatment with XPOVIO were shown to have a rapid and meaningful response
- XPOVIO is targeted therapy, not chemotherapy



GET ASSISTANCE AND RESOURCES FOR XPOVIO TREATMENT WITH THE KARYFORWARD® PROGRAM.

CALL

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VISIT

KaryForward.com

What is the most important information I should know about XPOVIO? (continued)

The most serious side effects with XPOVIO include low platelet counts, low white blood cell counts, nausea and vomiting, diarrhea, loss of appetite and weight loss, decreased sodium levels in your blood, serious infections, and neurologic side effects. Common side effects include tiredness, low red blood cell count (anemia), constipation, shortness of breath, increased blood sugar, changes in body salt and mineral levels in your blood, and changes in kidney and liver function blood tests.



