Prolia® is indicated:[1]

- For the treatment of postmenopausal women with osteoporosis at high risk for fracture, defined as a history of osteoporotic fracture, or multiple risk factors for fracture; or patients who have failed or are intolerant to other available osteoporosis therapy. In postmenopausal women with osteoporosis, Prolia reduces the incidence of vertebral, nonvertebral and hip fractures.
- As a treatment to increase bone mass in men with osteoporosis at high risk for fracture, defined as a history of osteoporotic fracture, or multiple risk factors for fracture; or patients who have failed or are intolerant to other available osteoporosis therapy.
- As a treatment to increase bone mass in men with nonmetastatic prostate cancer receiving androgen deprivation therapy (ADT), who are at high risk for fracture.
- As a treatment to increase bone mass in women with nonmetastatic breast cancer receiving adjuvant aromatase inhibitor (AI) therapy, who have low bone mass and are at high risk for fracture.
- As a treatment to increase bone mass in women and men at high risk for fracture due to sustained systemic glucocorticoid therapy.
- As a treatment to increase bone mass in women and men at high risk for fracture who are starting or have recently started long-term glucocorticoid therapy.

Pr prolia® denosumab

Consider Prolia[1]

Prolia experience across all 6 indications[1,2]

>365,000
patients in Canada

>11.7 MILLION
patient-years worldwide

Simple twice-yearly dosing by subcutaneous injection[1]

One 60 mg SC injection every 6 months

Patient retention

(evaluated in a Canadian population)

At 48 months, 63.5% of patients who were initiated on Prolia were still on therapy[3]*†

Start and stay with the proVital® Support Program

The ProVital® Patient Support Program provides your patients with:

- Next injection reminders
- Educational newsletters

* Patient retention rate was evaluated in 57,816 Canadian patients that initiated Prolia or an oral bisphosphonate drug (9,533 of whom started Prolia) from February 2014 to July 2014 and still active in the database 48 months later. Retention rate at 48 months was defined as the percent of selected patients that remained on therapy for 48 months following treatment initiation.[3]

† Adapted from QuintilesIMS longitudinal database, September, 2018.

Pr prolia® denosumab

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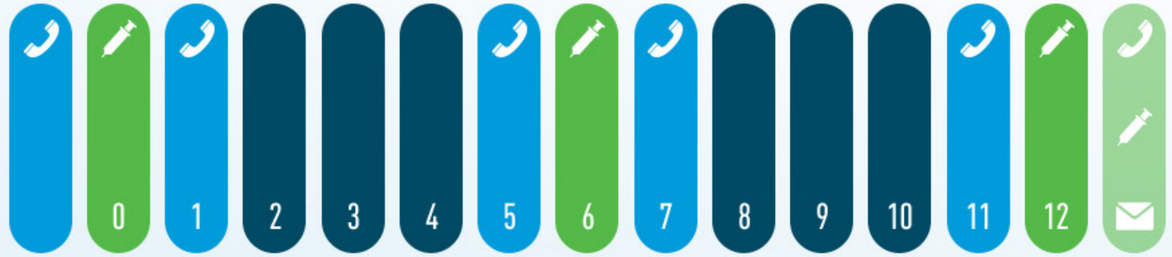
Enrol: Phone 1-877-776-1002 Fax 1-877-776-1022



Pr prolia® denosumab

Safety information

Clinical use:
Prolia is not indicated for use in pediatric patients.

Contraindications:
- Hypersensitivity to the drug or any component of the product. Anaphylactic reactions have been reported.
- Hypocalcemia
- Patients who are pregnant or trying to become pregnant. Verify the pregnancy status of women of reproductive potential prior to initiating Prolia. Advise them of the risk of Prolia use in pregnancy and to use effective contraception during therapy; and for at least 5 months after the last dose.

Relevant warnings and precautions:
- Contains same active ingredient as XGEVA®; do not use concurrently
- Adequate intake of calcium and vitamin D is important in all patients
- Hypocalcemia; clinical monitoring of calcium levels is recommended
- In severe renal impairment or dialysis, there is a greater risk of hypocalcemia; adequate intake of calcium and vitamin D is important
- Serious infections
- Epidermal and dermal adverse events
- Osteonecrosis of the jaw (ONJ); risk may increase with duration of exposure to Prolia; evaluate for ONJ risk factors before starting treatment; dental examination is recommended for those with risk factors; good oral hygiene practices should be maintained during treatment and invasive dental procedures should be avoided
- Atypical femoral fractures
- Multiple vertebral fractures following discontinuation of Prolia treatment
- Significant suppression of bone remodelling
- Potential for greater sensitivity in older patients
- Not recommended in nursing women
- Potential for female partner and fetal exposure unlikely when taken by men
- Latex sensitivity

For more information:
Please consult the Product Monograph at www.amgen.ca/Prolia_PM.pdf for important information relating to adverse reactions, drug interactions and dosing information which have not been discussed in this piece.

The Product Monograph is also available by calling us at 1-866-502-6436.

References: 1. Prolia Product Monograph. Amgen Canada Inc., June 25, 2019. **2.** Data on file. Amgen Canada Inc. **3.** QuintilesIMS longitudinal database. September 2018.

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Pr prolia® denosumab