[Date]

IMPORTANT DRUG WARNING

Subject: Risk of possible acceleration of neoplastic growth and enhancement of colon polyp growth, GI obstruction, biliary and pancreatic disorders with GATTEX® (teduglutide)

Dear Healthcare Professional:

The purpose of this letter is to remind you about the serious risks associated with GATTEX® (Teduglutide) for Injection and need for ongoing monitoring for these risks.

GATTEX is indicated for the treatment of adult patients with Short Bowel Syndrome (SBS) who are dependent on parenteral support.

The FDA has determined that a Risk Evaluation and Mitigation Strategy (REMS) is necessary to ensure that the benefits of GATTEX outweigh the potential risks.

Serious Risks of GATTEX

Possible acceleration of neoplastic growth and enhancement of colon polyp growth

- *Acceleration of Neoplastic Growth*

Based on the pharmacologic activity and findings in animals, GATTEX has the potential to cause hyperplastic changes including neoplasia. In patients at increased risk for malignancy, the clinical decision to use GATTEX should be considered only if the benefits outweigh the risks. In patients with active gastrointestinal malignancy (GI tract, hepatobiliary, pancreatic), GATTEX therapy should be discontinued. In patients with active non-gastrointestinal malignancy, the clinical decision to continue GATTEX should be made based on risk-benefit considerations.

- *Colorectal Polyps*

Colorectal polyps were identified during the clinical trials. Colonoscopy of the entire colon with removal of polyps should be done within 6 months prior to starting treatment with GATTEX. A follow-up colonoscopy (or alternate imaging) is recommended at the end of 1 year of GATTEX. Subsequent colonoscopies should be done every 5 years or more often as needed. If a polyp is found, adherence to current polyp follow-up guidelines is recommended. In case of diagnosis of colorectal cancer**,** GATTEX therapy should be discontinued.

- *Small Bowel Neoplasia*

Based on benign tumor findings in the rat carcinogenicity study, patients should be monitored clinically for small bowel neoplasia. If a benign neoplasm is found, it should be removed. In case of small bowel cancer, GATTEX therapy should be discontinued.

Gastrointestinal obstruction

Intestinal obstruction has been reported in clinical trials. In patients who develop intestinal or stomal obstruction, GATTEX should be temporarily discontinued while the patient is clinically managed. GATTEX may be restarted when the obstructive presentation resolves, if clinically indicated.

Biliary and pancreatic disorders

- *Gallbladder and Biliary Tract Disease*

Cholecystitis, cholangitis, and cholelithiasis, have been reported in clinical studies. For identification of the onset or worsening of gallbladder/biliary disease, patients should undergo laboratory assessment of bilirubin and alkaline phosphatase within 6 months prior to starting GATTEX, and at least every 6 months while on GATTEX; or more frequently if needed. If clinically meaningful changes are seen, further evaluation including imaging of the gallbladder and/or biliary tract is recommended; and the need for continued GATTEX treatment should be reassessed.

- *Pancreatic Disease*

Pancreatitis has been reported in clinical studies. For identification of onset or worsening of pancreatic disease, patients should undergo laboratory assessment of lipase and amylase within 6 months prior to starting GATTEX, and at least every 6 months while on GATTEX; or more frequently if needed. If clinically meaningful changes are seen, further evaluation such as imaging of the pancreas is recommended; and the need for continued GATTEX treatment should be reassessed.

Appropriate Patient Selection, Counseling, and Monitoring

Prescribers should select the appropriate patients to receive GATTEX in accordance with the approved prescribing information, discuss the benefits and risks of GATTEX with patients, and monitor patients as specified in the approved prescribing information. A *What You Need to Know About Gattex Treatment: A Patient and Caregiver Counseling Guide* is available for your use in discussing GATTEX with patients. The guide can be accessed via www.GATTEXREMS.com or by contacting 1-855-5GATTEX (1-855-542-8839).

GATTEX Healthcare Provider Training

It is important that healthcare providers understand the serious risks associated with GATTEX. As part of the REMS, healthcare providers should access www.GATTEXREMS.com to review the Prescriber Education Slide Deck and complete a Post-training Knowledge Assessment. The Prescriber Education Slide Deck and the Post-training Knowledge Assessment can also be obtained in hard copy by contacting 1-855-5GATTEX (1-855-542-8839).

Reporting Adverse Events

To report all suspected adverse events associated with the use of GATTEX, contact 1-855-5GATTEX (1-855-542-8839); or to report an adverse event to FDA, contact the FDA MedWatch program at 1-800-FDA-1088 (1-800-332-1088), or via the FDA website at www.fda.gov/medwatch./report.htm.

A copy of the letter is available at www.GATTEXREMS.com or by calling the toll-free GATTEX Support Line at 1-855-5GATTEX (1-855-542-8839). For more information regarding GATTEX, please contact the toll-free GATTEX Support Line at 1-855-5GATTEX (1-855-542-8839) or visit the product website at www.GATTEX.com.

Please see the enclosed full Prescribing Information for GATTEX for additional safety information.

Sincerely,

Alice Dietrich, MD
Vice President
Interim Head of Global Medical Affairs
Research and Development
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Enclosures:

- GATTEX Full Prescribing Information
- Medication Guide