

Obtaining Evrysdi

> Storing Evrysdi

> Taking Evrysdi

Support

FAQs

Important Safety Information



What is Evrysdi?

Important Safety Information

Before taking Evrysdi, tell your healthcare provider about all of your medical conditions, including if you: • are pregnant or plan to become pregnant, as Evrysdi may harm your unborn baby. Ask your healthcare provider for advice before taking this medicine

Evrysdi is a prescription medicine used to treat spinal muscular atrophy (SMA) in children and adults.

Please see additional Important Safety Information throughout and full Prescribing Information.

We come

A guide to getting started with Evrysdi liquid





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Welcome to the **Evrysdi community!**

Amber, mom and caregiver to Payton

Important Safety Information (continued)

Before taking Evrysdi, tell your healthcare provider about all of your medical conditions, including if you: are a woman who can become pregnant: - Before you start your treatment with Evrysdi, your healthcare provider may test you for pregnancy - Talk to your healthcare provider about birth control methods that may be right for you. Use birth control while on treatment and for at least 1 month after stopping Evrysdi



Please see additional Important Safety Information throughout and full Prescribing Information.

This guide is here to help you get started with treatment. Find answers to your questions and helpful resources by clicking the buttons to the left.

Andrea,

partner to Jose









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Shaniqua, living with Type 3 SMA

Important Safety Information

• are a woman who can become pregnant: - Pregnancy Registry. There is a pregnancy registry for women who take Evrysdi during pregnancy. The purpose of this registry is to collect information about the health of the pregnant woman and her baby. If you are pregnant or become pregnant while receiving Evrysdi, tell your healthcare provider right away. Talk to your healthcare provider about registering with the Evrysdi Pregnancy Registry. Your healthcare provider can enroll you in this registry or you can enroll by calling 1-833-760-1098 or visiting https://www.evrysdipregnancyregistry.com.



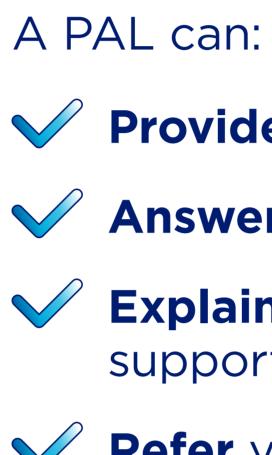
Alyson,

PAL

Shaniqua's

Where to Start: your local contact

The PAL (Partnership and Access Liaison) team are local points of contact at Genentech, Inc., who answer your questions and offer support and guidance.



Don't hesitate to reach out! Get connected at Evrysdi.com/PAL (833) 387-9734 (Monday-Friday, 9 AM to 8 PM ET)

• Before taking Evrysdi, tell your healthcare provider about all of your medical conditions, including if you:

Please see additional Important Safety Information throughout and full Prescribing Information.

Provide in-person or virtual support

Answer questions about Evrysdi

Explain insurance coverage and potential financial support options

Refer you to helpful resources





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Important Safety Information (continued)

• are an adult male. Evrysdi may affect a man's ability to have children (fertility). Ask a healthcare provider for advice before taking this medicine • are breastfeeding or plan to breastfeed. It is not known if Evrysdi passes into breast milk and may harm your baby

*Specialty pharmacies are not part of Genentech and maintain independence in their operations and in their role as a healthcare provider. ⁺The exact amount of Evrysdi you receive is based on your dose and how much your insurance plan allows to be delivered at one time.

• Before taking Evrysdi, tell your healthcare provider about all of your medical conditions, including if you:

Please see additional Important Safety Information throughout and full Prescribing Information.

Where to Start: a few things to note

Evrysdi is delivered directly to your door

A specialty pharmacy* will call you to schedule a time for your delivery

Each delivery includes all of the medicine and supplies you'll need for about 1 month⁺

You will need to store your Evrysdi in the refrigerator in the original amber bottle to protect it from light

Each shipment includes up to 3 bottles of liquid medicine





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Important Safety Information (continued)

• Tell your healthcare provider about all the medicines you take

• If you were prescribed Evrysdi for Oral Solution, you should receive Evrysdi from the pharmacy as a liquid. If the medicine in the bottle is a powder, do not use it. Contact your pharmacist for a replacement • Avoid getting Evrysdi on your skin or in your eyes. If Evrysdi gets on your skin, wash the area with soap and water. If Evrysdi gets in your eyes, rinse your eyes with water

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It can be helpful to set reminders on your





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Important Safety Information (continued)

• The most common side effects of Evrysdi include: • For later-onset SMA: fever, diarrhea, rash • For infantile-onset SMA: fever; diarrhea; rash; runny nose, sneezing and sore throat (upper respiratory infection); lung infection (lower respiratory infection); constipation; vomiting; cough These are not all of the possible side effects of Evrysdi. For more information on the risk and benefits profile of Evrysdi, ask your healthcare provider or pharmacist. Please see additional Important Safety Information throughout and full Prescribing Information.

Where to Start: when you have questions

FOR QUESTIONS ABOUT...

What to expect whe starting treatment, dose, potential side your results on Evry

Your delivery of Evi

Potential financial s options, storing or your medicine, plan travel, helpful resou can also ask your he provider or specialty pharmacy for help with these elements

*Enrollment in MySMA Support through the Evrysdi Start Form is mandatory to receive assistance through the program. Participation in MySMA Support is not necessary to receive treatment with Evrysdi.

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en your e effects, ysdi	V Your healthcare provider	
rysdi	The specialty pharmacy (the company that will call you to schedule your delivery)	
support taking nning for urces—you ealthcare	 ✓ MySMA Support™* or a PAL (833) 387-9734, Monday- Friday 9 AM to 8 рм ЕТ 	





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Important Safety Information

• Before taking Evrysdi, tell your healthcare provider about all of your medical conditions, including if you: • are pregnant or plan to become pregnant, as Evrysdi may harm your unborn baby. Ask your healthcare provider for advice before taking this medicine

Please see additional Important Safety Information throughout and full Prescribing Information.

Obtaining Evrysdi: your delivery

Evrysdi is delivered directly to your door by a specialty pharmacy.* Evrysdi is not available at retail pharmacies

• You will receive a call from the specialty pharmacy to welcome you and schedule a delivery time that works best for you. Your preferred delivery time will be confirmed each month

 Each delivery includes about a 1-month supply⁺ of medication and materials

If you have questions about your delivery, call your **specialty pharmacy**

*Specialty pharmacies are not part of Genentech and maintain independence in their operations and in their role as a healthcare provider. ⁺The exact amount of Evrysdi you receive is based on your dose and how much your





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Your shipment will also include full **Instructions for Use** and **Patient Information**. The specialty pharmacy will select the appropriate oral syringe (1 mL, 6 mL, or 12 mL) based on the dose prescribed by your healthcare provider and will include 1 or 2 in your shipment.

Important Safety Information (continued)

Before taking Evrysdi, tell your healthcare provider about all of your medical conditions, including if you: • are a woman who can become pregnant:

Please see additional Important Safety Information throughout and full Prescribing Information.

Obtaining Evrysdi: your delivery

- Before you start your treatment with Evrysdi, your healthcare provider may test you for pregnancy - Talk to your healthcare provider about birth control methods that may be right for you. Use birth control while on treatment and for at least 1 month after stopping Evrysdi

Up to 3 amber-colored bottles of liquid Evrysdi medication with bottle

1 or 2 reusable oral syringe(s)





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Storing Evrysdi: at home or when traveling

Storing your medicine

- or put the medicine in a different container
- If refrigeration is not available, Evrysdi can be kept at room temperature up to 104°F for a combined total of 5 days
- It can be removed from, and returned to, a refrigerator
- The total combined time out of refrigeration should not exceed 5 days
- Any portion of Evrysdi that has been kept above 104°F should be discarded
- Always store your medication in a safe place out of the reach of children
- the **Instructions for Use** that comes with your Evrysdi
- а PAL at (833) 387-9734, Monday-Friday, 9 AM to 8 PM ET

Important Safety Information

- are a woman who can become pregnant:

Please see additional Important Safety Information throughout and full Prescribing Information.

• Always store Evrysdi upright in the refrigerator (36°F to 46°F) in the original amber bottle to protect it from light. Do not freeze Evrysdi

 Discard any unused medication after 64 days. Be sure to check the "Discard After" date written on the bottle label, and carefully read

• To receive a **travel cooler** to help store your Evrysdi, please contact



• Before taking Evrysdi, tell your healthcare provider about all of your medical conditions, including if you:

- Pregnancy Registry. There is a pregnancy registry for women who take Evrysdi during pregnancy. The purpose of this registry is to collect information about the health of the pregnant woman and her baby. If you are pregnant or become pregnant while receiving Evrysdi, tell your healthcare provider right away. Talk to your healthcare provider about registering with the Evrysdi Pregnancy Registry. Your healthcare provider can enroll you in this registry or you can enroll by calling 1-833-760-1098 or visiting https://www.evrysdipregnancyregistry.com.





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Taking Evrysdi: your dose

Your healthcare provider determined your dose based on your age and weight. Always take your dose exactly as prescribed.

Be sure to tell your healthcare provider if you or the person in your care is taking:

- to starting Evrysdi

Important Safety Information (continued)

• Before taking Evrysdi, tell your healthcare provider about all of your medical conditions, including if you: • are an adult male. Evrysdi may affect a man's ability to have children (fertility). Ask a healthcare provider for advice before taking this medicine

may harm your baby

• Any other medications, vitamins, or dietary supplements, including any stool softeners

• Additional fiber that may impact bowel movements, as these may need to be adjusted prior

If you have questions about your dose, speak with your healthcare provider

• are breastfeeding or plan to breastfeed. It is not known if Evrysdi passes into breast milk and

Please see additional Important Safety Information throughout and full Prescribing Information.









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Taking Evrysdi: preparing your medicine

Before preparing your first dose



Please read the full **Patient Information** and **Instructions for Use** that come with your prescription and discuss with your healthcare provider before taking the first dose.

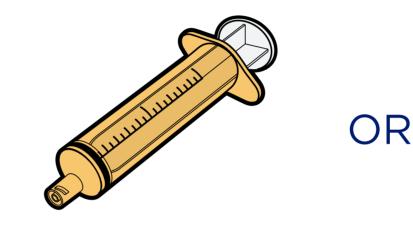
Important Safety Information (continued)

Your package comes with 1 or 2 reusable oral syringe(s) for taking or giving Evrysdi. Always take or give the dose exactly as prescribed by your healthcare provider, and administer with the reusable syringes that come with your prescription (they help protect **Evrysdi from light)**.

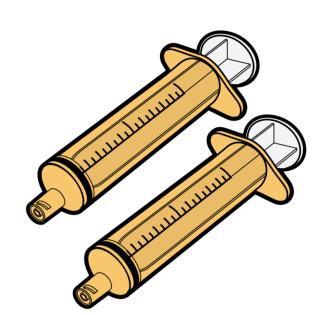
Tell your healthcare provider about all the medicines you take

• If you were prescribed Evrysdi for Oral Solution, you should receive Evrysdi from the pharmacy as a liquid. If the medicine in the bottle is a powder, **do not use it**. Contact your pharmacist for a replacement • Avoid getting Evrysdi on your skin or in your eyes. If Evrysdi gets on your skin, wash the area with soap and water. If Evrysdi gets in your eyes, rinse your eyes with water

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To start, take a clean oral syringe out of the box









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Taking Evrysdi: preparing your medicine

Next, fill the oral syringe with medication



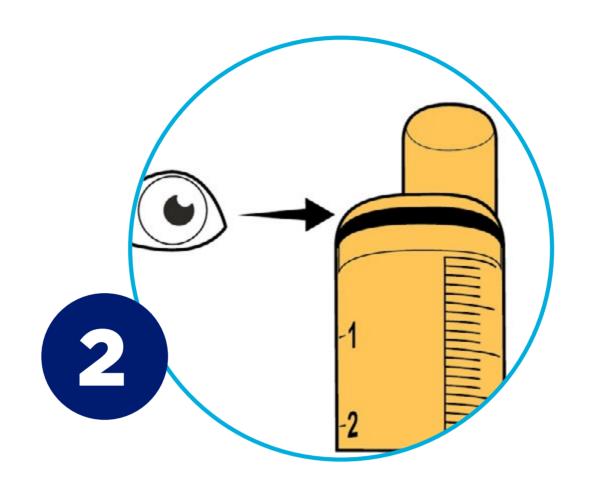
Take off the child-resistant cap by pushing it down and twisting to the left. Do not throw away the cap.



If you spill the Evrysdi liquid Dry the area with a paper towel and then clean with water. Throw away the paper towel in the trash and wash your hands well with soap and water. You do not need to wear gloves

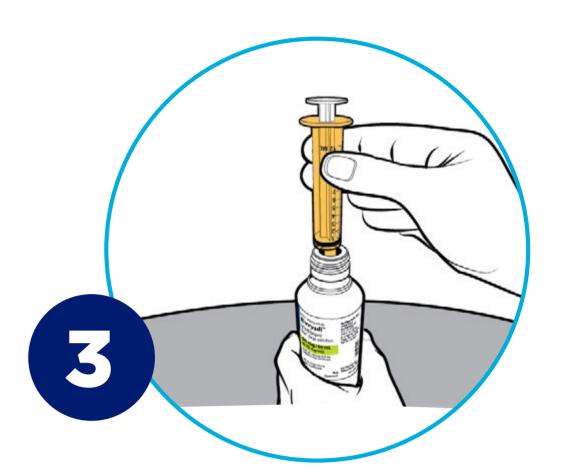
Important Safety Information (continued)

 The most common side effects of Evrysdi include: For later-onset SMA: fever, diarrhea, rash • For infantile-onset SMA: fever; diarrhea; rash; runny nose, sneezing and sore throat (upper respiratory infection); lung infection (lower respiratory infection); constipation; vomiting; cough These are not all of the possible side effects of Evrysdi. For more information on the risk and benefits profile of Evrysdi, ask your healthcare provider or pharmacist. Please see additional Important Safety Information throughout and full Prescribing Information.





Push the plunger of the syringe all the way down to remove any air inside.



Place the bottle upright on a flat surface, such as a table or counter. Insert the syringe tip into the bottle adapter.





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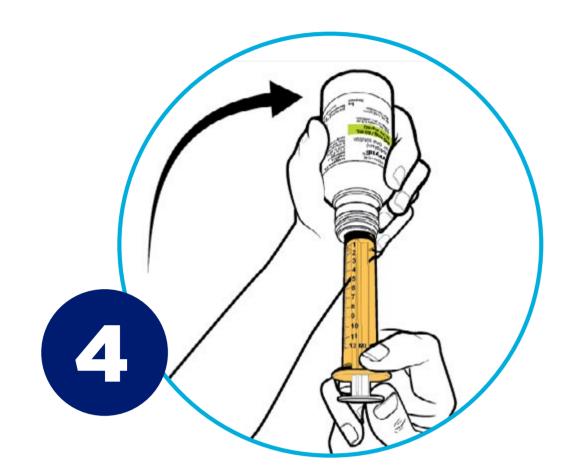
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Taking Evrysdi: preparing your medicine

Fill the oral syringe with medication (continued)



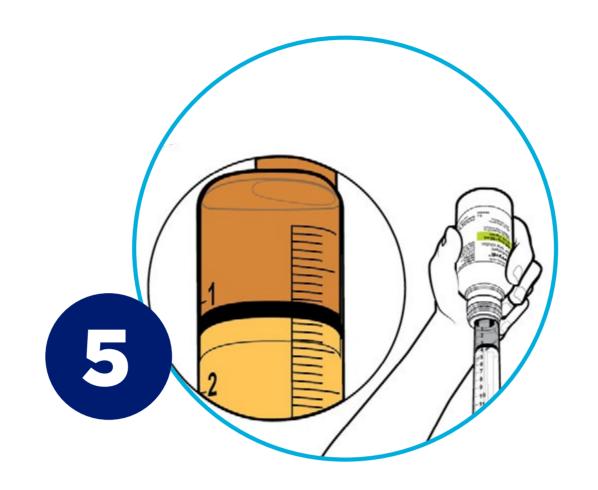
Carefully turn the bottle upside down, with the syringe tip firmly inserted into the bottle adapter.



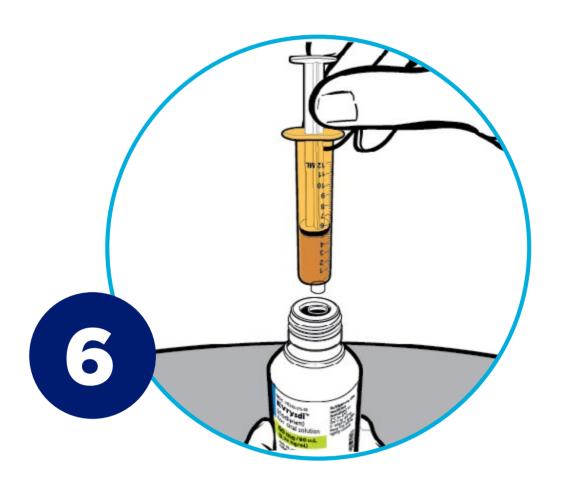
If you spill the Evrysdi liquid Dry the area with a paper towel and then clean with water. Throw away the paper towel in the trash and wash your hands well with soap and water. You do not need to wear gloves

Important Safety Information • Before taking Evrysdi, tell your healthcare provider about all of your medical conditions, including if you: • are pregnant or plan to become pregnant, as Evrysdi may harm your unborn baby. Ask your healthcare provider for advice before taking this medicine

Please see additional Important Safety Information throughout and full Prescribing Information.



Slowly pull back on the plunger to withdraw the prescribed dose. The top of the black stopper should line up with the mL marking that corresponds to the prescribed dose volume.



After the correct dose is withdrawn, continue to hold the plunger in place to keep it from moving. Leave the syringe in the bottle adapter and turn the bottle upright again. Return the bottle to the flat surface and gently remove the syringe by pulling straight up while holding the plunger in place.





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Taking Evrysdi: preparing your medicine

Fill the oral syringe with medication (continued)

Hold the syringe with the tip pointing up. Check the syringe to ensure there aren't any air bubbles in the medication. If you see bubbles (especially larger ones), you may not have the correct amount of medication. If bubbles occur, put the syringe tip firmly into the bottle adapter and use the plunger to put the medication back in the bottle, then repeat steps 4-7.

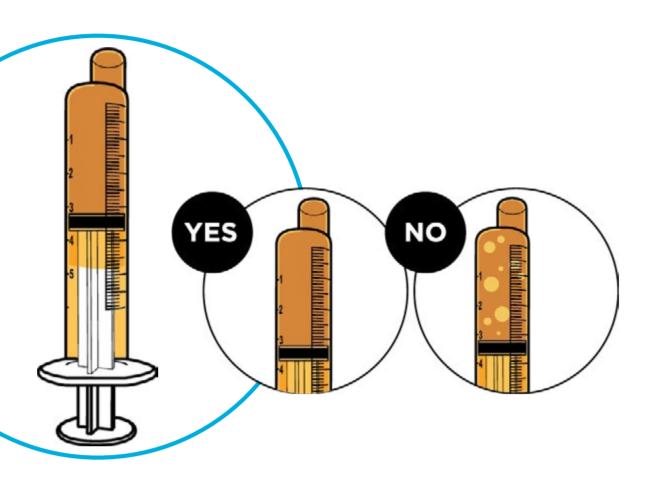


Give or take Evrysdi right away after it's drawn into the syringe If it is not taken within 5 minutes, do not take that dose, empty the syringe by throwing away the unused medication in the household trash (but do not throw away the syringe), and prepare a new dose

Important Safety Information (continued)

are a woman who can become pregnant:

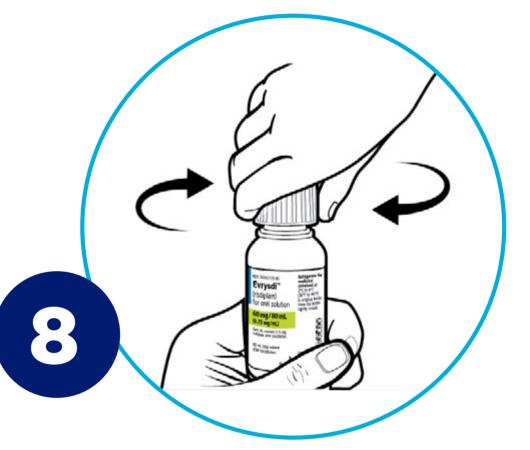
- Before you start your treatment with Evrysdi, your healthcare provider may test you for pregnancy - Talk to your healthcare provider about birth control methods that may be right for you. Use birth control while on treatment and for at least 1 month after stopping Evrysdi



Return the cap to the bottle. Turn the cap to the right and make sure it's on tight before returning the bottle to the refrigerator.

Before taking Evrysdi, tell your healthcare provider about all of your medical conditions, including if you:

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Taking Evrysdi: by mouth

You or the person in your care should sit upright while taking Evrysdi



Place the tip of the oral syringe inside the mouth, touching the inside of either cheek. To avoid choking, do not put the syringe toward the back of the mouth. Slowly push the plunger all the way down until all of the medication is emptied from the syringe. **Pushing the plunger** too quickly may cause choking.

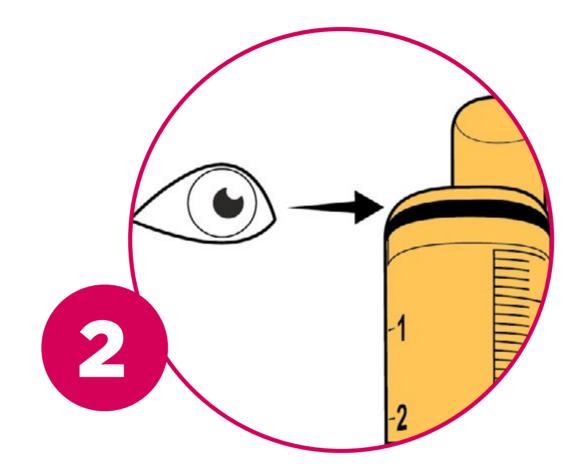


When to take Evrysdi You or the person in your care should take Evrysdi at the same time every day. Evrysdi can be taken with or without food. It should not be mixed directly into foods or other liquids

Important Safety Information

- are a woman who can become pregnant:





Check the syringe to make sure there is no Evrysdi left inside.

• Before taking Evrysdi, tell your healthcare provider about all of your medical conditions, including if you:

- Pregnancy Registry. There is a pregnancy registry for women who take Evrysdi during pregnancy. The purpose of this registry is to collect information about the health of the pregnant woman and her baby. If you are pregnant or become pregnant while receiving Evrysdi, tell your healthcare provider right away. Talk to your healthcare provider about registering with the Evrysdi Pregnancy Registry. Your healthcare provider can enroll you in this registry or you can enroll by calling 1-833-760-1098 or visiting https://www.evrysdipregnancyregistry.com.

Please see additional Important Safety Information throughout and full Prescribing Information.



You or the person in your care should drink some water (about 1 tablespoon) after swallowing the medication to ensure all the medication is swallowed.







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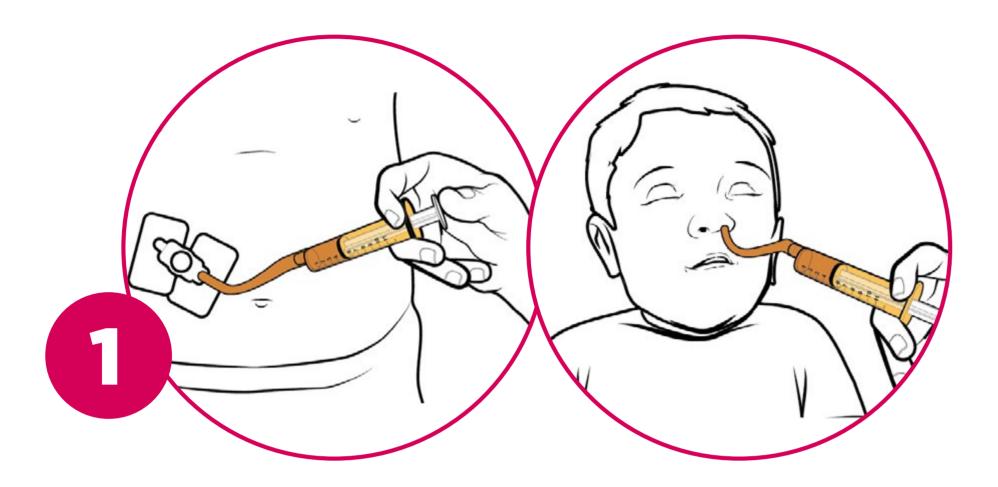
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Taking Evrysdi: by feeding tube



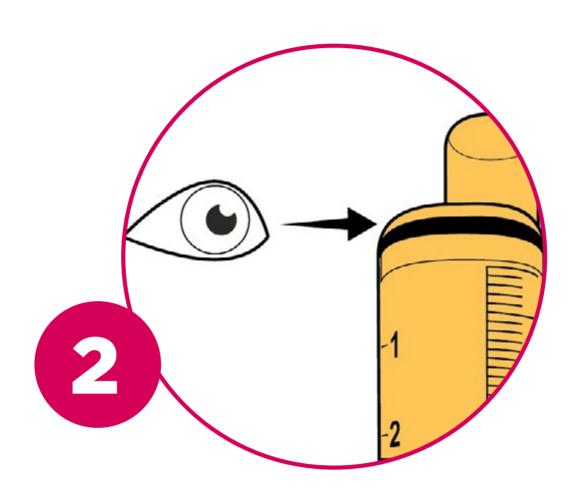
Place the tip of the syringe into the G- or NG-tube. Slowly push the plunger all the way down until the syringe is empty.

G=gastrostomy; NG=nasogastric.

Important Safety Information (continued)

• Before taking Evrysdi, tell your healthcare provider about all of your medical conditions, including if you: • are an adult male. Evrysdi may affect a man's ability to have children (fertility). Ask a healthcare provider for advice before taking this medicine

may harm your baby



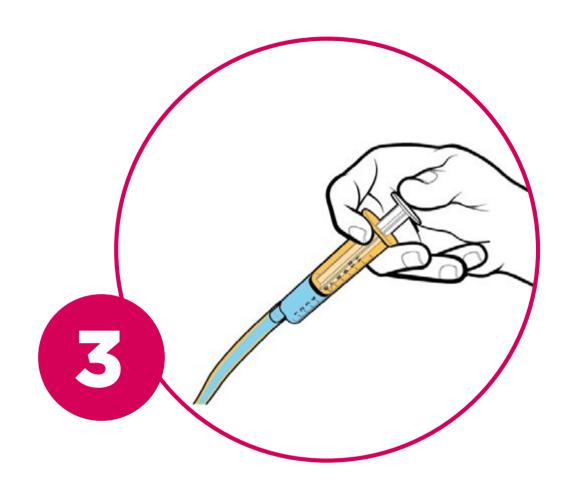
Be sure to check the syringe to ensure all Evrysdi has been given.



You can find a video demonstrating how to take Evrysdi here

• are breastfeeding or plan to breastfeed. It is not known if Evrysdi passes into breast milk and

Please see additional Important Safety Information throughout and full Prescribing Information.



Flush the feeding tube with water (about 2 to 4 teaspoons) right after giving the prescribed dose.









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think choice is always important in any situation, but most certainly when it comes to your body. Evrysdi for me is taking action. -Angela, living with Type 2 SMA

Important Safety Information (continued)

Taking Evrysdi: important reminders

WHAT TO DO:

If the medication is spit up or not fully swallowed

- Do not give any more medication that day

If a dose is missed

- 6 hours after the usual dosing time
- take or give the next dose the following day

Tell your healthcare provider about all the medicines you take

• If you were prescribed Evrysdi for Oral Solution, you should receive Evrysdi from the pharmacy as a liquid. If the medicine in the bottle is a powder, **do not use it**. Contact your pharmacist for a replacement • Avoid getting Evrysdi on your skin or in your eyes. If Evrysdi gets on your skin, wash the area with soap and water. If Evrysdi gets in your eyes, rinse your eyes with water

Please see additional Important Safety Information throughout and full Prescribing Information.

• Wait until the next day to give the next dose at the usual dosing time

• The missed dose should be taken as soon as possible, but no more than

If more than 6 hours have passed, skip the missed dose altogether and





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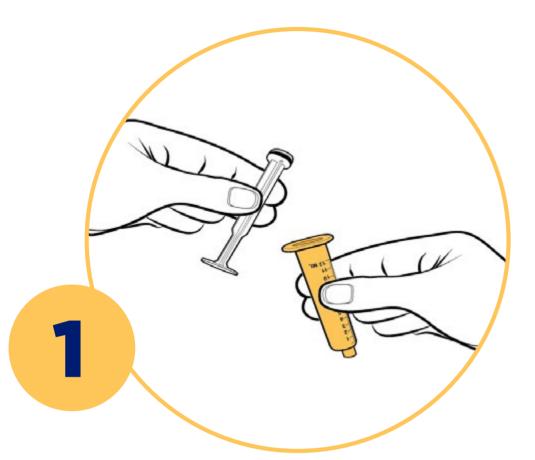
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Taking Evrysdi: cleaning up

Clean the oral syringe for reuse



Separate the plunger from the syringe by pulling the plunger away from the syringe tip until it comes out of the syringe completely.

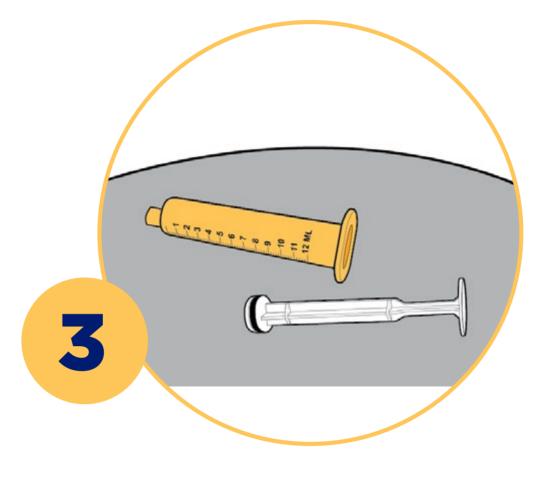
Important Safety Information (continued)

 The most common side effects of Evrysdi include: • For later-onset SMA: fever, diarrhea, rash • For infantile-onset SMA: fever; diarrhea; rash; runny nose, sneezing and sore throat (upper respiratory infection); lung infection (lower respiratory infection); constipation; vomiting; cough These are not all of the possible side effects of Evrysdi. For more information on the risk and benefits profile of Evrysdi, ask your healthcare provider or pharmacist. Please see additional Important Safety Information throughout and full Prescribing Information.





Rinse both pieces thoroughly with water.



Once clean, let them dry on a clean surface.



Always clean the syringe and plunger by hand, and never put it in the dishwasher



Be sure to wash your hands with soap and water after cleaning the syringe. After the oral syringe barrel and plunger are dry, put the plunger back into the oral syringe barrel, and store the syringe with your medicine.









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Taking Evrysdi: cleaning up (cont'd)



How to dispose of Evrysdi

provider for more information

If there is something wrong with your delivery

If you notice leakage on any bottle, dry off the bottle with a dry paper towel, then rinse the closed bottle with water. Store the bottle out of sight and out of reach of children. Call Genentech Product Complaints at **1-800-334-0290** to coordinate your free replacement and receive further instructions.

eyes with water.

Important Safety Information

• Before taking Evrysdi, tell your healthcare provider about all of your medical conditions, including if you: • are pregnant or plan to become pregnant, as Evrysdi may harm your unborn baby. Ask your healthcare provider for advice before taking this medicine

Please see additional Important Safety Information throughout and full Prescribing Information.

 Follow your local guidelines for proper disposal of medication. Visit www.fda.gov/drugs/ensuring-safe-use-medicine/safe-disposal-medicines or contact your healthcare

• If you receive an incomplete order, a broken bottle, or medication in powder form, do not take the medication you received, and contact your specialty pharmacy immediately

Contact your specialty pharmacy with questions about shipping and packaging

If Evrysdi gets on your skin, wash the area with soap and water. If Evrysdi gets in your eyes, rinse your







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Taking Evrysdi: dos and don'ts

Do ask your healthcare provider how to use the reusable oral syringe and how to measure your prescribed daily dose

Do always use the oral syringes provided and contact your specialty pharmacy immediately if you receive oral syringes that are not identical in size

Do take the dose of Evrysdi that your healthcare provider has prescribed to you or the person in your care

Do take the dose at the same time every day \checkmark

If you have questions about how to take Evrysdi, contact your healthcare provider. A PAL may also be able to answer questions about Evrysdi. To connect with a PAL, call (833) 387-9734, Monday-Friday, 9 AM to 8 PM ET

Important Safety Information (continued)

• are a woman who can become pregnant:

DO

Do store medication upright in the original amber bottle and close the bottle cap completely after using

Do keep Evrysdi cool (36°F to 46°F). Evrysdi should be stored in the refrigerator. Always store medication in a safe place out of the reach of children

Do check the expiration date so you don't use expired medication (Evrysdi expires 64 days after being prepared by a pharmacist)

Do ask your specialty pharmacy for the **Discard After** date if it is not written on the bottle label

Before taking Evrysdi, tell your healthcare provider about all of your medical conditions, including if you:

- Before you start your treatment with Evrysdi, your healthcare provider may test you for pregnancy - Talk to your healthcare provider about birth control methods that may be right for you. Use birth control while on treatment and for at least 1 month after stopping Evrysdi

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Taking Evrysdi: dos and don'ts

X Do not use Evrysdi if the bottle adapter is not in the bottle. Contact your specialty pharmacy immediately if you receive a bottle without an adapter

X Do not use Evrysdi if it is in powder form, or if the bottle is damaged. Contact your specialty pharmacy immediately if you receive a bottle containing Evrysdi in powder form

X Do not get Evrysdi on your skin or in your eyes. If it gets on your skin, wash with soap and water. If it gets in your eyes, flush with water

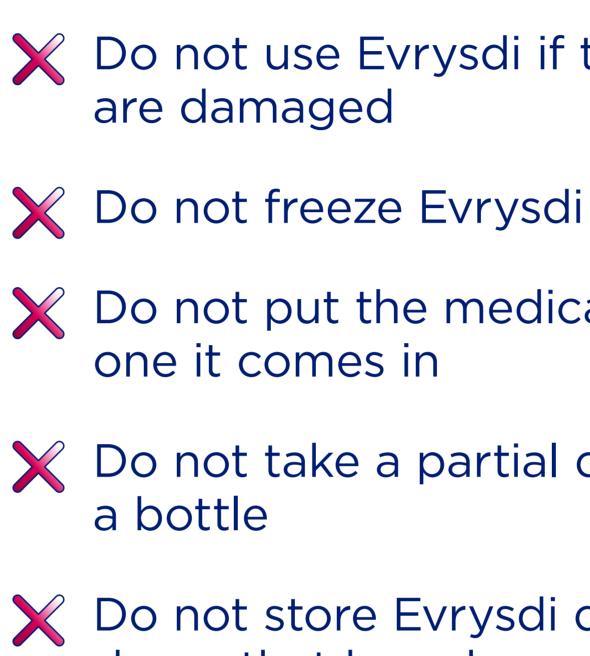
X Do not mix Evrysdi into foods, liquids, formula, or milk

If you have questions about how to take Evrysdi, contact your healthcare provider. A PAL may also be able to answer questions about Evrysdi. To connect with a PAL, call (833) 387-9734, Monday-Friday, 9 AM to 8 PM ET

Important Safety Information

- are a woman who can become pregnant:

DON'T



and prepare a new dose

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Please see additional Important Safety Information throughout and full Prescribing Information.

X Do not use Evrysdi if the bottle or oral syringes

X Do not put the medication in a different container from the

X Do not take a partial dose, even if that is all you have left in

X Do not store Evrysdi doses in the oral syringe—discard any doses that have been in the syringe for more than 5 minutes







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Support: we're here for you

MySMA Support is a service from Genentech that can help provide information about Evrysdi

The team is available to:



answer your questions

provide information about Evrysdi, including how to take it

MySMA Support, including the PAL, does not provide medical advice and is not a substitute for your medical team.* Your healthcare provider should always be your main resource for any questions about your health and medical care.

*Enrollment in MySMA Support through the Evrysdi Start Form is mandatory to receive assistance through the program. Participation in MySMA Support is not necessary to receive treatment with Evrysdi.

Important Safety Information (continued)

• Before taking Evrysdi, tell your healthcare provider about all of your medical conditions, including if you: • are an adult male. Evrysdi may affect a man's ability to have children (fertility). Ask a healthcare provider for advice before taking this medicine

- may harm your baby





help you understand your insurance coverage

refer you to appropriate Evrysdi financial assistance options

To contact the MySMA Support team: Visit Evrysdi.com/PAL or call (833) 387-9734 (Monday-Friday, 9 AM to 8 PM ET)

• are breastfeeding or plan to breastfeed. It is not known if Evrysdi passes into breast milk and

Please see additional Important Safety Information throughout and full Prescribing Information.



coordinate the preparation and delivery of your medicine with the specialty pharmacy





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Support: meet the team

Your primary contact: PALs

Partnership and Access Liaisons (PALs) are the local, main points of contact from Genentech here to support you. Contact a PAL for answers to questions about Evrysdi (including how it works, how to take it, what results were seen in clinical trials, and Important Safety Information), for help understanding your insurance coverage and potential financial support options, and to be connected to helpful resources.

Additional support: Case Managers

While a PAL is your main point of contact, Case Managers partner closely with PALs and healthcare providers to help you understand the health insurance process and identify potential financial support options for Evrysdi.

Shaniqua, living with Type 3 SMA

Important Safety Information (continued)



Tell your healthcare provider about all the medicines you take

• If you were prescribed Evrysdi for Oral Solution, you should receive Evrysdi from the pharmacy as a liquid. If the medicine in the bottle is a powder, **do not use it**. Contact your pharmacist for a replacement • Avoid getting Evrysdi on your skin or in your eyes. If Evrysdi gets on your skin, wash the area with soap and water. If Evrysdi gets in your eyes, rinse your eyes with water

Please see additional Important Safety Information throughout and full Prescribing Information.

MySMA Support, including the PAL, does not provide medical advice and is not a substitute for your medical team. Your healthcare provider should always be your main resource for any questions about your health and medical care







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Support: financial options

Your insurance coverage affects the type of financial support you may be eligible for. Depending on your insurance, support options may include one of the following:

Evrysdi Co-pay Program*

You pay as little as \$0 per prescription for Evrysdi if you qualify for the Evrysdi Co-pay program. The program covers the rest, up to \$25,000 per calendar year.

*This Evrysdi Co-pay Program is valid ONLY for patients with commercial insurance who have a valid prescription for a Food and Drug Administration (FDA)-approved indication of a Genentech medication. Patients using Medicare, Medicaid or any other federal or state government program to pay for their medicines are not eligible. Full program terms and conditions can be found here.

For more information

A detailed guide to insurance and financial assistance options can be found on our website. If you have questions about possible financial support options, contact MySMA Support at (833) 387-9734 (Monday-Friday, 9 AM to 8 PM ET)

Important Safety Information (continued)

 The most common side effects of Evrysdi include: • For later-onset SMA: fever, diarrhea, rash • For infantile-onset SMA: fever; diarrhea; rash; runny nose, sneezing and sore throat (upper respiratory infection); lung infection (lower respiratory infection); constipation; vomiting; cough These are not all of the possible side effects of Evrysdi. For more information on the risk and benefits profile of Evrysdi, ask your healthcare provider or pharmacist. Please see additional Important Safety Information throughout and full Prescribing Information.



foundation.

Independent Co-pay Foundations⁺ If you need help with the co-pay for your Evrysdi, we can refer you to

an independent co-pay assistance

⁺Independent co-pay assistance foundations have their own rules for eligibility. Genentech has no involvement or influence in independent foundation decisionmaking or eligibility criteria and does not know if a foundation will be able to help you. We can only refer you to a foundation that supports your disease state. Genentech does not endorse or show preference for any particular foundation. The foundations we refer you to may not be the only ones that might be able to help you.



The Genentech Patient Foundation[‡]

The Genentech Patient Foundation gives free Evrysdi to people who don't have insurance coverage or who have financial concerns and meet eligibility criteria.

[‡]If you have health insurance, you should try to get other types of financial assistance, if available. You also need to meet income requirements. If you do not have insurance, or if your insurance does not cover your Genentech medicine, you must meet a different set of income requirements. Genentech reserves the right to modify or discontinue the program at any time and to verify the accuracy of information submitted.









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Support: helpful reminders

Remembering to \checkmark take your daily dose

Support for insurance questions

V Planning ahead for renewals

any treatments.

Important Safety Information • Before taking Evrysdi, tell your healthcare provider about all of your medical conditions, including if you: • are pregnant or plan to become pregnant, as Evrysdi may harm your unborn baby. Ask your healthcare provider for advice before taking this medicine

Please see additional Important Safety Information throughout and full Prescribing Information.

It can be helpful to set daily reminders on your phone or calendar, and to take Evrysdi at the same time each day, so it can become part of your routine.

The MySMA Support team can help navigate insurance and financial assistance questions and coordinate with your healthcare provider and insurance company.^{*} You can reach them Monday-Friday, 9 AM to 8 PM ET at (833) 387-9734. You can also find detailed information on our website.

If you and your healthcare provider decide to continue with Evrysdi, your insurance company may require specific tests every 6 to 12 months to approve the renewal of your Evrysdi prescription. It's a good idea to plan ahead for any appointments you may need in advance. The MySMA Support team can help you determine what may be required.

*You and your healthcare provider are responsible for completing and submitting all required paperwork to your health insurance plan. Genentech cannot guarantee your plan will cover







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Support: tracking your results

Since everyone's experience with a new treatment can be different, it can be helpful to keep track of your goals and results over time, and to discuss both with your healthcare provider.

Print these pages when starting

Why I chose Evrysdi:

The skills I have now that are im My expectations for the first 6 n

My expectations over time (yea

How it's going (how I feel, chang

After 1 month

After 4 months

After 8 months

After 1 year

Just a note!

This welcome kit includes a **blank journal** you can use to track your results and make notes, and a **reusable cling** where you can write key contact information and keep track of your dosing for easy reference

Important Safety Information (continued)

Before taking Evrysdi, tell your healthcare provider about all of your medical conditions, including if you: • are a woman who can become pregnant:

portant for me to maintain:	
nonths on Evrysdi:	
rs):	
ges I've noticed):	My scores (on tests my healthcare provider may use to measure my progress):
	Before starting Evrysdi
	After 6 months
	Aftar 1 year
	After 1 year
	After 1 year

- Before you start your treatment with Evrysdi, your healthcare provider may test you for pregnancy - Talk to your healthcare provider about birth control methods that may be right for you. Use birth control while on treatment and for at least 1 month after stopping Evrysdi

Please see additional Important Safety Information throughout and full Prescribing Information.





)	
1	



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Support: questions for your healthcare provider

Questions to discuss with my healthcare provider:

- medicines)?
- helpful to talk to a nutritionist?

- How should I expect to feel on treatment?
- What results should I expect from treatment?
- How will we measure my progress?

Additional questions:

Important Safety Information

- are a woman who can become pregnant:

Should I adjust any of the medications I am taking (including vitamins, fiber supplements, laxatives, and prescription

• Are there any aspects of my nutrition that we may need to adjust, including my diet or typical meal times? Would it be

• What side effects could I experience when starting treatment or as I continue on treatment?

If I do experience side effects, what should my plan be to address them?

• Are there any tests I may need to plan for to renew my prescription each year?

• Before taking Evrysdi, tell your healthcare provider about all of your medical conditions, including if you:

- Pregnancy Registry. There is a pregnancy registry for women who take Evrysdi during pregnancy. The purpose of this registry is to collect information about the health of the pregnant woman and her baby. If you are pregnant or become pregnant while receiving Evrysdi, tell your healthcare provider right away. Talk to your healthcare provider about registering with the Evrysdi Pregnancy Registry. Your healthcare provider can enroll you in this registry or you can enroll by calling 1-833-760-1098 or visiting https://www.evrysdipregnancyregistry.com.

Please see additional Important Safety Information throughout and full Prescribing Information.







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Support: things you can do about common side effects

Every time you start a new medication, it's important to know about the potential side effects, what to look out for, and steps to take if they happen.

As always, your healthcare provider is the best resource for any questions. It's important to talk to your healthcare provider if you notice any changes, begin any new medication, or make changes in your overall care. Below are some tips that may help if you experience these changes.

If you experience diarrhea:

- It means you have loose, watery, and more-frequent bowel movements
- Some dietary tips you can consider include:
- Drinking more fluids, such as water, broths, and juices
- Avoiding juices or foods that have a laxative effect, such as prunes or prune juice
- crackers, toast, eggs, rice, or chicken
- seasoned foods for a few days
- In Evrysdi clinical studies, 17% of adults and children taking lasted longer than 2 weeks
- Talk to your healthcare provider if you are taking other

*Cases with a known duration.

Important Safety Information (continued)

- for advice before taking this medicine
- may harm your baby

Please see additional Important Safety Information throughout and full Prescribing Information.

Eating semisolid and low-fiber food gradually, such as soda

Avoiding dairy products, fatty foods, high-fiber foods, or highly

Evrysdi experienced diarrhea, with a similar frequency in infants.

The majority of cases* (8 out of 10) lasted less than 1 week; 12%

medications, vitamins, or dietary supplements, including any stool softeners or additional fiber that may impact bowel movements

If you experience rash:

- - infected)

• Before taking Evrysdi, tell your healthcare provider about all of your medical conditions, including if you: • are an adult male. Evrysdi may affect a man's ability to have children (fertility). Ask a healthcare provider

• are breastfeeding or plan to breastfeed. It is not known if Evrysdi passes into breast milk and

• It means you have an area of irritated or swollen skin; it may be itchy and red Some tips you can consider include: - Using moisturizer or lotions - Taking a cool bath - Avoiding harsh soaps Using cortisone cream to relieve swelling (if not Avoiding wearing tight clothing









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Support: important phone numbers

For an easy reference, enter your key contacts in the fields below, then click save.

My PAL: **Specialty Pharmacy:**

Support

MySMA Support:

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Notes:

Important Safety Information (continued)

Please see additional Important Safety Information throughout and full Prescribing Information.

(833) 387-9734

• Tell your healthcare provider about all the medicines you take

• If you were prescribed Evrysdi for Oral Solution, you should receive Evrysdi from the pharmacy as a liquid. If the medicine in the bottle is a powder, do not use it. Contact your pharmacist for a replacement • Avoid getting Evrysdi on your skin or in your eyes. If Evrysdi gets on your skin, wash the area with soap and water. If Evrysdi gets in your eyes, rinse your eyes with water





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Frequently asked questions

Can I get Evrysdi from a retail pharmacy? \checkmark

Evrysdi is only available through a specialty pharmacy. Once prescribed, it will be shipped directly to your door.

\checkmark it's safe for use?

Contact your specialty pharmacy representative right away to confirm your product is safe to take.

of the contents of my shipment (bottles, oral syringes, etc) are damaged, or if the seal on my medication is broken?

Contact your specialty pharmacy representative right away.



What should I do if my bottle of Evrysdi is leaking?

If you notice leakage on any bottle, dry off the bottle with a dry paper towel, then rinse the closed bottle with water. Store the bottle out of sight and reach of children. Call Genentech Product Complaints at 1-800-334-0290 to coordinate your free replacement and receive further instructions. If Evrysdi gets on your skin, wash the area with soap and water. If Evrysdi gets in your eyes, rinse your eyes with water.

Important Safety Information (continued)

 The most common side effects of Evrysdi include: • For later-onset SMA: fever, diarrhea, rash • For infantile-onset SMA: fever; diarrhea; rash; runny nose, sneezing and sore throat (upper respiratory infection); lung infection (lower respiratory infection); constipation; vomiting; cough These are not all of the possible side effects of Evrysdi. For more information on the risk and benefits profile of Evrysdi, ask your healthcare provider or pharmacist. Please see additional Important Safety Information throughout and full Prescribing Information.

If my delivery arrives later than expected, how do I know

What should I do if there is an issue with my order, if any

If you have trouble with the packaging, contact your specialty pharmacy.

Should my product have a temperature tag?

Evrysdi does not require a temperature tag. You should keep Evrysdi refrigerated at 36°F to 46°F at all times. Contact your specialty pharmacy if you have any questions about the correct temperature for your medicine.

Can Evrysdi be kept at room temperature?

If refrigeration is not available, Evrysdi can be kept at room temperature up to 104°F for a combined total of 5 days. It can be removed from, and returned to, a refrigerator. The total combined time out of refrigeration should not exceed 5 days.

Any portion of Evrysdi that has been kept above 104°F should be discarded.

Contact your specialty pharmacy if you have any questions.

What if I have trouble with the packaging?





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Frequently asked questions (cont'd)

How long can Evrysdi be stored in the refrigerator? \checkmark

The medication lasts up to 64 days after being prepared by a pharmacist. An expiration date will be indicated on the bottle of Evrysdi. It may be helpful to mark that date on your calendar. If you receive a bottle without the "Discard After" date written on the bottle label, contact your specialty pharmacy.



How should I store Evrysdi while traveling?

If you or the person in your care will be away from home, store Evrysdi in an insulated cooler (36°F to 46°F with ice packs), but do not freeze it. Store Evrysdi upright in the original amber bottle to protect it from light. We can send you an Evrysdi travel cooler if you need one. If traveling by plane, your healthcare provider may give you a letter authorizing you to fly with liquid medication. Talk to your healthcare provider about the best way to travel with Evrysdi.



Can I take Evrysdi with food or mix it with liquid outside of the oral syringe?

breast milk) and should only be taken with the approved oral syringe, which has been designed to protect the solution from light.

Important Safety Information

• Before taking Evrysdi, tell your healthcare provider about all of your medical conditions, including if you: • are pregnant or plan to become pregnant, as Evrysdi may harm your unborn baby. Ask your healthcare provider for advice before taking this medicine

- Evrysdi can be taken with or without food. It should not be
- mixed directly with any food or liquid (including formula or

What do I need to know about nutrition when starting Evrysdi?

Before starting treatment, tell your healthcare provider what foods you or the person in your care generally eats, as well as your typical meal times. Discuss if any part of your routine may need to be adjusted, such as dairy products, fatty foods, high-fiber foods, highly seasoned foods, or foods that have a laxative effect.

What should I do if my child spits up, vomits, or doesn't swallow the whole dose after I give the medication?

Do not give any more medication that day. Wait until the next day to give the next dose at the usual dosing time. If your child continues to spit up or vomit while taking Evrysdi, talk to your healthcare provider.





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Frequently asked questions (cont'd)

\checkmark

Everyone reacts differently when starting a new treatment. Side effects can occur for a number of reasons, including interactions with other medications you may be taking.

Before starting treatment, tell your healthcare provider if you or the person in your care is taking any other medications, vitamins, or dietary supplements, including any stool softeners or additional fiber that may impact bowel movements. Your healthcare provider may wish to adjust these medications prior to starting Evrysdi.

The most common side effects of Evrysdi for later-onset SMA and infantile-onset SMA include fever, diarrhea, and rash. Infantile-onset SMA also included upper respiratory infection, lower respiratory infection, constipation, vomiting, and cough.

In clinical trials, 17% of adults and children and 15% of infants taking Evrysdi experienced diarrhea. The majority (8 out of 10) of cases^{*} of diarrhea lasted less than 1 week and 12% of cases lasted longer than 2 weeks. See page 28 for some helpful tips if you experience diarrhea, and be sure to speak with your healthcare provider.

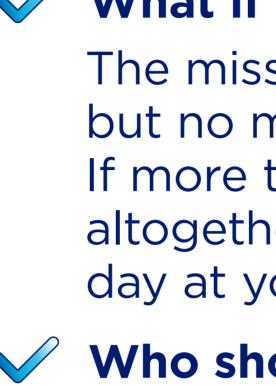
*Cases with a known duration.

Important Safety Information (continued)

Before taking Evrysdi, tell your healthcare provider about all of your medical conditions, including if you: • are a woman who can become pregnant:

Please see additional Important Safety Information throughout and full Prescribing Information.

What side effects should I expect when starting Evrysdi?



Evrysdi? Your healthcare provider should always be your main resource for any questions about your health and medical care. You can also contact MySMA Support to connect with a PAL, who can answer questions about Evrysdi, and refer you to helpful resources. PALs can also help you understand your insurance and financial support options. Contact MySMA Support at (833) 387-9734 (Monday-Friday, 9 AM to 8 PM ET).

- Before you start your treatment with Evrysdi, your healthcare provider may test you for pregnancy - Talk to your healthcare provider about birth control methods that may be right for you. Use birth control while on treatment and for at least 1 month after stopping Evrysdi

What if a dose is missed?

The missed dose should be taken as soon as possible, but no more than 6 hours after the usual dosing time. If more than 6 hours have passed, skip the missed dose altogether and take or give the next dose the following day at your regularly scheduled time.

Who should I call if I have other questions about





Obtaining Evrysdi

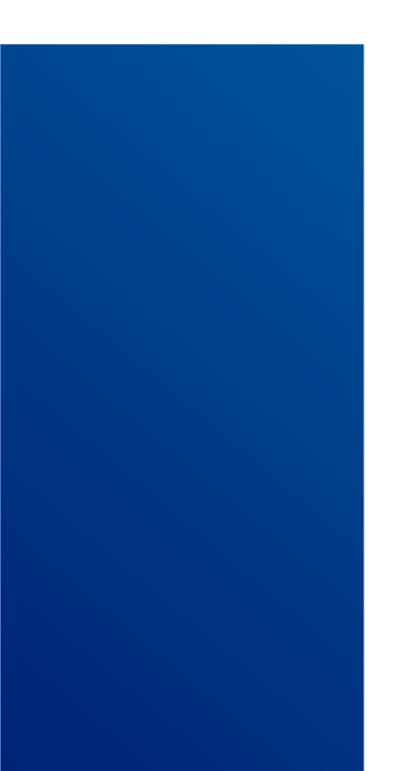
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Important Safety Information

What is Evrysdi?

Evrysdi is a prescription medicine used to treat spinal muscular atrophy (SMA) in children and adults.

Important Safety Information

Before taking Evrysdi, tell your healthcare provider about all of your medical conditions, including if you:



• are pregnant or plan to become pregnant, as Evrysdi may harm your unborn baby. Ask your healthcare provider for advice before taking this medicine

- are a woman who can become pregnant:
- Before you start your treatment with Evrysdi, your healthcare provider may test you for pregnancy
- Talk to your healthcare provider about birth control methods that may be right for you. Use birth control while on treatment and for at least 1 month after stopping Evrysdi
- **Pregnancy Registry.** There is a pregnancy registry for women who take Evrysdi during pregnancy. The purpose of this registry is to collect information Evrysdi, tell your healthcare provider right away. Talk to your healthcare provider about registering provider can enroll you in this registry or you can enroll by calling 1-833-760-1098 or visiting https://www.evrysdipregnancyregistry.com.



• are an adult male. Evrysdi may affect a man's ability to have children (fertility). Ask a healthcare provider for advice before taking this medicine

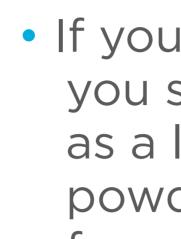


about the health of the pregnant woman and her baby. If you are pregnant or become pregnant while receiving with the Evrysdi Pregnancy Registry. Your healthcare

• are breastfeeding or plan to breastfeed. It is not known if Evrysdi passes into breast milk and may harm your baby











The most common side effects of Evrysdi include:

- For later-onset SMA:
- fever - diarrhea
- rash
- For infantile-onset SMA:
- fever
- diarrhea
- rash
- runny nose, sneezing
- and sore throat (upper

You may report side effects to the FDA at 1-800-FDA-1088 or www.fda.gov/medwatch. You may also report side effects to Genentech at 1-888-835-2555.

Please see full <u>Prescribing Information</u> for additional **Important Safety Information**.

Tell your healthcare provider about all the medicines you take

 If you were prescribed Evrysdi for Oral Solution, you should receive Evrysdi from the pharmacy as a liquid. If the medicine in the bottle is a powder, do not use it. Contact your pharmacist for a replacement

 Avoid getting Evrysdi on your skin or in your eyes. If Evrysdi gets on your skin, wash the area with soap and water. If Evrysdi gets in your eyes, rinse your eyes with water

- respiratory infection)
- lung infection (lower respiratory infection)
- constipation
- vomiting
- cough

These are not all of the possible side effects of Evrysdi. For more information on the risk and benefits profile of Evrysdi, ask your healthcare provider or pharmacist.





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Important Safety Information

• are a woman who can become pregnant: - Pregnancy Registry. There is a pregnancy registry for women who take Evrysdi during pregnancy. The purpose of this registry is to collect information about the health of the pregnant woman and her baby. If you are pregnant or become pregnant while receiving Evrysdi, tell your healthcare provider right away. Talk to your healthcare provider about registering with the Evrysdi Pregnancy Registry. Your healthcare provider can enroll you in this registry or you can enroll by calling 1-833-760-1098 or visiting https://www.evrysdipregnancyregistry.com. Please see additional Important Safety Information throughout and full Prescribing Information.

Genentech

A Member of the Roche Group

I like taking Evrysdi. It's part of my routine. I don't have to worry about going to the hospital or to a doctor's office to take my dose.

• Before taking Evrysdi, tell your healthcare provider about all of your medical conditions, including if you:

-Janelle, 77 living with Type 2 SMA







HIGHLIGHTS OF PRESCRIBING INFORMATION

These highlights do not include all the information needed to use EVRYSDI safely and effectively. See full prescribing information for EVRYSDI.

EVRYSDI® (risdiplam) for oral solution

EVRYSDI[®] (risdiplam) tablets, for oral use Initial U.S. Approval: 2020

-----RECENT MAJOR CHANGES------

Dosage and Administration (2.1, 2.2, 2.4)

----- INDICATIONS AND USAGE

EVRYSDI is a survival of motor neuron 2 (SMN2) splicing modifier indicated for the treatment of spinal muscular atrophy (SMA) in pediatric and adult patients. (1)

----- DOSAGE AND ADMINISTRATION -----

• Administer once daily with or without food per the table below (2.1):

Age and Body Weight	Recommended Daily Dosage	Dosage Form
Less than 2 months of age	0.15 mg/kg	EVRYSDI for Oral Solution
2 months to less than 2 years of age	0.2 mg/kg	
2 years of age and older weighing less than 20 kg	0.25 mg/kg	
2 years of age and older weighing 20 kg or more	5 mg	EVRYSDI for Oral Solution or EVRYSDI Tablet

• Swallow EVRYSDI tablet whole with water or dispersed in nonchlorinated drinking water (e.g., filtered water). (2.2)

Administer EVRYSDI for oral solution with the provided oral syringe.
 (2.2)

FULL PRESCRIBING INFORMATION: CONTENTS* 1 INDICATIONS AND USAGE

DOSAGE AND ADMINISTRATION

- 2.1 Dosing Information
- 2.2 Important Administration Instructions
- 2.3 Missed Dose

2

- 2.4 Preparation of Powder for Oral Solution by Healthcare Provider
- **3 DOSAGE FORMS AND STRENGTHS**

4 CONTRAINDICATIONS

- 6 ADVERSE REACTIONS
- 6.1 Clinical Trials Experience
- 7 DRUG INTERACTIONS
 - 7.1 Effect of EVRYSDI on Substrates of Multidrug and Toxin Extrusion (MATE) Protein Transporters

8 USE IN SPECIFIC POPULATIONS

- 8.1 Pregnancy
- 8.2 Lactation
- 8.3 Females and Males of Reproductive Potential
- 8.4 Pediatric Use
- 8.5 Geriatric Use
- 11 DESCRIPTION

- EVRYSDI for oral solution must be constituted by a healthcare provider prior to dispensing. (2.4)
- See Full Prescribing Information for important preparation and administration instructions. (2.2, 2.4)

----- DOSAGE FORMS AND STRENGTHS ------

- For Oral Solution: 60 mg of risdiplam as a powder for constitution to provide 0.75 mg/mL solution. (3)
- Tablets: 5 mg

2/2025

----- CONTRAINDICATIONS -----None. (4)

----- ADVERSE REACTIONS ------

The most common adverse reactions in later-onset SMA (incidence at least 10% of patients treated with EVRYSDI and more frequent than control) were fever, diarrhea, and rash. (6.1)

The most common adverse reactions in infantile-onset SMA were similar to those observed in later-onset SMA patients. Additionally, adverse reactions with an incidence of at least 10% were upper respiratory tract infection, lower respiratory tract infection, constipation, vomiting, and cough. (6.1)

To report SUSPECTED ADVERSE REACTIONS, contact Genentech at 1-888-835-2555 or FDA at 1-800-FDA-1088 or www.fda.gov/medwatch.

------ DRUG INTERACTIONS ------

Avoid coadministration with drugs that are substrates of multidrug and toxin extrusion (MATE) transporters. (7.1)

See 17 for PATIENT COUNSELING INFORMATION and FDA-approved patient labeling.

Revised: 2/2025

12 CLINICAL PHARMACOLOGY

- 12.1 Mechanism of Action
- 12.2 Pharmacodynamics
- 12.3 Pharmacokinetics

13 NONCLINICAL TOXICOLOGY

- 13.1 Carcinogenesis, Mutagenesis, Impairment of Fertility13.2 Animal Toxicology and/or Pharmacology
- 14 CLINICAL STUDIES
 - 14.1 Infantile-Onset SMA
 - 14.2 Later-Onset SMA
 - 14.3 Pre-Symptomatic SMA
- 16 HOW SUPPLIED/STORAGE AND HANDLING 16.1 EVRYSDI for Oral Solution 16.2 EVRYSDI Tablets
- 17 PATIENT COUNSELING INFORMATION

* Sections or subsections omitted from the full prescribing information are not listed.

FULL PRESCRIBING INFORMATION

1 INDICATIONS AND USAGE

EVRYSDI is indicated for the treatment of spinal muscular atrophy (SMA) in pediatric and adult patients.

2 DOSAGE AND ADMINISTRATION

2.1 Dosing Information

EVRYSDI is administered orally once daily with or without food. The recommended dosage is determined by age and body weight (see Table 1). EVRYSDI tablets are available for patients prescribed the 5 mg dose.

Table 1 Adult and Pediatric Dosing Regimen by Age and Body Weight

Age and Body Weight	Recommended Daily Dosage	Dosage Form	
Less than 2 months of age	0.15 mg/kg		
2 months to less than 2 years of age	0.2 mg/kg	EVRYSDI for Oral Solution	
2 years of age and older weighing less than 20 kg	0.25 mg/kg		
2 years of age and older weighing 20 kg or more	5 mg	EVRYSDI for Oral Solution or EVRYSDI Tablet	

2.2 Important Administration Instructions

It is recommended that a healthcare provider discuss with the patient or caregiver how to prepare the prescribed daily dose prior to administration of the first dose [see Instructions for Use for EVRYSDI for Oral Solution and Patient Information].

EVRYSDI is taken orally once daily with or without food at approximately the same time each day.

EVRYSDI for Oral Solution

In infants who are breastfed, EVRYSDI for oral solution can be administered before or after breastfeeding. EVRYSDI cannot be mixed with formula or milk.

Instruct patients or caregivers to administer the dose using the reusable oral syringe provided.

EVRYSDI for oral solution must be taken immediately after it is drawn up into the oral syringe. If EVRYSDI is not taken within 5 minutes, EVRYSDI should be discarded from the oral syringe, and a new dose should be prepared.

Instruct patients to drink water after taking EVRYSDI for oral solution to ensure the drug has been completely swallowed.

If the patient is unable to swallow and has a nasogastric or gastrostomy tube, EVRYSDI for oral solution can be administered via the tube. The tube should be flushed with water after delivering EVRYSDI for oral solution *[see Instructions for Use]*.

EVRYSDI Tablets

Swallow EVRYSDI tablets whole with water. Do not chew, cut, or crush the tablets.

The EVRYSDI tablet can also be dispersed in one teaspoon (5 mL) of room temperature nonchlorinated drinking water (e.g., filtered water). EVRYSDI tablets must not be dispersed in any liquid other than non-chlorinated drinking water. Do not expose the prepared dispersion to sunlight. Swirl the small cup gently for up to 3 minutes until fully mixed (though some particles will remain). Administer the dispersed tablet immediately. To ensure no particles are left in the small cup, refill it with at least one tablespoon (15 mL) of non-chlorinated drinking water, swirl, and administer immediately again.

EVRYSDI must be taken immediately after it is dispersed in non-chlorinated drinking water. Discard the prepared dispersion if it is not used within 10 minutes of adding non-chlorinated drinking water.

Do not administer the prepared dispersion via a nasogastric or gastrostomy tube. If administration through a nasogastric or gastrostomy tube is required, EVRYSDI for oral solution should be used.

2.3 Missed Dose

If a dose of EVRYSDI is missed, EVRYSDI should be administered as soon as possible if still within 6 hours of the missed dose, and the usual dosing schedule can be resumed on the next day. Otherwise, the missed dose should be skipped, and the next dose should be taken at the regularly scheduled time on the next day.

If a dose is not fully swallowed or vomiting occurs after taking a dose of EVRYSDI, another dose should not be administered to make up for the lost dose. The patient should wait until the next day to take the next dose at the regularly scheduled time.

2.4 Preparation of Powder for Oral Solution by Healthcare Provider

EVRYSDI powder must be constituted to the oral solution by a pharmacist or other healthcare provider prior to dispensing to the patient.

Preparation of the EVRYSDI Oral Solution 0.75 mg/mL

The EVRYSDI "Instructions for Constitution" booklet contains more detailed instructions on the preparation of the oral solution [see Instructions for Constitution].

Caution should be exercised when handling EVRYSDI powder for oral solution. Avoid inhalation and direct contact with skin or mucous membranes with the dry powder and the constituted solution. If such contact occurs, wash thoroughly with soap and water; rinse eyes with water. Wear disposable gloves during the preparation and cleanup procedure.

- 1. Gently tap the bottom of the closed glass bottle to loosen the powder.
- 2. Remove the cap. Do not throw away the cap.
- 3. Carefully pour 79 mL of purified water into the EVRYSDI bottle to yield the 0.75 mg/mL oral solution. Do not mix EVRYSDI with formula or milk.
- 4. Insert the press-in bottle adapter into the bottle opening by pushing it down against the bottle lip. Ensure it is completely pressed against the bottle lip.
- 5. Re-cap the bottle tightly and shake well for 15 seconds. Wait for 10 minutes. You should have obtained a clear solution. If not, shake well again for another 15 seconds or until you have obtained a clear solution.
- 6. Write the date of expiration of the constituted oral solution (calculated as 64 days after constitution) and the lot number on the bottle label. Peel off the part of the bottle label that has the expiration date of the powder.
- 7. Put the bottle back in its original carton.
- 8. Select the appropriate oral syringes (1 mL, 6 mL, or 12 mL) based on the patient's dosage and remove the other oral syringes from the carton.

9. Dispense with the "Instructions for Use" and FDA-approved patient labeling. Alert patients to read the important handling information described in the Instructions for Use.

Storage

Keep the constituted oral solution of EVRYSDI in the original amber bottle to protect from light. Store in a refrigerator at 2°C to 8°C (36°F to 46°F). Do not freeze. Discard any unused portion 64 days after constitution. Keep the bottle in an upright position with the cap tightly closed. If refrigeration is not available, EVRYSDI can be kept at room temperature up to 40°C (up to 104°F) for a combined total of 5 days. EVRYSDI can be removed from, and returned to, a refrigerator. The total combined time out of refrigeration should not exceed 5 days.

3 DOSAGE FORMS AND STRENGTHS

EVRYSDI for oral solution: 60 mg as a light yellow, pale yellow, yellow, greyish yellow, greenish yellow, or light green powder for constitution. Following constitution, the volume of the greenish yellow to yellow solution is 80 mL, providing 60 mg/80 mL (0.75 mg/mL) risdiplam.

EVRYSDI tablet: 5 mg as a pale yellow film-coated tablet, round and curved, with EVR debossed on one side.

4 CONTRAINDICATIONS

None.

6 ADVERSE REACTIONS

6.1 Clinical Trials Experience

Because clinical trials are conducted under widely varying conditions, adverse reaction rates observed in the clinical trials of a drug cannot be directly compared to rates in clinical trials of another drug and may not reflect the rates observed in practice.

In clinical trials including patients with infantile-onset SMA, later-onset SMA, and presymptomatic SMA, a total of 491 patients (51% female, 74% Caucasian) were exposed to EVRYSDI for up to a median duration of 48.1 months (range: 0.6 to 63.4 months), with 231 patients receiving treatment for more than 24 months. At the time of first EVRYSDI dose, 90 (18%) patients were 18 years and older, 119 (24%) were 12 years to less than 18 years, 189 (39%) were 2 years to less than 12 years, 67 (14%) 2 months to less than 2 years, and 26 (5%) were less than 2 months.

Clinical Trial in Later-Onset SMA

The safety of EVRYSDI for later-onset SMA is based on data from a randomized, doubleblinded, placebo-controlled study (Study 2 Part 2) in patients with SMA Type 2 or 3 (n = 180) [see Clinical Studies (14.2)]. The patient population in Study 2 Part 2 ranged in age from 2 to 25 years at the time of the first dose.

The most common adverse reactions (reported in at least 10% of patients treated with EVRYSDI and at an incidence greater than on placebo) in Study 2 Part 2 were fever, diarrhea, and rash. Table 2 lists the adverse reactions that occurred in at least 5% of patients treated with EVRYSDI and at an incidence \geq 5% greater than on placebo in Study 2 Part 2.

Table 2Adverse Reactions Reported in $\geq 5\%$ of Patients Treated with EVRYSDI andwith an Incidence $\geq 5\%$ Greater Than on Placebo in Study 2 Part 2

Adverse Reaction	EVRYSDI (N = 120) %	Placebo (N = 60) %	
Fever ¹	22	17	
Diarrhea	17	8	
Rash ²	17	2	
Mouth and aphthous ulcers	7	0	
Arthralgia	5	0	
Urinary tract infection ³	5	0	

¹ Includes pyrexia and hyperpyrexia.

² Includes rash, erythema, rash maculo-papular, rash erythematous, rash papular, dermatitis allergic, and folliculitis.

³ Includes urinary tract infection and cystitis.

Clinical Trial in Infantile-Onset SMA

The safety of EVRYSDI therapy for infantile-onset SMA is based on data from an open-label study in 62 patients (Study 1) *[see Clinical Studies (14.1)]*. The patient population ranged in age from 2 to 7 months at the time of the first EVRYSDI dose (weight range: 4.1 to 10.6 kg).

The most frequent adverse reactions reported in infantile-onset SMA patients treated with EVRYSDI in Study 1 were similar to those observed in later-onset SMA patients in Study 2. Additionally, the following adverse reactions reported in $\geq 10\%$ of patients were: upper respiratory tract infection (including nasopharyngitis, rhinitis), lower respiratory tract infection (including nonchitis), constipation, vomiting, and cough.

Clinical Trial in Pre-Symptomatic SMA

The safety of EVRYSDI therapy for pre-symptomatic SMA is based on data from an open-label, single-arm study in 26 patients (Study 3) *[see Clinical Studies (14.3)]*. The patient population ranged in age from 16 to 41 days at the time of the first dose (weight range: 3.1 to 5.7 kg). The safety profile of EVRYSDI in pre-symptomatic patients in Study 3 is consistent with the safety profile for symptomatic SMA patients treated with EVRYSDI in clinical trials.

7 DRUG INTERACTIONS

7.1 Effect of EVRYSDI on Substrates of Multidrug and Toxin Extrusion (MATE) Protein Transporters

Based on in vitro data, EVRYSDI may increase plasma concentrations of drugs eliminated via MATE1 or MATE2-K [see Clinical Pharmacology (12.3)], such as metformin. Avoid coadministration of EVRYSDI with MATE substrates. If coadministration cannot be avoided, monitor for drug-related toxicities and consider dosage reduction of the coadministered drug (based on the labeling of that drug) if needed.

8 USE IN SPECIFIC POPULATIONS

8.1 Pregnancy

Pregnancy Exposure Registry

There is a pregnancy exposure registry that monitors pregnancy and fetal/neonatal/infant outcomes in women exposed to EVRYSDI during pregnancy. Physicians are encouraged to

register patients and pregnant women are encouraged to register themselves by calling 1-833-760-1098 or visiting <u>https://www.evrysdipregnancyregistry.com</u>.

Risk Summary

There are no adequate data on the developmental risk associated with the use of EVRYSDI in pregnant women. In animal studies, administration of risdiplam during pregnancy or throughout pregnancy and lactation resulted in adverse effects on development (embryofetal mortality, malformations, decreased fetal body weights, and reproductive impairment in offspring) at or above clinically relevant drug exposures *[see Data]*.

The estimated background risk of major birth defects and miscarriage for the indicated populations is unknown. In the U.S. general population, the estimated background risk of major birth defect and miscarriage in clinically recognized pregnancies is 2% to 4% and 15% to 20%, respectively. Based on animal data, advise pregnant women of the potential risk to the fetus.

Data

Animal Data

Oral administration of risdiplam (0, 1, 3, or 7.5 mg/kg/day) to pregnant rats throughout organogenesis resulted in decreased fetal body weights and increased incidences of fetal structural variations at the highest dose tested, which was not associated with maternal toxicity. The no-effect level for adverse effects on embryofetal development (3 mg/kg/day) was associated with maternal plasma exposure (AUC) approximately 2 times that in humans at the maximum recommended human dose (MRHD) of 5 mg.

Oral administration of risdiplam (0, 1, 4, or 12 mg/kg/day) to pregnant rabbits throughout organogenesis resulted in embryofetal mortality, fetal malformations (hydrocephaly), and structural variations at the highest dose tested, which was associated with maternal toxicity. The no-effect dose for adverse effects on embryofetal development (4 mg/kg/day) was associated with maternal plasma exposure (AUC) approximately 4 times that in humans at the MRHD.

When risdiplam (0, 0.75, 1.5, or 3 mg/kg/day) was orally administered to rats throughout pregnancy and lactation, gestation was prolonged in the dams, and delayed sexual maturation (vaginal opening) and impaired reproductive function (decreased numbers of corpora lutea, implantation sites, and live embryos) were observed in female offspring at the highest dose. The no-effect dose for adverse effects on pre- and postnatal development in rats (1.5 mg/kg/day) was associated with maternal plasma exposure (AUC) similar to that in humans at the MRHD.

8.2 Lactation

Risk Summary

There are no data on the presence of risdiplam in human milk, the effects on the breastfed infant, or the effects on milk production. Risdiplam was excreted in the milk of lactating rats orally administered risdiplam.

The developmental and health benefits of breastfeeding should be considered along with the mother's clinical need for EVRYSDI and any potential adverse effects on the breastfed infant from EVRYSDI or from the underlying maternal condition.

8.3 Females and Males of Reproductive Potential

Studies of risdiplam in juvenile and adult rats and in monkeys demonstrated adverse effects on the reproductive organs, including germ cells, in males at clinically relevant plasma exposures [see Use in Specific Populations (8.4) and Nonclinical Toxicology (13.1)].

Pregnancy Testing

Pregnancy testing is recommended for females of reproductive potential prior to initiating EVRYSDI [see Use in Specific Populations (8.1)].

Contraception

EVRYSDI may cause embryofetal harm when administered to a pregnant woman [see Use in Specific Populations (8.1)].

Female Patients

Advise female patients of reproductive potential to use effective contraception during treatment with EVRYSDI and for at least 1 month after her last dose.

Infertility

Male Patients

Male fertility may be compromised by treatment with EVRYSDI [see Nonclinical Toxicology (13.1)].

Counsel male patients of reproductive potential receiving EVRYSDI about the potential effects on fertility. Male patients may consider sperm preservation prior to treatment.

8.4 Pediatric Use

The safety and effectiveness of EVRYSDI in pediatric patients (neonates and older) have been established. Use of EVRYSDI for SMA is supported by evidence from adequate and well-controlled studies of EVRYSDI in patients 2 months of age and older with SMA. Use of EVRYSDI for SMA in patients 2 months of age and younger is supported by pharmacokinetic and safety data from pediatric patients 16 days and older, and pharmacokinetic modeling and simulation to identify the dosing regimen [see Clinical Pharmacology (12.3) and Clinical Studies (14)].

Juvenile Animal Toxicity Data

Oral administration of risdiplam (0, 0.75, 1.5, 2.5 mg/kg/day) to young rats from postnatal day (PND) 4 through PND 31 resulted in decreased growth (body weight, tibia length) and delayed sexual maturation in males at the mid and high dose. The skeletal and body weight deficits persisted after cessation of dosing. Ophthalmic changes consisting of vacuoles in the anterior vitreous were seen at the high dose. Decreases in absolute B lymphocyte counts were observed at all doses after cessation of dosing. Decreases in testis and epididymis weights, which correlated with degeneration of the seminiferous epithelium in the testis, occurred at the mid and high doses; the histopathology findings were reversible, but organ weight persisted after cessation of dosing. Impaired female reproductive performance (decreased mating index, fertility index, and conception rate) was observed at the high dose. A no-effect dose for adverse developmental effects on preweaning rats was not identified. The lowest dose tested (0.75 mg/kg/day) was associated with plasma exposures (AUC) lower than that in humans at the maximum recommended human dose (MRHD) of 5 mg/day.

Oral administration of risdiplam (0, 1, 3, or 7.5 mg/kg/day) to young rats from PND 22 through PND 112 produced a marked increase in micronuclei in the bone marrow, male reproductive organ histopathology (degeneration/necrosis of the seminiferous tubule epithelium,

oligo/aspermia in the epididymis, spermatic granulomas), and adverse effects on sperm parameters (decreased sperm concentration and motility, increased sperm morphology abnormalities) at the highest dose tested. Increases in T lymphocytes (total, helper, and cytotoxic) were observed at the mid and high doses. The reproductive and immune effects persisted after cessation of dosing. The no-effect dose (1 mg/kg/day) for adverse effects on postweaning juvenile rats was associated with plasma exposures (AUC) lower than that in humans at the MRHD.

8.5 Geriatric Use

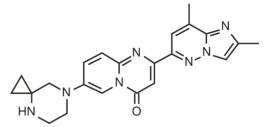
Clinical studies of EVRYSDI did not include patients aged 65 years and older to determine whether they respond differently from younger adult patients.

11 DESCRIPTION

EVRYSDI for oral solution and EVRYSDI tablets for oral use contain risdiplam, which is a survival of motor neuron 2 (SMN2)-directed RNA splicing modifier.

The chemical name of risdiplam is 7-(4,7-diazaspiro[2.5]octan-7-yl)-2-(2,8 dimethylimidazo[1,2-b]pyridazin-6-yl)pyrido-4H-[1,2-a]pyrimidin-4-one. Risdiplam has a molecular weight of 401.46 g/mol. Risdiplam demonstrates pH-dependent aqueous solubility; the greatest solubility is at low pH, and solubility decreases with increasing pH. Risdiplam has a pKa₁ of 3.78 (base) and pKa₂ of 6.62 (base).

The molecular formula of risdiplam is $C_{22}H_{23}N_7O$ and the chemical structure is shown below.



EVRYSDI for oral solution is supplied as a powder in an amber glass bottle. Each bottle contains 60 mg of risdiplam. The inactive ingredients of EVRYSDI are: ascorbic acid, disodium edetate dihydrate, isomalt, mannitol, polyethylene glycol 6000, sodium benzoate, strawberry flavor, sucralose, and tartaric acid.

The powder is constituted with purified water to yield 60 mg/80 mL (0.75 mg/mL) of risdiplam after constitution [see Dosage and Administration (2.4)].

Each EVRYSDI tablet contains 5 mg of risdiplam. The inactive ingredients of EVRYSDI tablet are colloidal silicon dioxide, crospovidone, mannitol, microcrystalline cellulose, polyethylene glycol 3350, polyvinyl alcohol, sodium stearyl fumarate, strawberry flavor, talc, tartaric acid, titanium dioxide, and yellow iron oxide.

12 CLINICAL PHARMACOLOGY

12.1 Mechanism of Action

Risdiplam is a survival of motor neuron 2 (SMN2) splicing modifier designed to treat patients with spinal muscular atrophy (SMA) caused by mutations in chromosome 5q that lead to SMN protein deficiency. Using in vitro assays and studies in transgenic animal models of SMA, risdiplam was shown to increase exon 7 inclusion in SMN2 messenger ribonucleic acid (mRNA) transcripts and production of full-length SMN protein in the brain.

In vitro and in vivo data indicate that risdiplam may cause alternative splicing of additional genes, including FOXM1 and MADD. FOXM1 and MADD are thought to be involved in cell

cycle regulation and apoptosis, respectively, and have been identified as possible contributors to adverse effects seen in animals.

12.2 Pharmacodynamics

In clinical trials for infantile-onset SMA and later-onset SMA patients, EVRYSDI led to an increase in SMN protein with a greater than 2-fold median change from baseline within 4 weeks of treatment initiation across all SMA types studied. The increase was sustained throughout the treatment period (of at least 24 months).

Cardiac Electrophysiology

At the maximum recommended dose, clinically significant QTc interval prolongation was not observed.

12.3 Pharmacokinetics

Pharmacokinetics of EVRYSDI have been characterized in healthy adult subjects and in patients with SMA.

After administration of EVRYSDI as an oral solution, pharmacokinetics of risdiplam were approximately linear between 0.6 and 18 mg in a single-ascending-dose study in healthy adult subjects, and between 0.02 and 0.25 mg/kg once daily in a multiple-ascending-dose study in patients with SMA. Following once-daily oral administration of risdiplam in healthy subjects, approximately 3-fold accumulation of peak plasma concentrations (C_{max}) and area under the plasma concentration-time curve (AUC_{0-24h}) was observed. Risdiplam exposures reach steady state 7 to 14 days after once daily administration. EVRYSDI tablet (swallowed whole or dispersed in water) demonstrated comparable bioavailability to EVRYSDI for oral solution in adult healthy volunteers under fasted and fed states.

Absorption

Following oral administration of risdiplam in fasted state, the median time to reach maximum plasma concentration (T_{max}) was 3.26 to 4 hours. The T_{max} was delayed by up to1 hour in fed state compared to that under fasted state.

Effect of Food

Food (high-fat, high calorie breakfast) had no relevant effect on the exposure of risdiplam. In the clinical efficacy studies (Study 1 and Study 2), risdiplam was administered with a morning meal or after breastfeeding.

Distribution

The apparent volume of distribution at steady state is 190.4 L for a 31.3 kg patient.

Risdiplam is predominantly bound to serum albumin, without any binding to alpha-1 acid glycoprotein, with a free fraction of 11%.

Elimination

The apparent clearance (CL/F) of risdiplam is 2.45 L/h for a 31.3 kg patient. The terminal elimination half-life of risdiplam was approximately 50 hours in healthy adults.

Metabolism

Risdiplam is primarily metabolized by flavin monooxygenase 1 and 3 (FMO1 and FMO3) and also by CYPs 1A1, 2J2, 3A4, and 3A7.

Parent drug was the major component found in plasma, accounting for 83% of drug-related material in circulation. The pharmacologically-inactive metabolite M1 was identified as the major circulating metabolite.

Excretion

Following a dose of 18 mg, approximately 53% of the dose (14% unchanged risdiplam) was excreted in the feces and 28% in urine (8% unchanged risdiplam).

Specific Populations

There were no clinically significant differences in the pharmacokinetics of EVRYSDI based on race or gender. Renal impairment is not expected to alter the exposures to risdiplam.

The impact of geriatric age on the pharmacokinetics of EVRYSDI has not been studied.

Hepatic Impairment

The pharmacokinetics and safety of risdiplam have been studied in subjects with mild or moderate hepatic impairment (as defined by Child-Pugh class A and B, respectively, n = 8 each) compared to subjects with normal hepatic function (n = 10). Following the administration of 5 mg EVRYSDI, the AUC_{inf} and C_{max} of risdiplam were approximately 20% and 5% lower, respectively, in subjects with mild hepatic impairment and were approximately 8% and 20% higher, respectively, in subjects with moderate hepatic impairment, versus matched healthy control subjects. The magnitude of these changes is not considered to be clinically meaningful. The pharmacokinetics and safety in patients with severe hepatic impairment (Child-Pugh class C) have not been studied.

Pediatric Patients

Body weight and age were found to have significant effect on the pharmacokinetics of risdiplam. The estimated exposure (mean AUC_{0-24h}) in pre-symptomatic infants at the age of 1 to 2 months was 2090 ng.h/mL at the recommended dose of 0.15 mg/kg once daily. The estimated exposure for infantile-onset SMA patients (age 2 to 7 months at enrollment) at the recommended dose of 0.2 mg/kg once daily was 1930 ng.h/mL. The estimated exposure for later-onset SMA patients (2 to 25 years old at enrollment) at the recommended dose was 2070 ng.h/mL (0.25 mg/kg once daily for patients with a body weight < 20 kg and 5 mg once daily for patients with a body weight \geq 20 kg).

No data on risdiplam pharmacokinetics are available in patients less than 16 days of age [see Use in Specific Populations (8.4)].

Drug Interaction Studies

Effect of Other Drugs on EVRYSDI

Coadministration of 200 mg itraconazole (a strong CYP3A inhibitor) twice daily with a single 6 mg oral dose of risdiplam did not have a clinically relevant effect on the pharmacokinetics of risdiplam (11% increase in AUC and 9% decrease in C_{max}).

Risdiplam is a weak substrate of human MDR-1 and breast cancer resistant protein (BCRP) transporters in vitro. Human MDR-1 or BCRP inhibitors are not expected to result in a clinically significant increase of risdiplam concentrations.

Effect of EVRYSDI on Other Drugs

Risdiplam and its major circulating metabolite M1 did not induce CYP1A2, 2B6, 2C8, 2C9, 2C19, or 3A4 in vitro. Risdiplam and M1 did not inhibit (reversible or time-dependent inhibition) any of the CYP enzymes tested (CYP1A2, 2B6, 2C8, 2C9, 2C19, 2D6), with the exception of CYP3A in vitro.

EVRYSDI is a weak inhibitor of CYP3A. In healthy adult subjects, administration of EVRYSDI once daily for 2 weeks slightly increased the exposure of midazolam, a sensitive CYP3A substrate (AUC 11%; C_{max} 16%); this increase is not considered clinically relevant. Based on

physiologically-based pharmacokinetic (PBPK) modeling, a similar increase is expected in children and infants as young as 2 months of age.

In vitro studies have shown that risdiplam and its major metabolite are not significant inhibitors of human MDR1, organic anion-transporting polypeptide (OATP) 1B1, OATP1B3, organic anion transporter 1 and 3 (OAT 1 and 3) transporters, and human organic cation transporter 2 (OCT2), at clinically relevant concentrations. Risdiplam and its metabolite are, however, in vitro inhibitors of the multidrug and toxin extrusion (MATE) 1 and MATE2-K transporters [see Drug Interactions (7.1)].

13 NONCLINICAL TOXICOLOGY

13.1 Carcinogenesis, Mutagenesis, Impairment of Fertility

Carcinogenesis

Risdiplam was not carcinogenic in Tg.rasH2 mice when administered at oral doses of up to 9 mg/kg/day for 26 weeks.

In a 2-year carcinogenicity study in rats, oral administration of risdiplam (0, 0.3, 1, or 3 mg/kg/day) resulted in increased incidences of preputial gland squamous cell carcinomas in males and combined thyroid follicular cell adenomas and carcinomas in females at the highest dose tested. The higher dose not associated with an increase in tumors (1 mg/kg/day) was associated with plasma drug exposures (AUC) similar to that in humans at the maximum recommended human dose (MRHD) of 5 mg/day.

Mutagenesis

Risdiplam was negative in an in vitro Ames assay. In an in vivo combined bone marrow micronucleus and comet assay in rat, risdiplam was clastogenic, as evidenced by an increase in micronuclei in bone marrow, but was negative in the comet assay. A pronounced increase in bone marrow micronuclei was also observed in toxicity studies in adult and juvenile rats [see Use in Specific Populations (8.4)].

Impairment of Fertility

Oral administration of risdiplam to rats for 4 (0, 1, 3, or 9 mg/kg/day) or 26 (0, 1, 3, or 7.5 mg/kg/day) weeks resulted in histopathological effects in the testis (degenerated spermatocytes, degeneration/atrophy of the seminiferous tubules) and epididymis (degeneration/necrosis of ductular epithelium) at the mid and/or high doses. At the high dose in the 26-week study, the testicular lesions persisted to the end of the recovery period, which corresponds, in rat, to approximately one spermatogenic cycle. The no-effect dose for adverse reproductive system effects in adult male rats (1 mg/kg/day) was associated with plasma drug exposures (AUC) similar to that in humans at the maximum recommended human dose (MRHD) of 5 mg/day.

Adverse effects of risdiplam on the testis could not be fully evaluated in the monkey because the majority of monkeys tested were sexually immature. However, oral administration of risdiplam (0, 2, 4, or 6 mg/kg/day) for 2 weeks resulted in histopathological changes in the testis (increases in multinucleate cells, germ cell degeneration) at the highest dose. At the no-effect dose for testicular toxicity in monkeys, plasma exposures were approximately 3 times that in humans at the MRHD.

Oral administration of risdiplam to postweaning juvenile rats resulted in male reproductive toxicity (degeneration/necrosis of the testis seminiferous epithelium with associated oligo/aspermia in the epididymis and abnormal sperm parameters). The no-effect dose for adverse reproductive effects in postweaning male juvenile rats was associated with plasma

exposures approximately 4 times that in humans at the MRHD [see Use in Specific Populations (8.4)].

13.2 Animal Toxicology and/or Pharmacology

Retinal toxicity

Risdiplam-induced functional and structural retinal abnormalities were seen in animal studies. In a 39-week toxicity study in monkeys, oral administration of risdiplam (0, 1.5, 3, or 7.5/5 mg/kg/day; high dose lowered after 4 weeks) produced functional abnormalities on the electroretinogram (ERG) in all mid- and high-dose animals at the earliest examination time (Week 20). These findings were associated with retinal degeneration, detected by optical coherence tomography (OCT), on Week 22, the first examination time. The retinal degeneration, with peripheral photoreceptor loss, was irreversible. A no-effect dose for the retinal findings (1.5 mg/kg/day) was associated with plasma exposures (AUC) similar to that in humans at the maximum recommended human dose (MRHD) of 5 mg.

Effect on Epithelial Tissues

Oral administration of risdiplam to rats and monkeys resulted in histopathological changes in epithelium of the gastrointestinal (GI) tract (apoptosis/single cell necrosis), lamina propria (vacuolation), the exocrine pancreas (single cell necrosis), the skin, tongue, and larynx (parakeratosis/hyperplasia/degeneration) with associated inflammation. The skin and GI epithelial effects were reversible. The no-effect doses for effects on epithelial tissues in rats and monkeys were associated with plasma exposures (AUC) similar to that in humans at the MRHD.

14 CLINICAL STUDIES

The efficacy of EVRYSDI for the treatment of patients with infantile-onset, later-onset, and presymptomatic SMA was evaluated in three clinical studies, Study 1 (NCT02913482) and Study 2 (NCT02908685), and Study 3 (NCT03779334), respectively.

The overall findings of these studies support the effectiveness of EVRYSDI in SMA pediatric and adult patients and appear to support the early initiation of treatment with EVRYSDI.

14.1 Infantile-Onset SMA

Study 1 was an open-label, 2-part study to investigate the efficacy, safety, pharmacokinetics, and pharmacodynamics of EVRYSDI for oral solution in patients with Type 1 SMA (symptom onset between 28 days and 3 months of age). All patients had genetic confirmation of homozygous deletion or compound heterozygosity predictive of loss of function of the SMN1 gene, and two SMN2 gene copies.

Part 1 of Study 1 was designed as a dose-finding study. Part 2 of Study 1 assessed the safety and efficacy of EVRYSDI at 0.20 mg/kg, the recommended dose determined in Part 1 [see Dosage and Administration (2.4)]. Patients from Part 1 did not take part in Part 2.

A total of 62 patients with symptomatic Type 1 SMA were enrolled in FIREFISH Part 1 (n = 21) and Part 2 (n = 41), of which 58 patients received the recommended dosage *[see Dosage and Administration (2.1)]*. The median age of onset of clinical signs and symptoms was 1.5 months (range: 0.9 to 3.0 months). The median age at enrollment was 5.6 months (range: 2.2 to 6.9 months), and the median time between onset of symptoms and the first dose was 3.7 months (range 1.0 to 6.0 months). Of these patients, 60% were female, 57% were Caucasian, and 29% were Asian. The demographics and baseline disease characteristics were comparable between Part 1 and Part 2 of the study.

Effectiveness was established based on the ability to sit without support for at least 5 seconds (as measured by Item 22 of the Bayley Scales of Infant and Toddler Development – Third Edition

(BSID-III) gross motor scale) and on the basis of survival without permanent ventilation. Permanent ventilation was defined as requiring a tracheostomy or more than 21 consecutive days of either non-invasive ventilation (\geq 16 hours per day) or intubation, in the absence of an acute reversible event.

The primary endpoint was the proportion of patients with the ability to sit without support for at least 5 seconds (BSID-III gross motor scale, Item 22) after 12 months of treatment in Part 2; 29% of patients (n = 12/41) achieved this milestone.

Other efficacy endpoints of EVRYSDI-treated patients in Study 1 (pooled Part 1 and Part 2) are shown in Table 3.

Efficacy Endpoints	Proportion of Patients Parts 1 & 2 at Month 12	Proportion of Patients Parts 1 & 2 at Month 24	
Motor Function and Development Milestones	$N = 58^{a}$		
BSID-III, Item 22: sitting without support for at least 5 seconds	32.8%	60.3%	
Survival and Event-Free Survival	N = 62 ^b		
Alive without Permanent Ventilation	87.1%	83.8%	

 Table 3
 Key Efficacy Results at Month 12 and Month 24 (Study 1, Parts 1 and Part 2)

^a Results were pooled from all patients who received the recommended dose of risdiplam (all patients in Part 2 and those in the high-dose cohort of Part 1; n = 58).

^b Results were pooled from all patients who received any dose of risdiplam in Part 1 and Part 2 (n = 62).

At Month 24, 40% (23/58) of patients who received the recommended dose achieved sitting without support for 30 seconds (BSID-III, Item 26). In addition at Month 24, patients continued to achieve additional motor milestones; 28% (16/58) of patients achieved a standing measure (16% [9/58] supporting weight and 12% [7/58] standing with support), as measured by Section 2 of the Hammersmith Infant Neurological Examination (HINE-2) which assesses motor milestones.

The proportion of patients alive without permanent ventilation (event-free survival) was 84% for all patients at Month 24 (Table 3). Out of 62 patients, 6 infants died (4 within the first 3 months following study enrollment) and one additional patient withdrew from treatment and died 3.5 months later. Four patients required permanent ventilation by Month 24. These results indicate a clinically meaningful deviation from the natural history of untreated infantile-onset SMA. As described in the natural history of untreated infantile-onset SMA, patients would not be expected to attain the ability to sit independently, and no more than 25% of these patients would be expected to survive without permanent ventilation beyond 14 months of age.

14.2 Later-Onset SMA

Study 2 was a 2-part, multicenter trial to investigate the efficacy, safety, pharmacokinetics, and pharmacodynamics of EVRYSDI for oral solution in patients diagnosed with SMA Type 2 or Type 3. Part 1 of Study 2 was dose-finding and exploratory in 51 patients (14% ambulatory). Part 2 was randomized, double-blind, placebo-controlled, and is described below.

The primary endpoint in Study 2 Part 2 was the change from baseline to Month 12 in the Motor Function Measure 32 (MFM32) score. A key secondary endpoint was the proportion of patients

with a 3-point or greater change from baseline to Month 12 in the MFM32 total score. The MFM32 measures motor function abilities that relate to daily functions. The total MFM32 score is expressed as a percentage (range: 0 to 100) of the maximum possible score, with higher scores indicating greater motor function. Another key secondary endpoint was the Revised Upper Limb Module (RULM). The RULM is a tool used to assess motor performance of the upper limb in SMA patients. It tests proximal and distal motor functions of the arm. The total score ranges from 0 (all the items cannot be performed) to 37 (all the activities are achieved fully without any compensatory maneuvers).

Study 2 Part 2 enrolled 180 non-ambulatory patients with Type 2 (71%) or Type 3 (29%) SMA. Patients were randomized 2:1 to receive EVRYSDI at the recommended dosage *[see Dosage and Administration (2.1)]* or placebo. Randomization was stratified by age group (2 to 5, 6 to 11, 12 to 17, or 18 to 25 years of age).

The median age of patients at the start of treatment was 9.0 years (range: 2 to 25), and the median time between onset of initial SMA symptoms and first treatment was 102.6 months (range: 1 to 275). Of the 180 patients included in the trial, 51% were female, 67% were Caucasian, and 19% were Asian. At baseline, 67% of patients had scoliosis (32% of them with severe scoliosis). Patients had a mean baseline MFM32 score of 46.1, and RULM score of 20.1. Overall baseline demographic characteristics were reasonably balanced between the treatment groups (EVRYSDI and placebo), with the exception of scoliosis (63% in the EVRYSDI arm vs. 73% in the placebo group).

The primary analysis on the change from baseline in MFM32 total score at Month 12 showed a clinically meaningful and statistically significant difference between patients treated with EVRYSDI and placebo. The results of the primary analysis and key secondary endpoints are shown in Table 4 and Figure 1.

Table 4Summary of Efficacy in Patients with Later-Onset SMA at Month 12 of
Treatment (Study 2 Part 2)

Endpoint	EVRYSDI (N = 120)	Placebo (N = 60)
Primary Endpoint:		
Change from baseline in total MFM32 score at Month 12, LS means (95% CI) ^{1,2,3}	1.36 (0.61, 2.11)	-0.19 (-1.22, 0.84)
Difference from Placebo, Estimate (95% CI) ¹ p-value	1.55 (0.30, 2.81) 0.0156	
Secondary Endpoints:		
Proportion of patients with a change from baseline MFM32 total score of 3 or more at Month 12 (95% CI) ^{2,3}	38.3% (28.9, 47.6)	23.7% (12.0, 35.4)
Odds ratio for overall response (95% CI) adjusted ⁴ (unadjusted) p-value ⁵	2.35 (1.01, 5.44) 0.0469 (0.0469)	
Change from baseline in total score of RULM at Month 12, LS means (95% CI) ^{1,6}	1.61 (1.00, 2.22)	0.02 (-0.83, 0.87)
Difference from Placebo, Estimate (95% CI) adjusted ⁴ (unadjusted) p-value ¹	1.59 (0.55, 2.62) 0.0469 (0.0028)	

^{1.} The Mixed Model Repeated Measure (MMRM) analysis included the change from baseline total score as the dependent variable and as independent variables the baseline total score, treatment group, time, treatment-by-time interaction, and the randomization stratification variable of age group (2 to 5, 6 to 11, 12 to 17, 18 to 25).

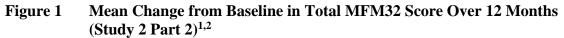
^{2.} The MFM total score was calculated according to the user manual, expressed as a percentage of the maximum score possible for the scale (i.e., sum of the 32 item scores divided by 96 and multiplied by 100).

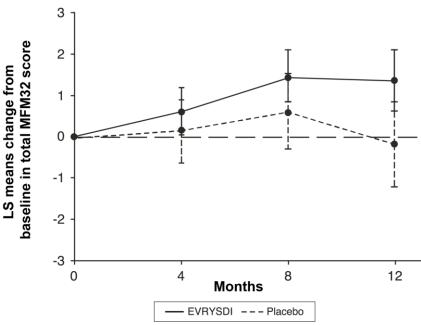
^{3.} Based on the missing data rule for MFM32, 6 patients were excluded from the analysis (EVRYSDI n = 115; placebo control n = 59).

^{4.} The adjusted p-value was obtained for the endpoints included in the hierarchical testing and was derived based on all the p-values from endpoints in order of the hierarchy up to the current endpoint.

^{5.} The logistic regression analysis included the baseline total score, treatment and age group as independent variables.

^{6.} Based on the missing data rule for RULM, 3 patients were excluded from the analysis (EVRYSDI n = 119; placebo control n = 58).





¹ Error bars denote the 95% confidence interval.

² The MFM total score was calculated according to the user manual, expressed as a percentage of the maximum score possible for the scale (i.e., sum of the 32 item scores divided by 96 and multiplied by 100).

14.3 Pre-Symptomatic SMA

Study 3 was an open-label, single-arm, multicenter clinical study to investigate the efficacy, safety, pharmacokinetics, and pharmacodynamics of EVRYSDI in infants up to 6 weeks of age (at first dose) who have been genetically diagnosed with SMA but do not yet present with symptoms.

The efficacy in pre-symptomatic SMA patients was evaluated at Month 12 in 26 patients treated with EVRYSDI in Study 3: 8 patients had 2 copies of the *SMN2* gene, 13 patients had 3 copies, and 5 patients had 4 or more copies. The median age of these patients at first dose was 25 days (range: 16 to 41), 62% were female, and 85% were Caucasian. The primary efficacy population (N = 5) included patients with 2 *SMN2* copies and a baseline CMAP amplitude ≥ 1.5 mV.

The primary efficacy endpoint was the proportion of patients with the ability to sit without support for at least 5 seconds (BSID-III gross motor scale, Item 22) at Month 12. This milestone was achieved by 80% (4/5) of patients in the primary efficacy population. This milestone was also achieved by 87.5% (7/8) of all patients with 2 copies of *SMN2* and 96.2% (25/26) of patients in the full treated population.

At Month 12, 80.8% (21/26) of patients in the full treated population achieved sitting without support for 30 seconds (BSID-III, Item 26). Of the 26 patients treated with EVRYSDI, 25 patients had motor milestones measured by the HINE-2 at Month 12. Of these, 24 (96%) achieved sitting (23 patients could pivot/rotate and 1 achieved stable sit); 21 (84%) could stand (13 patients could stand unaided and 8 could stand with support); and 12 (48%) could walk independently. Seven patients were not tested for walking at Month 12. All 26 patients were alive at 12 months without permanent ventilation.

16 HOW SUPPLIED/STORAGE AND HANDLING

16.1 EVRYSDI for Oral Solution

How Supplied

Each amber glass bottle of EVRYSDI for oral solution is packaged with a bottle adapter, two 1 mL reusable oral syringes, two 6 mL reusable oral syringes, and one 12 mL reusable oral syringe. EVRYSDI for oral solution is a light yellow, pale yellow, yellow, greyish yellow, greenish yellow, or light green powder. Each bottle contains 60 mg of risdiplam (NDC 50242-175-07).

Storage and Handling

Store the dry powder at 20°C to 25°C (68°F to 77°F), excursions permitted between 15°C to 30°C (59°F to 86°F) *[see USP controlled room temperature]*. Keep in the original carton.

Keep the constituted oral solution of EVRYSDI in the original amber bottle to protect from light. Store in a refrigerator at 2° C to 8° C (36° F to 46° F) [see Dosage and Administration (2.4)].

16.2 EVRYSDI Tablets

How Supplied

Pale yellow film-coated tablet, round and curved, with EVR debossed on one side; available in HDPE bottles of 30 tablets with a child-resistant cap (NDC 50242-202-01).

Storage and Handling

Store at 20°C to 25°C (68°F to 77°F); excursions permitted between 15°C to 30°C (59°F to 86°F) *[see USP Controlled Room Temperature]*. Keep the bottle tightly closed in order to protect from moisture.

17 PATIENT COUNSELING INFORMATION

Advise the patient to read the FDA-approved patient labeling (Patient Information and Instructions for Use).

Pregnancy and Fetal Risk

Inform pregnant women and women of reproductive potential that, based on animal studies, EVRYSDI may cause fetal harm [see Use in Specific Populations (8.1)].

Discuss with women of childbearing age whether they are pregnant, might be pregnant, or are trying to become pregnant.

Advise women of childbearing potential to use effective contraception during treatment with EVRYSDI and for at least 1 month after stopping EVRYSDI.

Advise a female patient to immediately inform the prescriber if she is pregnant or planning to become pregnant [see Use in Specific Populations (8.3)].

Pregnancy Registry

Encourage patients to enroll in the EVRYSDI Pregnancy Registry if they become pregnant while taking EVRYSDI [see Use in Specific Populations (8.1)].

Potential Effects on Male Fertility

Advise male patients that their fertility may be compromised while on treatment with EVRYSDI *[see Use in Specific Populations (8.3)].*

Instructions for Preparation of Oral Solution

Advise patients/caregivers to ensure that EVRYSDI oral solution is in liquid form when received from the pharmacy.

Instruct patients/caregivers to take EVRYSDI oral solution with or without food or before or after breastfeeding at approximately the same time each day. However, instruct caregivers not to mix EVRYSDI with formula or milk.

Instruct patients/caregivers to take EVRYSDI oral solution immediately after it is drawn up into the reusable oral syringe [see Dosage and Administration (2.1)].

Instructions for EVRYSDI Tablets

Advise patients/caregivers to swallow EVRYSDI tablets whole with water. Do not chew, cut, or crush the tablets.

Alternatively, the tablet can be dispersed in one teaspoon (5 mL) of room temperature nonchlorinated drinking water (e.g., filtered water) and taken immediately. EVRYSDI tablets must not be dispersed in any liquid other than non-chlorinated drinking water. Instruct the patient/caregivers that the dispersion must be administered within 10 minutes of adding non-chlorinated drinking water, or it must be discarded.

Advise patients/caregivers that the EVRYSDI tablet dispersion is for oral administration only. If administration through a nasogastric/gastrostomy tube is required, EVRYSDI for oral solution should be used.

Advise patients/caregivers to wash their hands before and after preparing or taking EVRYSDI tablets.

Advise patients/caregivers to avoid getting the dispersed tablet on their skin or in their eyes. Advise patients/caregivers to wash the area with soap and water if the dispersed tablet gets on the skin. Advise patients/caregivers to rinse their eyes with water if the dispersed tablet gets in the eyes.

Advise patients/caregivers to use a dry paper towel to dry the area if the dispersion is spilled and then clean with soap and water. Advise patients/caregivers to throw the paper towel away in the trash and wash their hands with soap and water.

EVRYSDI[®] [risdiplam]

Distributed by: Genentech, Inc. A Member of the Roche Group 1 DNA Way South San Francisco, CA 94080-4990

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EVRYSDI[®] [ev-RIZ-dee] (risdiplam) for oral solution

EVRYSDI[®] [ev-RIZ-dee] (risdiplam) tablets

What is EVRYSDI?

• EVRYSDI is a prescription medicine used to treat spinal muscular atrophy (SMA) in children and adults.

Before taking EVRYSDI, tell your healthcare provider about all of your medical conditions, including if you:

- are pregnant or plan to become pregnant. If you are pregnant, or are planning to become pregnant, ask your healthcare provider for advice before taking this medicine. EVRYSDI may harm your unborn baby.
- are a woman who can become pregnant:
 - Before you start your treatment with EVRYSDI, your healthcare provider may test you for pregnancy. Because EVRYSDI may harm your unborn baby, you and your healthcare provider will decide if taking EVRYSDI is right for you during this time.
 - Talk to your healthcare provider about birth control methods that may be right for you. Use birth control while on treatment and for at least 1 month after stopping EVRYSDI.
 - Pregnancy Registry. There is a pregnancy registry for women who take EVRYSDI during pregnancy. The purpose of this registry is to collect information about the health of the pregnant woman and her baby. If you are pregnant or become pregnant while receiving EVRYSDI, tell your healthcare provider right away. Talk to your healthcare provider about registering with the EVRYSDI Pregnancy Registry. Your healthcare provider can enroll you in this registry or you can enroll by calling 1-833-760-1098 or visiting https://www.evrysdipregnancyregistry.com.
- are an adult male planning to have children: EVRYSDI may affect a man's ability to have children (fertility). If this is of concern to you, make sure to ask a healthcare provider for advice.
- are breastfeeding or plan to breastfeed. It is not known if EVRYSDI passes into breast milk and may harm your baby. If you plan to breastfeed, discuss with your healthcare provider about the best way to feed your baby while on treatment with EVRYSDI.

Tell your healthcare provider about all the medicines you take, including prescription and over-the-counter medicines, vitamins, and herbal supplements. Keep a list of them to show your healthcare provider, including your pharmacist, when you get a new medicine.

How should I take EVRYSDI?

- For infants and children, your healthcare provider will determine the daily dose of EVRYSDI needed based on your child's age and weight. For adults, take 5 mg of EVRYSDI daily.
- Your healthcare provider will either prescribe:

EVRYSDI for oral solution

Or

EVRYSDI tablet

- Your healthcare provider will tell you how long you or your child needs to take EVRYSDI. Do not stop treatment with EVRYSDI unless your healthcare provider tells you to.
 - Take EVRYSDI exactly as your healthcare provider tells you to take it. Do not change the dose without talking to your healthcare provider.
- Avoid getting EVRYSDI on your skin or in your eyes. If it gets on your skin, wash the area with soap and water. If it gets in your eyes, rinse your eyes with water.

If you are taking EVRYSDI for oral solution:

- see the detailed Instructions for Use that comes with it for information on how to take or give EVRYSDI for oral solution
- You should receive EVRYSDI from the pharmacy as a liquid that can be given by mouth or through a feeding tube. The liquid solution is prepared by your pharmacist or other healthcare provider. If the medicine in the bottle is a powder, **do not use it**. Contact your pharmacist for a replacement.
- Take EVRYSDI one time daily with or without a meal at about the same time each day. Drink water afterwards to make sure EVRYSDI has been completely swallowed.
- In infants who are breastfed, EVRYSDI can be given before or after breastfeeding.
- Do not mix EVRYSDI with formula or milk.
- If you are unable to swallow and have a nasogastric (NG-tube) or gastrostomy tube (G-tube), EVRYSDI for oral solution can be given through the tube.

Reusable Oral Syringes for EVRYSDI for Oral Solution

- Your pharmacist will provide you with the reusable oral syringes that are needed for taking your medicine and explain how to use them. You should receive 1 or 2 identical oral syringes depending on your prescribed daily dose.
- From the bottle, draw up (measure) the dose of EVRYSDI with these syringes, as they are made to protect the medicine from light.
- Take EVRYSDI right away after it has been drawn into the syringe. Do not store the EVRYSDI solution in the syringe. If EVRYSDI is not taken within 5 minutes of when it is drawn up, throw away the solution by pressing the plunger and prepare a new dose with the same syringe.
- Do not throw the syringes away because they are reusable.
- Wash the syringes per instructions after use.
- Contact your healthcare provider or pharmacist if your oral syringes are lost or damaged.

If you are taking EVRYSDI Tablets:

- Take EVRYSDI one time daily with or without a meal at about the same time each day.
- Do not chew, cut, or crush the tablet.
- Swallow the EVRYSDI tablet whole with some water.

Or

 You can take an EVRYSDI tablet by mouth after it is mixed with a teaspoon (5 mL) of room temperature non-chlorinated drinking water (e.g., filtered water). See the instructions below for taking EVRYSDI this way.

EVRYSDI Tablets Mixed with Non-chlorinated Drinking Water (e.g., Filtered Water)

- Wash your hands before and after preparing or taking EVRYSDI tablets.
- Put EVRYSDI tablets in a small cup with a teaspoon (5 mL) of room temperature non-chlorinated drinking water (e.g., filtered water).
- Do not mix EVRYSDI tablets with any liquids other than non-chlorinated drinking water.
- Do not expose the EVRYSDI tablet mixture to sunlight.
- Swirl the cup gently until the tablet and non-chlorinated drinking water are fully mixed (though some particles may remain). This may take up to 3 minutes.
- Take EVRYSDI tablet mixture right away after mixing with non-chlorinated drinking water. If you do not take it within 10 minutes of adding non-chlorinated drinking water, throw the mixture away and make a new dose.
- After taking EVRYSDI tablet mixture, to make sure there is no medicine left, refill the small cup with at least a tablespoon (15 mL) of non-chlorinated drinking water, swirl, and take right away.
- If the EVRYSDI tablet mixture is spilled, use a dry paper towel to dry the area and then clean with soap and water. Throw the paper towel away in the trash and wash your hands with soap and water.
- Do not give the EVRYSDI tablet mixture via a nasogastric (NG-tube) or gastrostomy tube (G-tube).

If you miss a dose of EVRYSDI:

- If you remember the missed dose within 6 hours of when you normally take EVRYSDI, then take the dose. Continue taking EVRYSDI at your usual time the next day.
- If you remember the missed dose more than 6 hours after you normally take EVRYSDI, skip the missed dose. Take your next dose at your usual time the next day.
- If you do not fully swallow the dose, or you vomit after taking a dose, **do not take** another dose of EVRYSDI to make up for that dose. Wait until the next day to take the next dose at your usual time.

What are the possible side effects of EVRYSDI?

The most common side effects of EVRYSDI include:

For later-onset SMA:

0	fever	0	diarrhea	0	rash		
For infantile-onset SMA:							
0	fever	0	runny nose, sneezing, and sore throat (upper respiratory infection)	0	constipation		
0	diarrhea	0	lung infection (lower respiratory infection)	0	vomiting		
0	rash			0	cough		
	For in	For infantile-onset SMofeverodiarrhea	For infantile-onset SMA:ofeveroodiarrheao	For infantile-onset SMA: • runny nose, sneezing, and sore throat (upper respiratory infection) • diarrhea • lung infection (lower respiratory infection)	For infantile-onset SMA: • runny nose, sneezing, and sore throat or (upper respiratory infection) • • diarrhea • lung infection (lower respiratory infection) •		

These are not all of the possible side effects of EVRYSDI. For more information, ask your healthcare provider or pharmacist.

Call your doctor for medical advice about side effects. You may report side effects to FDA at 1-800-FDA-1088.

How should I store EVRYSDI?

EVRYSDI for Oral Solution:

- Store EVRYSDI in the refrigerator between 36°F to 46°F (2°C to 8°C). Do not freeze.
 - If necessary, EVRYSDI can be kept at room temperature up to 104°F (up to 40°C) for a combined total of 5 days. EVRYSDI can be removed from, and returned to, a refrigerator. The total combined time out of refrigeration should not be more than 5 days.
- Keep EVRYSDI in an upright position in the original amber bottle to protect from light.
- Throw away (discard) any unused portion of EVRYSDI 64 days after it is mixed by the pharmacist (constitution) or if EVRYSDI has been kept at room temperature (below 104°F [40°C]) for more than a total combined time of 5 days. Discard EVRYSDI if it has been kept above 104°F (40°C). Please see the Discard After date written on the bottle label. (See the **Instructions for Use** that comes with EVRYSDI for oral solution).

EVRYSDI Tablets:

- Store at room temperature between 68°F to 77°F (20°C to 25°C).
- Keep the bottle tightly closed in order to protect from moisture.

Keep EVRYSDI, all medicines and syringes out of the reach of children.

General information about the safe and effective use of EVRYSDI.

Medicines are sometimes prescribed for purposes other than those listed in a Patient Information leaflet. Do not use EVRYSDI for a condition for which it was not prescribed. Do not give EVRYSDI to other people, even if they have the same symptoms you have. It may harm them. You can ask your pharmacist or healthcare provider for information about EVRYSDI that is written for health professionals.

What are the ingredients in EVRYSDI?

Active ingredient: risdiplam

Inactive ingredients:

EVRYSDI for Oral Solution: ascorbic acid, disodium edetate dihydrate, isomalt, mannitol, polyethylene glycol 6000, sodium benzoate, strawberry flavor, sucralose, and tartaric acid.

EVRYSDI Tablets: colloidal silicon dioxide, crospovidone, mannitol, microcrystalline cellulose, polyethylene glycol 3350, polyvinyl alcohol, sodium stearyl fumarate, strawberry flavor, talc, tartaric acid, titanium dioxide, and yellow iron oxide.

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For more information, go to www.EVRYSDI.com or call 1-833-387-9734.

This Patient Information has been approved by the U.S. Food and Drug Administration.

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