

READ THIS FOR SAFE AND EFFECTIVE USE OF YOUR MEDICINE
PATIENT MEDICATION INFORMATION

TEGSEDI™
inotersen injection

Read this carefully before you start taking **TEGSEDI** and each time you get a refill. This leaflet is a summary and will not tell you everything about this drug. Talk to your healthcare professional about your medical condition and treatment and ask if there is any new information about **TEGSEDI**.

SERIOUS WARNINGS AND PRECAUTIONS

Decreased platelet count (Thrombocytopenia):

TEGSEDI can lower the platelet count in your blood. Your doctor should monitor you every 2 weeks while you are taking TEGSEDI and for 8 weeks after you stop taking it.

This is especially important if you are:

- elderly (since you may be at a greater risk of bleeding), or
- taking medicines to prevent the formation of blood clots or platelets or those lower your platelet count.

If you experience or notice:

- unusual or prolonged bleeding (such as a rash of red spots on your skin, spontaneous bruising or bleeding in your eye)
- stiffness in your neck or
- an unusual severe headache

Call your doctor **right away**.

Glomerulonephritis / kidney problems

Some patients taking TEGSEDI have developed glomerulonephritis. This is a condition where your kidneys do not work properly. Your doctor will check how well your kidneys are working before you start TEGSEDI, regularly while you are taking TEGSEDI, and for 8 weeks after you stop taking it.

Symptoms of glomerulonephritis are:

- foaming urine
- pink or brown coloured urine
- blood in the urine, and
- passing less urine than usual

Some patients taking TEGSEDI have also developed a decline in how well their kidneys are working without having had glomerulonephritis.

Tell your doctor if you are taking any medicines that damage the kidneys or affect kidney function, for example sulfonamides, aldosterone antagonists, and some types of painkillers.