

**Women with postmenopausal
osteoporosis at high risk
for fracture:**



**STAND UP
FOR YOUR BONES**

**Talk to your doctor about
postmenopausal osteoporosis today.**

IT'S TIME TO BE

OSTEO *FEROCIOUS*



DISCOVER TYMLOS,

proven to help lower the risk of fracture in postmenopausal women with osteoporosis.

IMPORTANT SAFETY INFORMATION

What is the most important information I should know about TYMLOS?

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 - Tell your healthcare provider right away if you have pain in your bones, pain in any areas of your body that does not go away, or any new or unusual lumps or swelling under your skin that is tender to touch.

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It is not known if TYMLOS is safe and effective for children 18 years and younger.

It is not recommended that people use TYMLOS for more than 2 years during their lifetime.

TYMLOS should not be used in children and young adults whose bones are still growing.

Please see additional Important Safety Information on page 11 and Full Prescribing Information, including Boxed Warning.

TYMLOS®
(abaloparatide) injection

How postmenopausal osteoporosis develops

For most of our lives, our bones go through a remodeling process. This means that our bodies are constantly breaking down old bone and forming new, healthy bone.

The bone remodeling process



BONE RESORPTION

Osteoclasts break down and remove old bone.

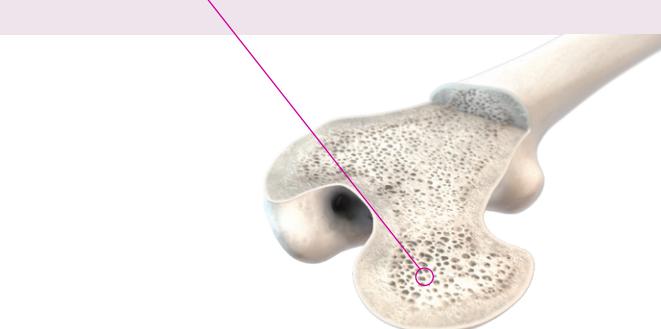


BONE FORMATION

Osteoblasts form new bone to replace the bone lost through resorption.

When women enter menopause, lower estrogen levels can cause an imbalance in the bone remodeling process that can lead to osteoporosis.

When you have osteoporosis, your body doesn't form enough new bone to replace what is being broken down. This leaves bones fragile and at greater risk for fracture.



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Why should you get tough on postmenopausal osteoporosis?

These factors could make you more likely to get osteoporosis



AGE

The risk for osteoporosis increases with age.



GENETICS

If a family member has had osteoporosis you are at higher risk.



ONSET OF MENOPAUSE

Lower estrogen levels after menopause can cause bone loss. The earlier in life menopause occurs, the lower bone mineral density (BMD) can be later in life.



ETHNICITY AND BODY TYPE

White, Asian and Hispanic women tend to have higher risk, as do women with smaller frames.

These lifestyle factors can also raise risk



DIET

Diets low in calcium and vitamin D can increase the likelihood of osteoporosis.



MEDICATIONS

Certain medications can increase the risk for osteoporosis.



LACK OF EXERCISE

Lack of exercise and not being active could make your bones more fragile.



ALCOHOL AND SMOKING

Smoking cigarettes and drinking alcohol can weaken your bones.

My risk factors

Half of all women over 50

will break a bone due to osteoporosis at some point in their lives.

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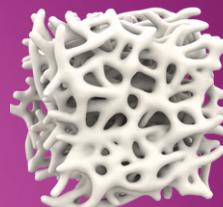
The more you know, the more you can do

Bone mineral density (BMD) is the density of material in your bones. When your bones are less dense, they are more fragile.

BMD is an indicator of your bone strength

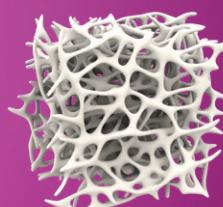
Your doctor may measure your BMD with a DXA scan. The result is called a T-score. Your T-score compares your BMD with the average BMD of young adults. DXA scans are used to help diagnose osteoporosis.

Here are some examples of bones with different BMD T-scores



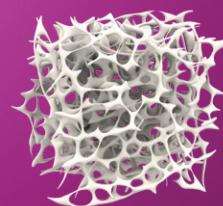
HEALTHY BONE

T-score: -1 and above



OSTEOPENIC BONE

T-score: between
-2.5 and -1



BONE WITH OSTEOPOROSIS

T-score: -2.5 and below

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My current T-score: _____

Site tested:

- Lumbar spine (lower back)
- Femoral neck (the area just below the ball joint of the hip)
- Total hip
- Forearm (wrist)

Ask your doctor how postmenopausal osteoporosis can affect the quality of your bones.

TYMLOS®
(abaloparatide) injection



Many of your bones could be at risk. **Is it time to address your postmenopausal osteoporosis?**

Not all women know that osteoporosis can lead to fractures

If you have postmenopausal osteoporosis, it's important to consider how you can help to reduce your risk of fracture — especially if you've had a prior fragility (low-impact) fracture.

Once you've had an osteoporosis-related vertebral (spinal) fracture, your chance of having a nonvertebral fracture is 6x higher.

IT CAN LEAD TO:



SPINAL FRACTURES

Fractures in the spine are the most common fractures caused by osteoporosis. You may mistake them for chronic back pain.



FRACTURES IN OTHER BONES

If you have had a fracture due to postmenopausal osteoporosis, you are at higher risk of having another fracture, such as a hip fracture.



HUNCHING

Hunching of the spine (also known as kyphosis) can be caused by fractures in the spine and can result in height loss.

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STAND UP TO POSTMENOPAUSAL OSTEOPOROSIS



TYMLOS is a medication designed to build new bone

Many osteoporosis treatments are antiresorptives, which means they slow down bone loss. TYMLOS is an anabolic medication. This kind of medication is designed to help boost the natural process that builds new bone.

How bone building works

Anabolic medications may help boost your body's natural bone-building process by activating cells called osteoblasts. These cells normally form new, healthy bone through the remodeling process. With the help of anabolic medications, these cells work harder to replace the bone you've lost to osteoporosis. They may even help reduce your risk of future fractures.

Selected Important Safety Information

TYMLOS may cause a decrease in blood pressure after injection. Some people may feel dizzy, lightheaded, or may have a faster heartbeat. Though these symptoms generally go away within a few hours, sit or lie down right away if any of these occur.

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TYMLOS was proven to reduce risk of fracture

Once-daily TYMLOS was proven effective at 18 months of treatment.

A clinical study looked at how effective TYMLOS was at treating osteoporosis and reducing the risk of fracture in postmenopausal women:

- The study included over 1,600 postmenopausal women worldwide
- Women taking TYMLOS were compared with women taking a placebo (an injection that did not have any medicine)
- TYMLOS was taken for 18 months

AT 18 MONTHS IN A CLINICAL TRIAL, TYMLOS WAS PROVEN TO:

86% Reduce the risk of spinal fractures by 86% compared to placebo

0.6% of women taking TYMLOS had a spinal fracture vs 4.2% taking placebo.

43% Reduce the risk of fractures in other bones by 43% compared to placebo

2.7% of women taking TYMLOS had a non-spinal fracture vs 4.7% of women taking placebo.

BMD

Significantly increase bone density at the spine and hip compared to placebo

Women taking TYMLOS had significant increases in BMD in the spine and hip compared with women taking placebo.

After 18 months on TYMLOS, your doctor may recommend alendronate, a daily oral medication that may help maintain your reduced risk of fracture.

Selected Important Safety Information

TYMLOS can cause some people to have a higher blood calcium level than normal. Tell your healthcare provider if you have nausea, vomiting, constipation, low energy, or muscle weakness, which may be signs of this side effect.

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Designed with patients in mind

TYMLOS is a daily injection for postmenopausal women with osteoporosis.



SMALL NEEDLE (5 mm to 8 mm)

The pen needle is about the length of an eyelash.

30-DAY SUPPLY

Each pen has 30 days of medicine.

WITH OR WITHOUT FOOD

You can take TYMLOS with or without food or drink. Take TYMLOS at about the same time each day.

GOES WHERE YOU GO

For how to properly store your pen, see the pink box to the right.

Pen shown not actual size.



Learn how to inject TYMLOS at TYMLOS.com/instructions.

HOW TO PROPERLY STORE YOUR PEN



Before first use, store your TYMLOS in the refrigerator between 36°F and 46°F (2°C and 8°C).



After first use, store TYMLOS for up to 30 days at room temperature, between 68°F and 77°F (20°C and 25°C).



Do not store pens with the needle attached, and always keep the pen cap on when not in use.



Do not freeze the TYMLOS pen or expose it to heat.

Heading out of town?

Your TYMLOS pen can travel with you. Be sure to keep your medication in your carry-on. As with any medication, it is a good idea to keep your original prescription label with you.

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Patient Support Program

Together with Tymlos is committed to patients — that's why we assist with things such as checking insurance coverage, connecting you with a specialty pharmacy and trained clinical educators and providing information about a savings program for commercially insured patients that could lower out-of-pocket costs.

Find support by calling
Together with Tymlos
at 1-866-896-5674

Selected Important Safety Information

The most common side effects of TYMLOS include: dizziness, nausea, headache, fast heartbeat, fatigue, stomach pain and vertigo. These are not all the possible side effects.

Radius® Assist
Patient Assistance Program

Call 1-866-896-5674 to learn about Radius Assist, a patient assistance program that may be available to patients who cannot afford their medication.

YOU MAY PAY AS LITTLE AS \$0 A MONTH

Once you and your doctor have decided TYMLOS is right for you, find out if you're eligible for savings support to help with out-of-pocket costs. Eligible commercially insured patients may be able to pay as little as \$0 a month.*

PAY AS LITTLE AS
\$0
A MONTH

Download the savings card at TYMLOS.com/savings. iPhone® users can also download the card directly to Apple® Wallet.

*Eligible commercially insured patients with coverage for TYMLOS may pay as little as \$0 per month in out-of-pocket costs for their TYMLOS prescription, with a maximum annual savings of \$6,000.

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IMPORTANT SAFETY INFORMATION (CONT'D)

Before you take TYMLOS, tell your healthcare provider about all of your medical conditions, including if you:

- have Paget's disease of the bone or other bone disease, will have trouble injecting yourself with the TYMLOS pen and do not have someone who can help you
- have or have had cancer in your bones, have or have had radiation therapy involving your bones, have or have had too much calcium in your blood, have or have had too much of an enzyme called alkaline phosphatase in your blood, have or have had an increase in your parathyroid hormone (hyperparathyroidism)
- are pregnant or plan to become pregnant because TYMLOS is not for pregnant women, or are breastfeeding or plan to breastfeed. It is not known if TYMLOS passes into your breast milk. You and your healthcare provider should decide if you will take TYMLOS or breastfeed. You should not do both.

Tell your healthcare provider about all the medicines you take, including prescription and over-the-counter medicines, vitamins, and herbal supplements.

What are the possible side effects of TYMLOS?

TYMLOS can cause serious side effects including:

- **Decrease in blood pressure when you change positions.** Some people may feel dizzy, have a faster heartbeat, or feel lightheaded soon after the TYMLOS injection is given. These symptoms generally go away within a few hours. Take your injections of TYMLOS in a place where you can sit or lie down right away if you get these symptoms. If your symptoms get worse or do not go away, stop taking TYMLOS and call your healthcare provider.

• **Increased blood calcium (hypercalcemia).** TYMLOS

can cause some people to have a higher blood calcium level than normal. Your healthcare provider may check your blood calcium before you start and during your treatment with TYMLOS. Tell your healthcare provider if you have nausea, vomiting, constipation, low energy, or muscle weakness. These may be signs there is too much calcium in your blood.

• **Increased urine calcium (hypercalciuria).** TYMLOS

can cause some people to have higher levels of calcium in their urine than normal. Increased calcium may also cause you to develop kidney stones (urolithiasis) in your kidneys, bladder or urinary tract. Tell your healthcare provider right away if you get any symptoms of kidney stones which may include pain in your lower back or lower stomach area, pain when you urinate, or blood in your urine.

The most common side effects of TYMLOS include:

- | | | |
|-------------|--------------------------------|--------------|
| • dizziness | • fast heartbeat | • upper |
| • nausea | • feeling very tired (fatigue) | stomach pain |
| • headache | | • vertigo |

These are not all the possible side effects of TYMLOS. Call your doctor for medical advice about side effects. You may report side effects to FDA at 1-800-FDA-1088.

- If you take more TYMLOS than prescribed you may experience symptoms such as muscle weakness, low energy, headache, nausea, dizziness (especially when getting up after sitting for a while) and a faster heartbeat. Stop taking TYMLOS and call your healthcare provider right away.

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TYMLOS[®] (abaloparatide) injection

**Have more questions
about TYMLOS?**

Our FAQ page is full of
helpful information.

TYMLOS.com/faq



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facebook.com/tymlos**

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Radius

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