Johnson&Johnson

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IMPORTANT
DRUG
WARNING

April 2024

Subject: Serious Risks With Use of genetically modified autologous T-cell immunotherapies, including CARVYKTI® (ciltacabtagene autoleucel):
- **T-cell malignancies have occurred following treatment of hematologic malignancies with BCMA- and CD19-directed genetically modified autologous T-cell immunotherapies, including CARVYKTI®.**
- **Increased early mortality – In the CARTITUDE-4 study there was a numerically higher percentage of early deaths in patients randomized to the CARVYKTI® treatment arm compared to the control arm.**

Dear Health Care Provider:

The purpose of this letter is to inform you of important updated safety information for CARVYKTI® in the Boxed Warning, as well as the Warnings and Precautions sections of the USPI. Additionally, please note that the indication for CARVYKTI® has been revised.

CARVYKTI® is a B-cell maturation antigen (BCMA)-directed genetically modified autologous T-cell immunotherapy indicated for the treatment of adult patients with relapsed or refractory multiple myeloma who have received at least 1 prior line of therapy, including a proteasome inhibitor and an immunomodulatory agent, and are refractory to lenalidomide.

This letter is being distributed to all prescribers at CARVYKTI®-Certified Treatment Centers (CTCs) and physicians referring patients for treatment at the CTCs.

Serious Risks With Use of Genetically Modified Autologous T-cell immunotherapies, Including CARVYKTI®

T-cell malignancies have occurred following treatment of hematologic malignancies with BCMA- and CD19-directed genetically modified autologous T-cell immunotherapies, including CARVYKTI®.

- Patients treated with CARVYKTI® may develop secondary malignancies.
- T-cell malignancies have occurred following treatment of hematologic malignancies with BCMA- and CD19-directed genetically modified autologous T-cell immunotherapies, including CARVYKTI®.
- Mature T-cell malignancies, including CAR-positive tumors, may present as soon as weeks following infusions, and may include fatal outcomes (See CARVYKTI® USPI Warnings and Precautions Section 5.10).

Increased Early Mortality.

- In CARTITUDE-4, a randomized (1:1), controlled trial, there was a numerically higher percentage of early deaths in patients randomized to the CARVYKTI® treatment arm compared to the control arm.
- Among patients with deaths occurring within the first 10 months from randomization, a greater proportion (29/208; 14%) occurred in the CARVYKTI® arm compared to (25/211; 12%) in the control arm.
- Of the 29 deaths that occurred in the CARVYKTI® arm within the first 10 months of randomization, 10 deaths occurred prior to CARVYKTI® infusion, and 19 deaths occurred after CARVYKTI® infusion.
- Of the 10 deaths that occurred prior to CARVYKTI® infusion, all occurred due to disease progression, and none occurred due to adverse events.
- Of the 19 deaths that occurred after CARVYKTI® infusion, 3 occurred due to disease progression, and 16 occurred due to adverse events.
- The most common adverse events were due to infection (n=12) (See CARVYKTI® USPI Warnings and Precautions Section 5.1).

Prescriber Action

Counsel patients about the risks and benefits of CARVYKTI®, including the potential risks for T-cell malignancies and increased early mortality. Monitor life-long for secondary malignancies. In the event that a secondary malignancy occurs, contact Janssen Biotech, Inc., at 1-800-526-7736 for reporting and to obtain instructions on collection of patient samples.

Reporting Adverse Events

Health care providers and patients are encouraged to report any adverse events associated with CARVYKTI® to Janssen Biotech, Inc., at 1-800-Janssen (1-800-526-7736) or FDA at 1-800-FDA-1088 or www.fda.gov/medwatch.

You may also contact our medical information department at 1-800-526-7736 if you have any questions about the information contained in this letter or the safe and effective use of CARVYKTI®.

This letter is not intended as a complete description of the benefits and risks related to the use of CARVYKTI®. Please refer to the full Prescribing Information and Medication Guide.

Sincerely,

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