tolmar | fensolvi (leuprolide acetate) for injectable suspension

An Educational Program Designed For Pediatric Healthcare Professionals



Central Precocious Puberty (CPP): How a Pediatrician Can Help

Understanding the Potential Consequences of Untreated CPP

Program Objectives:

1. Understand and discuss central precocious puberty
   - Diagnostic criteria
   - Treatment goals
   - When to refer to Pediatric Endocrinologist
2. Discuss treatment options, clinical outcomes and longer-term implications for children with CPP
3. Examine the use of Fensolvi in treating children with CPP

Program Length:

45-60 minutes

Where:

Your clinic or a location to be mutually agreed on between you and Tolmar (during work or after hours)

Presented by:

A Pediatric Endocrinology provider with extensive knowledge and clinical experience treating CPP.

See reverse for more details →

Schedule an in-person or virtual presentation

CONTACT

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IMPORTANT SAFETY INFORMATION FOR FENSOLVI

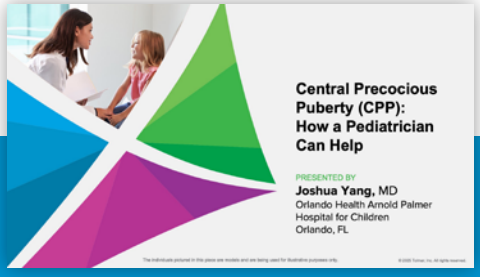
FENSOLVI (leuprolide acetate) for injectable suspension is a gonadotropin releasing hormone (GnRH) agonist used to treat patients 2 years of age and older with central precocious puberty (CPP). CPP may be diagnosed when signs of sexual maturity begin to develop in girls under the age of 8 or in boys under the age of 9.

FENSOLVI is contraindicated in individuals with hypersensitivity to any drug that is in the same class as FENSOLVI, in individuals who are allergic to any of the ingredients in FENSOLVI, or in individuals who are pregnant. FENSOLVI may cause fetal harm when administered to a pregnant patient.

See additional Important Safety Information on reverse side.

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This program is delivered by a Pediatric Endocrinology provider with extensive knowledge and clinical experience treating Central Precocious Puberty (CPP)

Program Presenters:

- **Sadie Chichakly,** NP
  Children's Hospital of Orange County
  Orange, CA
- **Midday Damian,** MD
  Children's Endocrine & Diabetes Care
  Wellington, FL
- **Joshua Yang,** MD
  Orlando Health Arnold Palmer Hospital for Children
  Orlando, FL

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IMPORTANT SAFETY INFORMATION FOR FENSOLVI (continued)

During the first few weeks of treatment, increases in gonadotropins and sex steroids above baseline may result in an increase in signs and symptoms of puberty including vaginal bleeding in girls.

Psychiatric events have been reported in patients taking GnRH agonists. Events include emotional lability, such as crying, irritability, impatience, anger, and aggression. Patients should be monitored for development or worsening of psychiatric symptoms.

Convulsions have been observed in patients treated with GnRH agonists with or without a history of seizures, epilepsy, cerebrovascular disorders, central nervous system anomalies or tumors, and in patients on concomitant medications that have been associated with convulsions such as bupropion and SSRIs.

Severe cutaneous adverse reactions (SCARs), including Stevens-Johnson syndrome/toxic epidermal necrolysis, drug reaction with eosinophilia and systemic symptoms, and acute generalized exanthematous pustulosis, have occurred in patients receiving GnRH agonists. Monitor for and advise patients of the signs and symptoms of SCARs.

Pseudotumor Cerebri (Idiopathic Intracranial Hypertension) has been reported in pediatric patients treated with GnRH agonists. Patients should be monitored for headache, papilledema and blurred vision.

The most common adverse events seen with FENSOLVI were: injection site pain, nasopharyngitis, pyrexia, headache, cough, abdominal pain, injection site erythema, nausea, constipation, vomiting, upper respiratory tract infection, bronchospasm, productive cough and hot flush.

Please see full Prescribing Information for more information at Fensolvi.com/hcp

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