

THE #1

PRESCRIBED SOMATOSTATIN ANALOG (SSA)  
FOR THE TREATMENT OF ACROMEGALY IN THE US\*

## Offers the Confidence of Sustained Control With as Few as 7 Doses a Year in Controlled Patients†

Learn about acromegaly and how Somatuline® Depot may help



Actor portrayal

\*Source: IQVIA APLD patient counts data for January 1, 2015 through April 2022. Data may be subject to change.  
†In patients whose acromegaly is controlled after 3 months of treatment. Controlled is defined as GH level from  $>1.0$  ng/mL to  $\leq 2.5$  ng/mL, normalized IGF-1 level, and satisfactory management of clinical symptoms as determined by the healthcare provider. This dosing interval is based on controlled patients using 8-week dosing intervals after year 1.

### What is SOMATULINE® DEPOT (lanreotide) Injection?

SOMATULINE DEPOT is a prescription medicine used in adults for the long-term treatment of people with acromegaly when surgery or radiotherapy have not worked well enough or a patient is unable to have surgery or radiotherapy.

It is not known if SOMATULINE DEPOT is safe and effective in children.

### IMPORTANT SAFETY INFORMATION

- Do not take SOMATULINE DEPOT if you are allergic to lanreotide.
- SOMATULINE DEPOT may cause serious side effects, including: gallstones, changes to your blood sugar (high or low blood sugar), slow heart rate, high blood pressure, and changes in thyroid function in acromegaly patients.

Please see additional Important Safety Information throughout and accompanying Full Prescribing Information and Patient Information.

Visit [www.somatulinedepot.com/acromegaly/](http://www.somatulinedepot.com/acromegaly/) for more information.



**Somatuline® Depot**

(lanreotide) Injection 60 mg 90 mg 120 mg

# Sustained Control Is Possible With Somatuline<sup>®</sup> Depot

## The Goal of Treatment for Acromegaly Is to Reduce GH and IGF-1 Levels to Normal

Working with your doctor to find a treatment that's best for you is very important in helping to manage your acromegaly. Although acromegaly cannot always be cured with surgery or radiotherapy, it can often be managed with medication. Your doctor may regularly evaluate your growth hormone (GH) and insulin-like growth factor-1 (IGF-1) levels and ask you about your symptoms related to acromegaly.

Actual patient



**"I am glad my IGF-1 levels have improved."**

Watch the video at: [www.somatulinedepot.com/acromegaly/](http://www.somatulinedepot.com/acromegaly/)

*Wade is a real patient who shared his story to help others with acromegaly. Individual results may vary. He has been compensated for his time.*

### IMPORTANT SAFETY INFORMATION (continued)

**Tell your healthcare provider (HCP) if you have any of the following symptoms:**

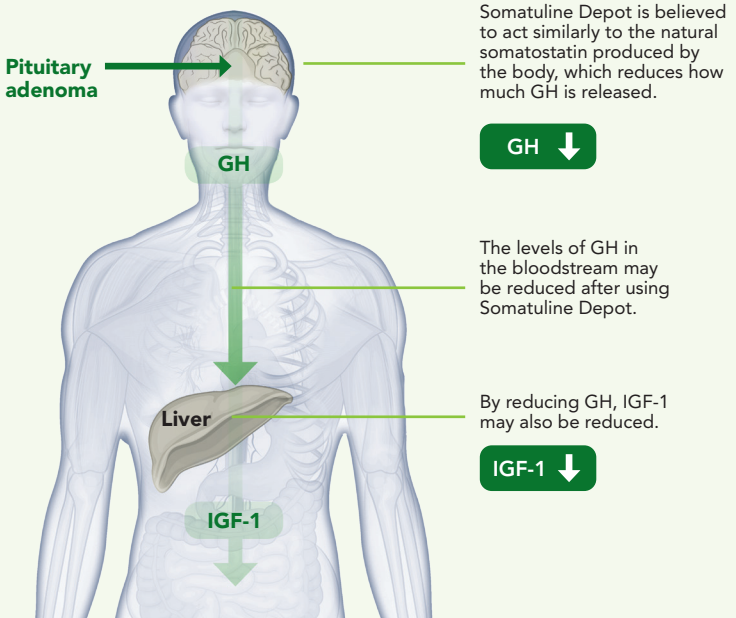
- **Symptoms of gallstones** may include sudden pain in your upper right stomach area (abdomen), sudden pain in your right shoulder or between your shoulder blades, yellowing of your skin and whites of your eyes, fever with chills, and nausea.

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## Somatuline Depot Helps Control the Hormones That Cause Acromegaly

Somatuline Depot is a type of medication called a somatostatin analog, or SSA. After surgery, SSAs are often the first type of medication doctors use to treat acromegaly.

Somatuline Depot works by reducing the GH production in your body. When there is less GH in your body, your liver produces less IGF-1.



### IMPORTANT SAFETY INFORMATION (continued)

**Tell your healthcare provider (HCP) if you have any of the following symptoms: (continued)**

- **Symptoms of high blood sugar** may include increased thirst, increased appetite, nausea, weakness or tiredness, urinating more than normal, and fruity smelling breath.
- **Symptoms of low blood sugar** may include dizziness or lightheadedness, sweating, confusion, headache, blurred vision, slurred speech, shakiness, fast heartbeat, irritability or mood changes, and hunger.



**Somatuline<sup>®</sup> Depot**

(lanreotide) Injection 60 mg 90 mg 120 mg


## Proven Efficacy in Clinical Trials

In a study, Somatuline® Depot lowered GH and IGF-1 levels in people with acromegaly.

### After 4 weeks of treatment\*:

- 63% of patients<sup>†</sup> had a **greater than 50% reduction in GH**
- 25% of patients<sup>†</sup> had **normalized IGF-1 levels**

At the end of the 52-week study, the majority of patients had normal GH or normal IGF-1 (82% and 59%, respectively). 43% had both normal GH and IGF-1.\*



Actual patient who has been compensated for her time



**Remember, Somatuline Depot works by reducing GH and IGF-1 levels in your body. This may take time. Be sure to check with your physician about monitoring your levels.**

\*The primary purpose of the study was to assess GH levels at week 4; however, the study also assessed IGF-1 levels at week 4 and GH and IGF-1 levels at week 52.

<sup>†</sup>83 patients were treated with Somatuline Depot in the study.

### IMPORTANT SAFETY INFORMATION (continued)

**Tell your healthcare provider (HCP) if you have any of the following symptoms: (continued)**

- **Symptoms of slow heart rate** may include dizziness or lightheadedness, fainting or near-fainting, chest pain, shortness of breath, confusion or memory problems, and weakness or extreme tiredness.

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## Before Taking Somatuline Depot

**Before taking Somatuline Depot, tell your healthcare provider (HCP) about all your medical conditions including if you:** have diabetes; have gallbladder, heart, thyroid, kidney or liver problems; are pregnant or plan to become pregnant; or are breastfeeding or plan to breastfeed. It is not known if Somatuline Depot will harm your unborn baby or pass into breast milk. You should not breastfeed if you receive Somatuline Depot and for 6 months after your last dose. Somatuline Depot may affect your ability to become pregnant.

**Tell your HCP about all the medicines you take,** including prescription and over-the-counter medicines, vitamins, and herbal supplements. Somatuline Depot and other medicines may affect each other, causing side effects. Somatuline Depot may affect the way other medicines work, and other medicines may affect how Somatuline Depot works. Your dose of Somatuline Depot or your other medications may need to be changed. If you have diabetes, your HCP may change your dose of diabetes medication when you first start receiving Somatuline Depot or if your dose of Somatuline Depot is changed.

### **Especially tell your HCP if you take:**

- Insulin or other diabetes medicines,
- A cyclosporine (Gengraf, Neoral, or Sandimmune), or
- Medicines that lower your heart rate, such as beta blockers.

Know the medicines you take. Keep a list of them to show your HCP when you get a new medicine.

**Tell your HCP if you have any side effect that bothers you or that does not go away.** These are not all the possible side effects of SOMATULINE DEPOT. For more information, ask your HCP.

### **IMPORTANT SAFETY INFORMATION (continued)**

#### **Tell your healthcare provider (HCP) if you have any of the following symptoms: (continued)**

- SOMATULINE DEPOT can cause the thyroid gland to not make enough thyroid hormone in people with acromegaly. **Symptoms of low thyroid levels** may include fatigue, weight gain, puffy face, being cold all the time, constipation, dry skin, thinning or dry hair, decreased sweating, and depression.

**The most common side effects of SOMATULINE DEPOT in people with acromegaly** include diarrhea; stomach (abdominal) pain; nausea; and pain, itching, or a lump at the injection site.

SOMATULINE DEPOT may cause dizziness. If this happens, do not drive a car or operate machinery.

Tell your HCP right away if you have signs of an allergic reaction after receiving SOMATULINE DEPOT, including swelling of your face, lips or tongue; breathing problems; fainting, dizziness or feeling lightheaded (low blood pressure); itching; skin flushing or redness; rash; or hives.

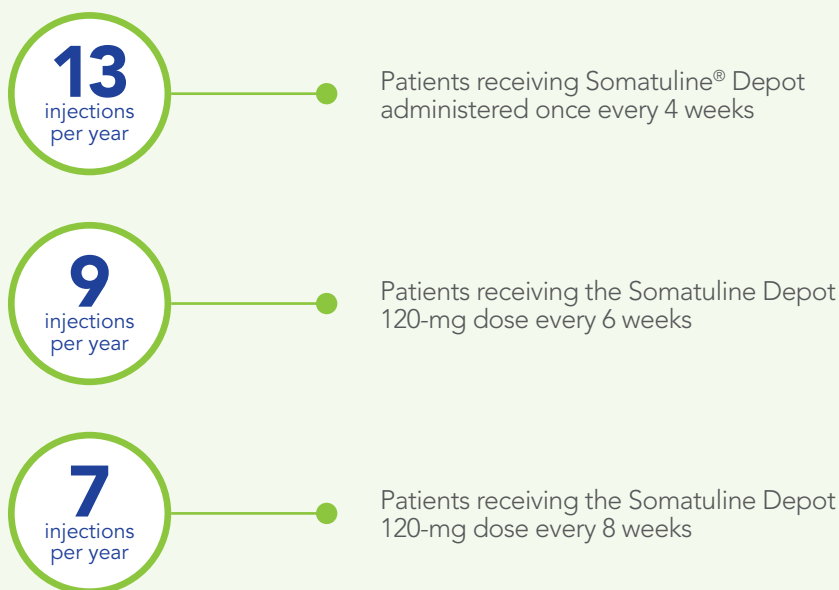


# As Few as 7 Doses a Year for Controlled Patients\*†

If Your Hormones and Symptoms Are Controlled,\*† Your Doctor May Offer to:

- Continue giving you the same dose, or
- Increase the dose to 120 mg and give you injections less often
  - Time between injections may be extended to every 6 or 8 weeks

Ask your doctor which option is best for you.



\*In patients whose acromegaly is controlled after 3 months of treatment. Controlled is defined as GH level from  $>1.0$  ng/mL to  $\leq 2.5$  ng/mL, normalized IGF-1 level, and satisfactory management of clinical symptoms as determined by the healthcare provider. This dosing interval is based on controlled patients using 8-week dosing intervals after year 1.

†Patients who are controlled with Somatuline Depot 60 mg or 90 mg administered every 4 weeks can be considered for treatment with 120 mg administered every 6 or 8 weeks. GH and IGF-1 levels should be obtained 6 weeks after this change in dosing regimen to evaluate persistence of patient response. Continued monitoring of patients' response with dose adjustments for biochemical and clinical symptom control, as necessary, is recommended.

## IMPORTANT SAFETY INFORMATION (continued)

**Before taking SOMATULINE DEPOT, tell your HCP about all your medical conditions including if you:**

have diabetes; have gallbladder, heart, thyroid, kidney or liver problems; are pregnant or plan to become pregnant; or are breastfeeding or plan to breastfeed. It is not known if SOMATULINE DEPOT will harm your unborn baby or pass into breast milk. You should not breastfeed if you receive SOMATULINE DEPOT and for 6 months after your last dose. SOMATULINE DEPOT may affect your ability to become pregnant.

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## Your Healthcare Provider May Adjust Your Dose Based on Your Needs

Somatuline Depot comes in 3 dosage strengths: 60 mg, 90 mg, and 120 mg. The typical starting dose of Somatuline Depot for acromegaly is 90 mg once every 4 weeks or 60 mg for patients with liver or kidney impairment. Your doctor will choose the dose that may work best for you.

**During treatment, your doctor may test certain hormone levels and ask you about your symptoms** to see how you are responding to treatment.

If your hormones or symptoms aren't controlled<sup>‡</sup> with your current dose, your doctor may increase the dose.

- If your hormones and symptoms are controlled,<sup>‡</sup> your doctor may continue to prescribe the same dose



**Somatuline Depot is the first SSA that's FDA-approved to offer less frequent doses per year for people whose acromegaly is controlled.<sup>‡</sup>**

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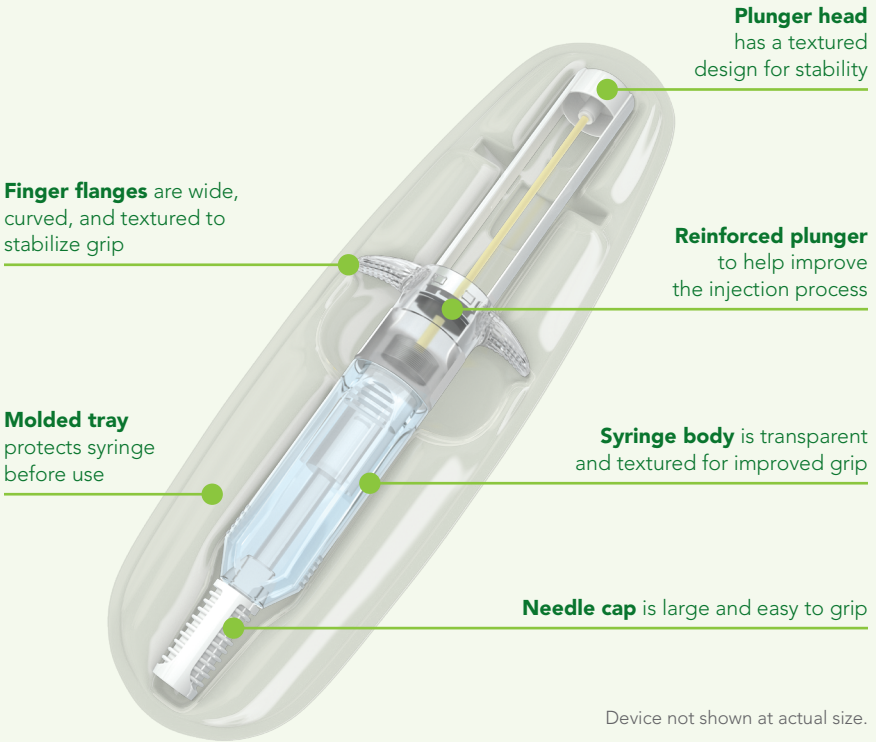
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(lanreotide) Injection 60 mg 90 mg 120 mg

# The Ready-to-Use Device Was Designed With You in Mind\*

Each Device Contains a Sterile, Prefilled Syringe to Support Full Delivery of Your Dose



Somatuline® Depot is intended for administration by a healthcare provider.

**\*Study Design:** The Somatuline Depot delivery system was updated in 2019 to provide an improved ergonomic injection experience, based on user feedback. Through a series of 4 formative studies between 2015 and 2017, Ipsen sought feedback from patients, nurses, and caregivers on the design and functionality of updated delivery device prototypes.

These culminated in a human factors validation study in 2017 in which the final delivery system prototype was tested to determine whether the product could be safely and effectively used by intended users in the intended use environment. Key changes between the previously marketed delivery system and the current delivery system are: an overcap to improve the ergonomics (and needle shield removal); plunger support for the current delivery system; and improved version of the needle safety system.

## IMPORTANT SAFETY INFORMATION (continued)

### Especially tell your HCP if you take:

- Insulin or other diabetes medicines,
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- Medicines that lower your heart rate, such as beta blockers.

Know the medicines you take. Keep a list of them to show your HCP when you get a new medicine.

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## Somatuline Depot Is Formulated to Deliver a Full Dose With a Small Volume of Medication

Depending on the dosage strength, the amount of medication administered with each injection is 0.2 mL to 0.5 mL

Somatuline Depot is intended to be administered by a healthcare professional

Somatuline Depot is injected deep under the skin of the upper outer area of your buttock

- Your injection site should change between your right and left buttock from one injection of Somatuline Depot to the next

**With Somatuline Depot, there are no food restrictions—it can be administered whether you have eaten or not.**

## Injections at Home

**Nurse Home Health Administration (NHHA)** may be available for patients who are unable to receive their Somatuline Depot injections at the doctor's office. Eligible<sup>†</sup> patients can have a nurse visit their home or site of choice to administer their injections. There is no cost to the patient for this option. NHHA must be requested by the doctor and the patient must be enrolled in IPSEN CARES<sup>®</sup>.

<sup>†</sup>**Patient Eligibility for Nurse Home Healthcare Administration:** A physician must prescribe Somatuline Depot to be administered by Home Health Administration for the patient. The program is available to most patients covered by commercial insurance plans. Patients are not eligible if prescriptions are paid in part or fully by any state or federally funded programs, including, but not limited to, Medicare or Medicaid, VA, DOD or TRICARE. Residents of Massachusetts, Michigan, Minnesota, and Rhode Island are not eligible.

## IMPORTANT SAFETY INFORMATION (continued)

**Tell your HCP if you have any side effect that bothers you or that does not go away.** These are not all the possible side effects of SOMATULINE DEPOT. For more information, ask your HCP.

**To report SUSPECTED ADVERSE REACTIONS,** contact Ipsen Biopharmaceuticals, Inc. at 1-855-463-5127 or FDA at 1-800-FDA-1088 or [www.fda.gov/safety/medwatch-fda-safety-information-and-adverse-event-reporting-program](http://www.fda.gov/safety/medwatch-fda-safety-information-and-adverse-event-reporting-program).



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# IPSENCARES®

Coverage, Access, Reimbursement & Education Support

## With IPSEN CARES®, you'll receive personal support from our Patient Access Specialists who can help:

- Provide copay assistance to eligible\* patients
- Navigate your insurance coverage process and determine your out-of-pocket costs for treatment
- Provide free medication to eligible patients through the Patient Assistance Program (PAP)

IPSEN CARES® provides services on your behalf when you accept the terms and conditions of the program in writing and provide the applicable authorizations.



## Somatuline® Depot is covered by most commercial insurance plans.

To enroll, please call **1-866-435-5677**  
(8:00 AM to 8:00 PM ET, Monday through Friday)  
Learn more at [www.ipsencares.com](http://www.ipsencares.com).

\*Patient Eligibility & Terms and Conditions: Patients are not eligible for copay assistance through IPSEN CARES® if they are enrolled in any state or federally funded programs for which drug prescriptions or coverage could be paid in part or in full, including, but not limited to, Medicare Part B, Medicare Part D, Medicaid, Medigap, VA, DoD, or TRICARE (collectively, "Government Programs"), or where prohibited by law. Patients residing in Massachusetts, Minnesota, or Rhode Island can only receive assistance with the cost of Ipsen products but not the cost of related medical services (injection). Patients receiving assistance through another assistance program or foundation, free trial, or other similar offer or program, are not eligible for the copay assistance program during the current enrollment year.

For patients with commercial insurance, the maximum copay benefit amount per prescription is an amount equal to the difference between the annual maximum copay benefit of \$20,000 and the total amount of copay benefit provided to the patient in the Somatuline® Depot Copay Program.

Patient or guardian is responsible for reporting receipt of copay savings benefit to any insurer, health plan, or other third party who pays for or reimburses any part of the prescription filled through the program, as may be required. Additionally, patients may not submit any benefit provided by this program for reimbursement through a Flexible Spending Account, Health Savings Account, or Health Reimbursement Account. Ipsen reserves the right to rescind, revoke, or amend these offers without notice at any time. Ipsen and/CoverMyMeds, are not responsible for any transactions processed under this program where Medicaid, Medicare, or Medigap payment in part or full has been applied. Data related to patient participation may be collected, analyzed, and shared with Ipsen for market research and other purposes related to assessing the program. Data shared with Ipsen will be de-identified, meaning it will not identify the patient. Void outside of the United States and its territories or where prohibited by law, taxed, or restricted. This program is not health insurance. No other purchase is necessary.

# Get Connected to the Acromegaly Community

It can be helpful to have the support of others who know what you are going through and to have resources\* that can provide additional information about living with acromegaly.

## Acromegaly Community

An emotional and communal support network for people touched by acromegaly

## Hormone Health Network

Provides education and tools for patients with endocrine disorders from the Endocrine Society

## National Endocrine and Metabolic Diseases Information Service

A service of the National Institute of Diabetes and Digestive and Kidney Diseases (NIDDK), National Institutes of Health (NIH)

## Pituitary Network Association

Learn more about pituitary disorders and get answers to frequently asked questions

\*Ipsen Biopharmaceuticals, Inc., does not control or endorse these sites. They are maintained by third parties who are solely responsible for the content.

## IMPORTANT SAFETY INFORMATION (continued)

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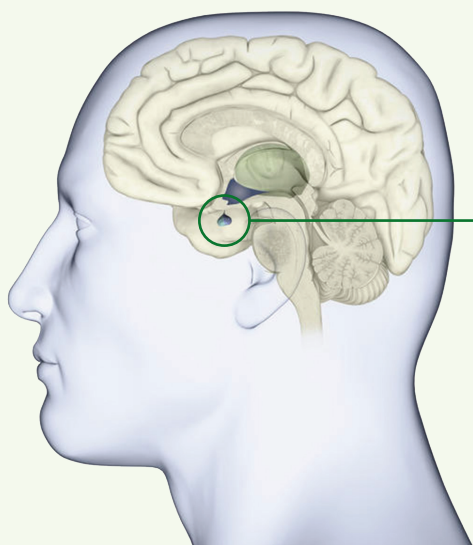


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# Acromegaly—A Complex Hormonal Disorder

Acromegaly is a rare disorder caused by having too much of certain hormones that affect your body's growth.

In most cases, acromegaly is caused by a noncancerous tumor in the pituitary gland called an adenoma. The tumor causes too much growth hormone, or GH, to be released into the blood stream.



## Pituitary gland

Your pituitary produces important hormones that control your body's growth and development, reproduction, and metabolism.

As GH travels throughout the body, it tells the liver to make more hormone insulin-like growth factor-1 (IGF-1). IGF-1 works together with GH to help control the growth of many tissues in your body. When too much IGF-1 and GH are present, abnormal growth of bones, cartilage, and other body tissues may occur.

## IMPORTANT SAFETY INFORMATION (continued)

**Tell your healthcare provider (HCP) if you have any of the following symptoms: (continued)**

- **Symptoms of high blood sugar** may include increased thirst, increased appetite, nausea, weakness or tiredness, urinating more than normal, and fruity smelling breath.
- **Symptoms of low blood sugar** may include dizziness or lightheadedness, sweating, confusion, headache, blurred vision, slurred speech, shakiness, fast heartbeat, irritability or mood changes, and hunger.

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# Recognizing the Possible Signs of Acromegaly

Signs and symptoms of acromegaly tend to happen slowly, so you and your family may not notice them at first.



## Body aches and pains including:

- Headaches
- Joint aches and stiffness
- Muscle weakness



## Skin changes, such as:

- Thick rough or oily skin
- Appearance of skin tags
- Excessive sweating or skin odor



## Swollen hands and feet

- Ring and shoe size may increase



## Fatigue and sleep apnea (breaks in breathing during sleep)



## Deepening of the voice or vision problems

Depending on the size and location of the pituitary tumor, people may experience abnormal menstrual cycles, breast discharge, erectile dysfunction, or decreased sex drive.

## Acromegaly can also change how you look

### Changes may include:

- Bulging forehead
- Rectangular-shaped face
- Enlarged lips, nose, or tongue
- Increased space between the teeth
- Thick, rough, oily, or wrinkly skin



2008

Before onset of symptoms\*



2017

After onset of symptoms (pretreatment)\*

\*Wade is a real Somatuline® Depot patient who was compensated for these photos.

# Doctor Discussion Guide

## Track the Symptoms You May Be Experiencing by Checking the Boxes Next to the Symptoms Listed

Remember, treatment for acromegaly works by lowering the hormone levels in your body. Your doctor may adjust your dose based on your hormone levels and your symptoms. Your response to treatment may vary. Use this guide to have a productive discussion with your doctor. These symptoms could be caused by other conditions.

Appointment date: \_\_\_\_ / \_\_\_\_ / \_\_\_\_ Dose: \_\_\_\_\_



### General

- Fatigue  Muscle weakness



### Head/Eye/Nose/Throat Symptoms

- Headaches  Impaired vision  
 Deepening of the voice  Enlarged lips, nose, and tongue  
 Enlarged brow or lower jaw, increased gap between teeth  Sleep apnea—breaks in breathing during sleep



### Skin

- Thickened, coarse, or oily skin  Increased skin tags  
 Excessive sweating or skin color



### Extremities and Joints

- Swelling of the hands or feet  Increase in ring size or shoe size  
 Joint aches  Reduced joint mobility



### Reproductive and Sexual Symptoms

- Abnormal menstrual cycle  Erectile dysfunction  
 Breast discharge  Decrease in sex drive or desire



### Other Symptoms

Anything else you would like to discuss with your doctor:

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It is not known if SOMATULINE DEPOT is safe and effective in children.

## IMPORTANT SAFETY INFORMATION

**Do not take SOMATULINE DEPOT** if you are allergic to lanreotide.

**SOMATULINE DEPOT may cause serious side effects**, including:

- **Gallstones**
- **Changes to your blood sugar (high or low blood sugar),**
- **Slow heart rate,**
- **High blood pressure,** and
- **Changes in thyroid function in acromegaly patients.**

**Tell your healthcare provider (HCP) if you have any of the following symptoms:**

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Tell your HCP right away if you have signs of an allergic reaction after receiving SOMATULINE DEPOT, including swelling of your face, lips or tongue; breathing problems; fainting, dizziness or feeling lightheaded (low blood pressure); itching; skin flushing or redness; rash; or hives.

**Before taking SOMATULINE DEPOT, tell your HCP about all your medical conditions including if you:** have diabetes; have gallbladder, heart, thyroid, kidney or liver problems; are pregnant or plan to become pregnant; or are breastfeeding or plan to breastfeed. It is not known if SOMATULINE DEPOT will harm your unborn baby or pass into breast milk. You should not breastfeed if you receive SOMATULINE DEPOT and for 6 months after your last dose. SOMATULINE DEPOT may affect your ability to become pregnant.

**Tell your HCP about all the medicines you take,** including prescription and over-the-counter medicines, vitamins, and herbal supplements. SOMATULINE DEPOT and other medicines may affect each other, causing side effects. SOMATULINE DEPOT may affect the way other medicines work, and other medicines may affect how SOMATULINE DEPOT works. Your dose of SOMATULINE DEPOT or your other medications may need to be changed. If you have diabetes, your HCP may change your dose of diabetes medication when you first start receiving SOMATULINE DEPOT or if your dose of SOMATULINE DEPOT is changed.

### **Especially tell your HCP if you take:**

- Insulin or other diabetes medicines,
- A cyclosporine (Gengraf, Neoral, or Sandimmune), or
- Medicines that lower your heart rate, such as beta blockers.

Know the medicines you take. Keep a list of them to show your HCP when you get a new medicine.

**Tell your HCP if you have any side effect that bothers you or that does not go away.** These are not all the possible side effects of SOMATULINE DEPOT. For more information, ask your HCP.

**To report SUSPECTED ADVERSE REACTIONS,** contact Ipsen Biopharmaceuticals, Inc. at 1-855-463-5127 or FDA at 1-800-FDA-1088 or [www.fda.gov/safety/medwatch-fda-safety-information-and-adverse-event-reporting-program](http://www.fda.gov/safety/medwatch-fda-safety-information-and-adverse-event-reporting-program).

**Please see additional Important Safety Information throughout and accompanying Full Prescribing Information and Patient Information.**



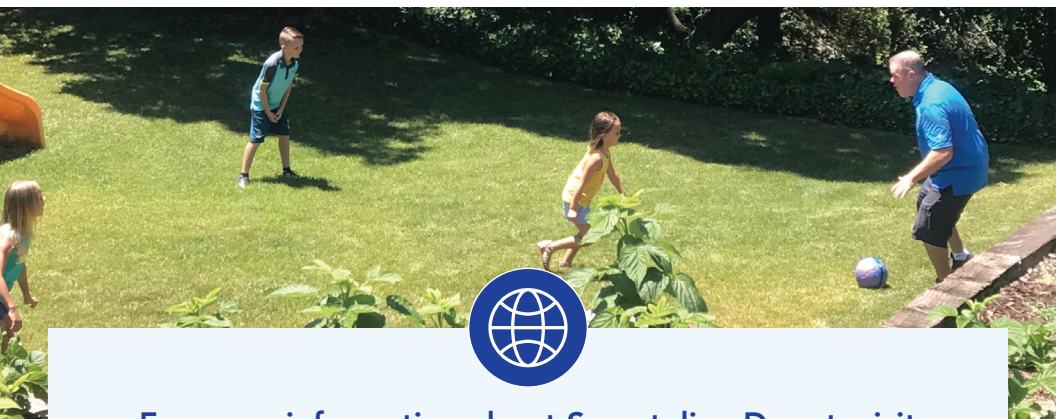
**Somatuline<sup>®</sup> Depot**  
(lanreotide) Injection 60mg 90mg 120mg

THE #1

**PRESCRIBED SOMATOSTATIN ANALOG (SSA)  
FOR THE TREATMENT OF ACROMEGALY IN THE US\***

## Somatuline® Depot Provides Experience That Delivers

- **Proven to treat acromegaly** by reducing GH and IGF-1, the hormones that cause acromegaly
- **The first SSA for acromegaly** that is FDA-approved for fewer doses a year when acromegaly is controlled†
  - People whose hormones and symptoms are controlled may need as few as 7 doses per year†‡
- **Ready-to-use device** is designed with you in mind
- **IPSEN CARES® program offers personal support** with coverage, reimbursement, and other services to eligible patients



For more information about Somatuline Depot, visit  
[www.somatulinedepot.com/acromegaly/](http://www.somatulinedepot.com/acromegaly/)

\*Source: IQVIA APLD patient counts data for January 1, 2015 through April 2022. Data may be subject to change.

†Controlled is defined as GH level from  $>1.0$  ng/mL to  $\leq 2.5$  ng/mL, normalized IGF-1 level, and satisfactory management of clinical symptoms as determined by the healthcare provider.

‡In patients whose acromegaly is controlled after 3 months of treatment. This dosing interval is based on controlled patients using 8-week dosing intervals after year 1.

### IMPORTANT SAFETY INFORMATION (continued)

**Tell your healthcare provider (HCP) if you have any of the following symptoms: (continued)**

- **Symptoms of slow heart rate** may include dizziness or lightheadedness, fainting or near-fainting, chest pain, shortness of breath, confusion or memory problems, and weakness or extreme tiredness.
- SOMATULINE DEPOT can cause the thyroid gland to not make enough thyroid hormone in people with acromegaly. **Symptoms of low thyroid levels** may include fatigue, weight gain, puffy face, being cold all the time, constipation, dry skin, thinning or dry hair, decreased sweating, and depression.

**Please see additional Important Safety Information throughout and accompanying Full Prescribing Information and Patient Information.**

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