



CLINICAL EDUCATORS
Engage. Empower. Educate.™



IPF Clinical Educators

Sharing insight and expertise about IPF



IMPORTANT SAFETY INFORMATION

WARNINGS AND PRECAUTIONS

Hepatic Impairment

- OFEV is not recommended in patients with moderate (Child Pugh B) or severe (Child Pugh C) hepatic impairment. Patients with mild hepatic impairment (Child Pugh A) can be treated with a reduced dosage (100 mg twice daily). Consider treatment interruption or discontinuation for management of adverse reactions.

Elevated Liver Enzymes and Drug-Induced Liver Injury

- Cases of drug-induced liver injury (DILI) have been observed with OFEV treatment. In the post-marketing period, non-serious and serious cases of DILI, including severe liver injury with fatal outcome, have been reported. The majority of hepatic events occur within the first three months of treatment. OFEV was associated with elevations of liver enzymes (ALT, AST, ALKP, and GGT) and bilirubin. Liver enzyme and bilirubin increases were reversible with dose modification or interruption in the majority of cases. The majority (94%) of patients with ALT and/or AST elevations had elevations less than 5 times ULN. The majority (95%) of patients with bilirubin elevations had elevations less than 2 times ULN.
- Patients with a low body weight (less than 65 kg), Asian, and female patients may have a higher risk of elevations in liver enzymes. Nintedanib exposure increased with patient age, which may result in increased liver enzymes.

Please see additional Important Safety Information throughout this brochure and full [Prescribing Information](#), including [Patient Information](#).

Boehringer Ingelheim Clinical Educators



Sharing our knowledge about IPF with your practice

The IPF Clinical Educator brings an expert background and knowledge of IPF disease state and treatment to your office, offering education to clinical staff and patients alike.



Our Clinical Educators (CEs) fill an important role in the healthcare arena, sharing their expertise about IPF, a rare and often misunderstood disease.

At Boehringer Ingelheim (BI), we pride ourselves on employing CEs who have extensive IPF clinical knowledge. They reflect the qualities central to our company and our culture: respect, empathy, trust, and passion.

If your practice provides care to patients with IPF, you can benefit from meeting with a BI Clinical Educator.

IMPORTANT SAFETY INFORMATION

WARNINGS AND PRECAUTIONS (cont'd)

Elevated Liver Enzymes and Drug-Induced Liver Injury (cont'd)

- Conduct liver function tests prior to initiation of treatment, at regular intervals during the first three months of treatment, and periodically thereafter or as clinically indicated. Measure liver function tests promptly in patients who report symptoms that may indicate liver injury, including fatigue, anorexia, right upper abdominal discomfort, dark urine or jaundice. Dosage modifications, interruption, or discontinuation may be necessary for liver enzyme elevations.

Highly educated, trained, and experienced

Our CEs are skilled, trained healthcare professionals with a strong scientific knowledge of IPF and OFEV® (nintedanib) capsules treatment. Their compassionate approach allows them to effectively communicate the potential impact of IPF on patients, caregivers, and their families.

BI Clinical Educators:

- Bring a professional background that includes being a registered nurse, nurse practitioner, physician assistant, pharmacist, or respiratory therapist
- Have an average of over 16 years of clinical experience
- Hold professional certifications and an active clinical license
- Promote health literacy to make patients become better informed healthcare consumers

IMPORTANT SAFETY INFORMATION

WARNINGS AND PRECAUTIONS (cont'd)

Gastrointestinal Disorders

Diarrhea

- Diarrhea was the most frequent gastrointestinal event reported in 62% versus 18% of patients treated with OFEV and placebo, respectively. Events were primarily mild to moderate intensity and occurred within the first 3 months. Diarrhea led to permanent dose reduction in 11% and discontinuation in 5% of OFEV patients versus 0 and less than 1% in placebo patients, respectively.
- Dosage modifications or treatment interruptions may be necessary in patients with diarrhea. Treat diarrhea at first signs with adequate hydration and antidiarrheal medication (e.g., loperamide), and consider treatment interruption if diarrhea continues. OFEV treatment may be resumed at the full dosage (150 mg twice daily), or at the reduced dosage (100 mg twice daily), which subsequently may be increased to the full dosage. If severe diarrhea persists, discontinue treatment.

Please see additional Important Safety Information throughout this brochure and full [Prescribing Information](#), including [Patient Information](#).

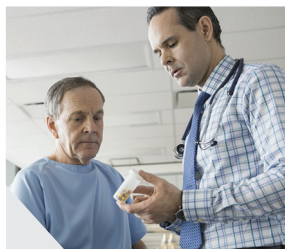
Education Through Communication

Bringing our support to your office

Our in-office educational discussions and training sessions can help your staff gain better knowledge of the access to available treatments and how they may benefit your IPF patient. Our face-to-face meetings bring a new level of understanding about IPF to patients, caregivers, and family members.

Programs for your practice

- In-office educational discussions and training with staff, individuals, or groups
 - Including IPF disease basics to improve accurate, timely diagnosis
- Support and training on the use of OFEV® (nintedanib) for appropriate IPF patients with office staff, with an emphasis on:
 - Dosing and administration
 - Adverse event education and management tips
 - Maximizing the use of company-provided information, tools, and resources
 - Important Safety Information



CEs focus on explaining IPF and treatment with OFEV capsules.

IMPORTANT SAFETY INFORMATION

WARNINGS AND PRECAUTIONS (cont'd)

Gastrointestinal Disorders (cont'd)

Nausea and Vomiting

- Nausea was reported in 24% versus 7% and vomiting was reported in 12% versus 3% of patients treated with OFEV and placebo, respectively. Events were primarily of mild to moderate intensity. Nausea and vomiting led to discontinuation of OFEV in 2% and 1% of patients, respectively.
- If nausea or vomiting persists despite appropriate supportive care including anti-emetic therapy, consider dose reduction or treatment interruption. OFEV treatment may be resumed at full dosage or at reduced dosage, which subsequently may be increased to full dosage. If severe nausea or vomiting does not resolve, discontinue treatment.

Programs for your patients

- Overview of IPF and OFEV® (nintedanib)
- What to know while taking OFEV capsules
 - Important Safety Information and how to help manage adverse events
- One-on-one patient educational training for individuals who have been prescribed OFEV
 - Training may include caregivers and family members with the patient's permission
 - Every effort will be made to secure a live training session, typically taking place in the healthcare provider's office
 - For some patients, remote sessions (eg, via phone and FaceTime® [video calling]) are available on an as-needed basis
- Assistance in starting and continuing use of therapy as prescribed
- IPF disease state education to support groups

Part of the OFEV OPEN DOORS™ IPF Patient Support Program



When you prescribe OFEV for your patients with IPF, they are able to access all of the benefits of OPEN DOORS™—the IPF resource that provides support and advice to help them with their OFEV treatment. Find out more about OPEN DOORS™ at www.ofev.com.

IMPORTANT SAFETY INFORMATION

WARNINGS AND PRECAUTIONS (cont'd)

Embryofetal Toxicity: OFEV can cause fetal harm when administered to a pregnant woman and patients should be advised of the potential risk to a fetus. Women should be advised to avoid becoming pregnant while receiving OFEV and to use effective contraception during treatment and at least 3 months after the last dose of OFEV. Verify pregnancy status prior to starting OFEV.

Please see additional Important Safety Information throughout this brochure and full [Prescribing Information](#), including [Patient Information](#).



IMPORTANT SAFETY INFORMATION

WARNINGS AND PRECAUTIONS (cont'd)

Arterial Thromboembolic Events: Arterial thromboembolic events were reported in 2.5% of OFEV and 0.8% of placebo patients, respectively. Myocardial infarction was the most common arterial thromboembolic event, occurring in 1.5% of OFEV and 0.4% of placebo patients. Use caution when treating patients at higher cardiovascular risk including known coronary artery disease. Consider treatment interruption in patients who develop signs or symptoms of acute myocardial ischemia.

Risk of Bleeding: OFEV may increase the risk of bleeding. Bleeding events were reported in 10% of OFEV versus 7% of placebo patients. Use OFEV in patients with known risk of bleeding only if the anticipated benefit outweighs the potential risk. In the post-marketing period, non-serious and serious bleeding events, some of which were fatal, have been observed.

Gastrointestinal Perforation: OFEV may increase the risk of gastrointestinal perforation. Gastrointestinal perforation was reported in 0.3% of OFEV versus in 0% placebo patients. In the postmarketing period, cases of gastrointestinal perforations have been reported, some of which were fatal. Use caution when treating patients who have had recent abdominal surgery, previous history of diverticular disease or receiving concomitant corticosteroids or NSAIDs. Discontinue therapy with OFEV in patients who develop gastrointestinal perforation. Only use OFEV in patients with known risk of gastrointestinal perforation if the anticipated benefit outweighs the potential risk.

ADVERSE REACTIONS

- Adverse reactions reported in greater than or equal to 5% of OFEV patients included diarrhea, nausea, abdominal pain, liver enzyme elevation, vomiting, decreased appetite, weight decreased, headache, and hypertension.
- The most frequent serious adverse reactions reported in OFEV patients were bronchitis and myocardial infarction. The most common adverse events leading to death in OFEV patients versus placebo were pneumonia (0.7% vs. 0.6%), lung neoplasm malignant (0.3% vs. 0%), and myocardial infarction (0.3% vs. 0.2%). In the predefined category of major adverse cardiovascular events (MACE) including MI, fatal events were reported in 0.6% of OFEV versus 1.8% in placebo patients.

DRUG INTERACTIONS

- **P-glycoprotein (P-gp) and CYP3A4 Inhibitors and Inducers:** Coadministration with oral doses of a P-gp and CYP3A4 inhibitor, ketoconazole, increased exposure to nintedanib by 60%. Concomitant use of potent P-gp and CYP3A4 inhibitors (e.g., erythromycin) with OFEV may increase exposure to nintedanib. In such cases, patients should be monitored closely for tolerability of OFEV. Management of adverse reactions may require interruption, dose reduction, or discontinuation of therapy with OFEV. Coadministration with oral doses of a P-gp and CYP3A4 inducer, rifampicin, decreased exposure to nintedanib by 50%. Concomitant use of P-gp and CYP3A4 inducers (e.g., carbamazepine, phenytoin, and St. John's wort) with OFEV should be avoided as these drugs may decrease exposure to nintedanib.
- **Anticoagulants:** Nintedanib may increase the risk of bleeding. Monitor patients on full anticoagulation therapy closely for bleeding and adjust anticoagulation treatment as necessary.

USE IN SPECIFIC POPULATIONS

- **Nursing Mothers:** Because of the potential for serious adverse reactions in nursing infants from OFEV, advise women that breastfeeding is not recommended during treatment.
- **Reproductive Potential:** OFEV may reduce fertility in females of reproductive potential.
- **Smokers:** Smoking was associated with decreased exposure to OFEV, which may affect the efficacy of OFEV. Encourage patients to stop smoking prior to and during treatment.

INDICATION

OFEV (nintedanib) is indicated for the treatment of idiopathic pulmonary fibrosis (IPF).

CL-OF-100007 01.29.18

Please see Important Safety Information throughout and full [Prescribing Information](#), including [Patient Information](#).



CLINICAL EDUCATORS

Engage. Empower. Educate.™



OFEV[®]
(nintedanib)
capsules 150mg

An IPF Clinical Educator (CE) Can Partner With Your Practice – and Your Patients

A CE with expertise in IPF combines clinical knowledge and support for your patients

That means *your practice* can receive:

- In-office educational IPF-related discussions with an individual or group
- An educational meeting about OFEV[®] (nintedanib) with office staff on the use of OFEV capsules, as well as company-approved information, tools, and resources

And, *your IPF patients* can receive:

- One-on-one patient education for individuals who have been prescribed OFEV
- Assistance starting and what to know during therapy

Please see Important Safety Information throughout and full [Prescribing Information](#), including [Patient Information](#).

Registered trademarks are property of their respective owners.
Copyright © 2018, Boehringer Ingelheim Pharmaceuticals, Inc.
All rights reserved. (2/18) PC-US-102655

