

# FOR PEOPLE WITH CLL/SLL WHO ARE PRESCRIBED VENCLEXTA. YOUR FIRST 5 WEEKS – AT A GLANCE





















This is only a guide. Your healthcare professional (HCP) will determine your dose, the amount of water you should drink and when you should have blood tests, the frequency of which may change to help prevent tumour lysis syndrome (TLS). You should always follow the advice of your healthcare team.

Before you start VENCLEXTA, or a new dose, you will need to:

- Wait for your healthcare team to give you the go-ahead to take it.



You should take your VENCLEXTA tablet(s) at the same time every day with a meal. Your HCP will tell you how many and at what time of day to take it. As follow-up blood tests may be required during the first 5 weeks of treatment, taking it in the morning may be the most suitable time for many people.

2 DAYS BEFORE			DRINK AT LEAST 6–8 GLASSES OF WATER (ABOUT 1.5–2 LITRES) EACH DAY			
<b>WEEK 1</b>	<b>20 mg</b> once a day <b>2 x</b> 	 <b>Blood test before taking your first VENCLEXTA tablet.</b> HCP OK to proceed? →	<b>DAY 1</b> Date: ____ / ____ / ____ HCP tells you to take your first dose.  <b>Blood test 6–8 hours later</b> HCP OK to proceed? Continue as advised.	<b>DAY 2</b> Date: ____ / ____ / ____  <b>Blood test 24 hours later</b> HCP OK to proceed? Continue as advised.	<b>DAY 3–6</b>	<b>DAY 7</b> Date: ____ / ____ / ____  <b>Blood test before your next dose of VENCLEXTA.</b>
<b>DRINK AT LEAST 6–8 GLASSES OF WATER EACH DAY</b>						
<b>WEEK 2</b>	<b>50 mg</b> once a day <b>1 x</b> 	HCP OK to proceed? →	<b>DAY 1</b> Date: ____ / ____ / ____ Take your next dose.  <b>Blood test 6–8 hours later</b> HCP OK to proceed? Continue as advised.	<b>DAY 2</b> Date: ____ / ____ / ____  <b>Blood test 24 hours later</b> HCP OK to proceed? Continue as advised.	<b>DAY 3–6</b>	<b>DAY 7</b> Date: ____ / ____ / ____  <b>Blood test before your next dose of VENCLEXTA.</b>
<b>DRINK AT LEAST 6–8 GLASSES OF WATER EACH DAY</b>						
<b>WEEK 3</b>	<b>100 mg</b> once a day <b>1 x</b> 	HCP OK to proceed? →	<b>DAY 1</b> Date: ____ / ____ / ____ Take your next dose.  <b>Blood test 6–8 hours later if scheduled by HCP.</b> HCP OK to proceed? Continue as advised.	<b>DAY 2</b> Date: ____ / ____ / ____  <b>Blood test 24 hours later if scheduled by HCP.</b> HCP OK to proceed? Continue as advised.	<b>DAY 3–6</b>	<b>DAY 7</b> Date: ____ / ____ / ____  <b>Blood test before your next dose of VENCLEXTA.</b>
<b>DRINK AT LEAST 6–8 GLASSES OF WATER EACH DAY</b>						
<b>WEEK 4</b>	<b>200 mg</b> once a day <b>2 x</b> 	HCP OK to proceed? →	<b>DAY 1</b> Date: ____ / ____ / ____ Take your next dose.  <b>Blood test 6–8 hours later if scheduled by HCP.</b> HCP OK to proceed? Continue as advised.	<b>DAY 2</b> Date: ____ / ____ / ____  <b>Blood test 24 hours later if scheduled by HCP.</b> HCP OK to proceed? Continue as advised.	<b>DAY 3–6</b>	<b>DAY 7</b> Date: ____ / ____ / ____  <b>Blood test before your next dose of VENCLEXTA.</b>
<b>DRINK AT LEAST 6–8 GLASSES OF WATER EACH DAY</b>						
<b>WEEK 5</b>	<b>400 mg</b> once a day <b>4 x</b> 	HCP OK to proceed? →	<b>DAY 1</b> Date: ____ / ____ / ____ Take your next dose.  <b>Blood test 6–8 hours later if scheduled by HCP.</b> HCP OK to proceed? Continue as advised.	<b>DAY 2</b> Date: ____ / ____ / ____  <b>Blood test 24 hours later if scheduled by HCP.</b> HCP OK to proceed? Continue as advised.	<b>DAY 3–6</b>	<b>DAY 7</b> Date: ____ / ____ / ____ Continue to take medication as advised.
<b>DRINK AT LEAST 6–8 GLASSES OF WATER EACH DAY</b>						

Insert patient information

CLL = chronic lymphocytic leukaemia. SLL = small lymphocytic lymphoma.

VENCLEXTA in combination with rituximab is fully funded for relapsed/refractory chronic lymphocytic leukaemia (CLL). Special Authority criteria apply. Refer to the VENCLEXTA PHARMAC Special authority criteria at <https://schedule.pharmac.govt.nz/SAForms.php>. VENCLEXTA in combination with obinutuzumab for 1L CLL is not funded - a charge will apply. VENCLEXTA is not funded for acute myeloid leukaemia (AML) - a charge will apply.

VENCLEXTA® is supplied in New Zealand by: AbbVie Limited, 6th floor, 156-158 Victoria Street, Wellington, 6011, New Zealand Tel: 0800 900 030. **IMPORTANT INFORMATION ABOUT VENCLEXTA®** Venclexta is a prescription medicine containing venetoclax. Venclexta is available as film-coated tablets of various strength (10 mg, 50 mg, 100 mg venetoclax). It is used to treat adults with chronic lymphocytic leukaemia (CLL) or small lymphocytic lymphoma (SLL). Venclexta is taken alone or in combination with other medicines. Your doctor will let you know which combination medicines, how to take them, and how long to take them. Typically, you will start treatment with Venclexta at a low dose. If you are taking Venclexta for CLL or SLL, your doctor will gradually increase your dose over 5 weeks up to the full dose. **Use strictly as directed by your doctor. VENCLEXTA has risks and benefits.** You must not take it if you are allergic to venetoclax or to any of the inactive ingredients. For CLL or SLL, do not take Venclexta if you are taking any of the following medicines: medicines used to treat or prevent fungal infections, including ketoconazole, posaconazole, voriconazole, itraconazole; clarithromycin (an antibiotic); or ritonavir (a medicine used to treat HIV and hepatitis C). Do not drink grapefruit juice, or eat grapefruit, starfruit or Seville oranges or marmalades. Do not give Venclexta to children and adolescents under 18 years of age. Do not take Venclexta if you are pregnant or plan to become pregnant, or if you are breastfeeding or plan to breastfeed. If you are a woman of child-bearing age, you must use a highly effective form of contraception during treatment with Venclexta and for at least 30 days after your last dose. Tell your doctor, nurse, or pharmacist if you have any kidney or liver problems; if you think you may have an infection; or if you recently received or are scheduled for any vaccinations. Do not stop using Venclexta or change the dose without checking with your doctor. **VENCLEXTA can cause tumour lysis syndrome (TLS)**, which is caused by the fast breakdown of cancer cells. TLS is a very serious side effect that can be fatal. TLS is most likely to occur when you are first starting treatment. To help prevent TLS, it is important to stay hydrated and drink water every day when taking Venclexta. Particularly, starting two days before and on the day of your first dose of Venclexta and every time the dose is increased, drink 6 to 8 glasses (approximately 1.5-2 L total) of water each day. Let your healthcare provider know immediately if you experience: fever or chills; feeling sick or vomiting; being short of breath; feeling unusually tired; changes in your heart rate (slow, fast or irregular); your urine looks dark or cloudy; feeling confused; convulsions or fits; or pain in the muscles or joints while on treatment with Venclexta. Ensure you follow all your doctor's instructions carefully and keep all your appointments, including those for blood tests. You may experience a low number of neutrophils, a type of white blood cells – this can be severe and need treatment. Your doctor will check your blood counts during treatment with Venclexta. You may experience infections during treatment with Venclexta. Some infections can be very serious or even fatal. Your doctor will closely monitor and treat you right away if you have fever or any signs of infection during treatment with Venclexta. Tell your doctor immediately if you have signs of an infection before, or while taking Venclexta, including: fever or chills, feeling weak or confused, cough, runny nose, sore throat; congestion on the chest; or pain or burning when passing urine. Some of the less serious side effects of Venclexta include diarrhoea; tummy pain; constipation, nausea (feeling sick); vomiting; reduced appetite; weight loss; mouth sores; looking pale; feeling tired; having little or no energy; shortness of breath when exercising; feeling dizzy; headache; low blood pressure; bleeding. Tell your doctor or pharmacist if you notice anything else that is making you feel unwell. Some medicines and Venclexta may interfere with each other, so tell your doctor if you are taking medicines containing any of the following: fluconazole, ciprofloxacin, erythromycin, diltiazem, verapamil, captopril, felodipine, dronedarone, amiodarone, quinidine, rifampicin, carvedilol, ciclosporin, quercetin, ranolazine, ticagrelor, azithromycin, nafcillin, carbamazepine, phenytoin, St John's wort (*Hypericum perforatum*), bosentan, efavirenz, etravirine, modafinil, warfarin, digoxin, everolimus, or sirolimus. Tell your doctor or pharmacist if you are taking any other medicines, including any medicines, vitamins or supplements that you buy without prescription. Tell any other doctors, pharmacists, dentists, or surgeons treating you that you are taking Venclexta and remind them before you start any new medicines. **If you have any questions about using VENCLEXTA, including its risks and benefits, how much to use, how and when to use it, or storage conditions, ask your healthcare professional and refer to the Consumer Medicine Information (CMI) available from [www.medsafe.govt.nz](http://www.medsafe.govt.nz) or free phone 0800 900 030. Ask your doctor if VENCLEXTA is right for you. Use strictly as directed. If symptoms continue, or you have side effects, see your doctor, pharmacist, or healthcare professional.** V7a. NZ-VENC-230012. TAPS BG3047. ONO0105. Prepared June 2023. ©2023 AbbVie. All rights reserved. AbbVie® is a registered trademark of AbbVie Inc. 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