

For men whose prostate cancer has spread to the bone¹

When cancer
has weakened
your bones,
help protect
yourself from
serious bone
problems*
with XGEVA^{®1}



Nearly 1.5 million people with cancer
worldwide have been treated with XGEVA^{®2}

*Serious bone problems are defined as broken bones (fractures), the need for bone surgery, radiation treatments for bone pain, and pressure on the spinal cord.¹

Indication

XGEVA[®] is a prescription medicine used to prevent fracture, spinal cord compression, or the need for radiation or surgery to bone in patients with multiple myeloma and in patients with bone metastases from solid tumors.

IMPORTANT SAFETY INFORMATION

Do not take XGEVA[®] if you have low blood calcium (hypocalcemia). Your low blood calcium must be treated before you receive XGEVA[®]. XGEVA[®] can significantly lower the calcium levels in your blood and some deaths have been reported. Take calcium and vitamin D as your doctor tells you to. Tell your doctor right away if you experience spasms, twitches, cramps, or stiffness in your muscles or numbness or tingling in your fingers, toes, or around your mouth.

Please see additional Important Safety Information on pages 10-11.

XGEVA[®]
(denosumab) injection
120 mg/1.7 mL vial

What are bone mets and how can they affect me?

Bone metastases (muh-TASS-tuh-seez), or bone mets, can pose a significant risk to the health of your bones³

Normally, your body continually breaks down and rebuilds your bones to keep them strong. Unfortunately, when cancer spreads to the bones (metastasizes), the bones can:³

- Break down faster than normal
- Weaken over time

When your bones weaken, you are at risk for serious bone problems. These are defined as:³



Broken bones (fractures)



A need for surgery to prevent or repair broken bones



A need for radiation treatments to the bone



Pressure on the spinal cord (spinal cord compression)

What is my risk of having a serious bone problem?

Without a proactive prevention plan in place, serious bone problems could occur sooner than you might think⁴

**WITHIN 3 MONTHS
OF A BONE MET DIAGNOSIS**



About **1 in 4** men suffered a serious bone problem⁴

**AT ANY GIVEN TIME
AFTER A BONE MET DIAGNOSIS**



About **1 in 2** men are at risk for a serious bone problem⁵

Work with your doctor as soon as you've been diagnosed with a bone met to help prevent a serious bone problem

What signs and symptoms should I look out for?

It's important to anticipate serious bone problems* by reporting any new symptoms you experience to your doctor

Common symptoms of a serious bone problem include:³

- Sudden, severe pain that prevents movement
- Pain in your back or neck
- Difficulty urinating
- Constipation
- Lack of bowel or bladder control
- Numbness
- Weakness
- Paralysis

Other symptoms could occur.



Pain isn't always an indicator of serious bone problems⁶

- At the start of a small study in prostate cancer patients, half of men who experienced a serious bone problem reported no pain

Don't wait until you experience pain to talk to your doctor about preventing serious bone problems.

What's the good news?

There are bone-targeting medicines specifically designed to help prevent serious bone problems before they happen¹

Turn the page to learn about XGEVA[®], a bone-targeting medicine doctors prescribe to lessen the risk of serious bone problems¹

*Serious bone problems are defined as broken bones (fractures), the need for bone surgery, radiation treatments for bone pain, and pressure on the spinal cord.¹

What is XGEVA® and how can it help protect my bones?

XGEVA® works to restore balance in your bones¹

XGEVA® is a prescription medicine used to prevent fracture, spinal cord compression, or the need for radiation or surgery to bone in people with multiple myeloma and in people with bone mets from breast, prostate, lung cancer, and other solid tumors.

18%

Superior prevention

In clinical studies,* men with prostate cancer and bone mets were **18% less likely to have serious bone problems[†] with XGEVA®** than with another bone-targeting medicine, ZA¹

*In a study of 1,901 men with prostate cancer and bone metastases, median time to experiencing a serious bone problem was 20.7 months with XGEVA® and 17.1 months with ZA.¹

ZA, zoledronic acid.

[†]Serious bone problems are defined as broken bones (fractures), the need for bone surgery, radiation treatments for bone pain, and pressure on the spinal cord.¹

IMPORTANT SAFETY INFORMATION (cont'd)

Do not take XGEVA® if you are allergic to denosumab or any of the ingredients of XGEVA®. Serious allergic reactions have happened in people who take XGEVA®. Call your doctor or go to your nearest emergency room right away if you have any symptoms of a serious allergic reaction, including low blood pressure (hypotension); trouble breathing; throat tightness; swelling of the face, lips, or tongue, rash; itching; or hives.

What is the most important information you should know about XGEVA®?

Do not take XGEVA® if you take other products containing denosumab (for example, Prolia®). XGEVA® should not be taken with other products containing denosumab.

Please see additional Important Safety Information on pages 10-11.

How will I receive XGEVA®?

XGEVA® is a shot given once every 4 weeks at your doctor's office¹



- XGEVA® is given under the skin in the upper arm, upper thigh, or stomach area¹

Tip: Wear loose-fitting clothing to your appointment to make these areas more easily accessible

- XGEVA® does not involve an infusion through the vein¹



- Your doctor will test your blood calcium levels before you start XGEVA®. You cannot start XGEVA® if you have low blood calcium¹

Tip: Be sure to take vitamin D and calcium supplements as prescribed by your doctor to help prevent low calcium levels in the blood

For the best chance of preventing serious bone problems, get your XGEVA® injection every 4 weeks as prescribed¹

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How can I stay on track with XGEVA®?

Sticking to your treatment schedule helps give you the best chance of preventing serious bone problems^{1,*}

- **Schedule** appointments for every 4 weeks in advance
- **Record** appointments in your calendar
- **Ask** family or friends for help getting to your doctor's office
- **Write** down questions to ask your doctor before appointments

If you have missed a dose, it is important to talk to your doctor about getting back on track with XGEVA® to help prevent serious bone problems¹

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IMPORTANT SAFETY INFORMATION (cont'd)

Severe jaw bone problems (osteonecrosis)

Severe jaw bone problems may happen when you take XGEVA®. Your doctor should examine your mouth before you start, and while you are taking XGEVA®. Tell your dentist that you are taking XGEVA®. It is important for you to practice good mouth care during treatment with XGEVA®. In studies of patients with bone involvement, the rate of severe jaw problems was higher the longer they were being treated with XGEVA®.

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AMGEN® Support⁺

We're right here, right when you need us

Personalized patient support designed for you.

Amgen® SupportPlus Co-Pay Program

The Amgen SupportPlus Co-Pay Program may help patients with commercial or private insurance lower their out-of-pocket costs.

- Pay as little as \$0* out-of-pocket for each dose
- Can be applied to deductible, co-insurance, and co-payment*
- No income eligibility requirement



Amgen® Nurse Partners

Amgen Nurse Partners[†] will be with you along the way to offer support and provide information about resources to help you access your prescribed Amgen medication. Amgen Nurse Partners can provide support, including:

- Guidance on resources that may help lower out-of-pocket medication costs
- Assistance to help you stay on track with your medication
- Support for stress management and emotional wellness

Call Amgen® SupportPlus at **866-264-2778**
Monday through Friday 9:00 AM to 8:00 PM ET
or Visit [AmgenSupportPlus.com](https://www.AmgenSupportPlus.com)

^{*}Eligibility criteria and program maximums apply. See [AmgenSupportPlus.com/Copay](https://www.AmgenSupportPlus.com/Copay) for full Terms and Conditions.

[†]Amgen Nurse Partners are only available to patients that are prescribed certain Amgen products. They are not part of your treatment team and do not provide medical advice, nursing, or case management services. Amgen Nurse Partners will not inject patients with Amgen medications. Patients should always consult their healthcare provider regarding medical decisions or treatment concerns.

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Unusual thigh bone fracture
Unusual thigh bone fracture has been reported. Symptoms of a fracture include new or unusual pain in your hip, groin, or thigh.

Risk of high calcium levels in patients with Giant Cell Tumor of Bone and in patients who are still growing
Patients with a type of cancer called Giant Cell Tumor of Bone and patients with bones that are not fully matured are at a greater risk to develop high blood calcium levels after they stop taking XGEVA®, that can be serious.

Increased risk of broken bones in the spine after discontinuing XGEVA®
After your treatment with XGEVA® is stopped, your risk for breaking bones in your spine can increase, especially if you have a history of risk factors such as osteoporosis or prior fractures.

Possible harm to your unborn baby
You should not become pregnant while taking XGEVA®. Tell your doctor right away if you are pregnant, plan to become pregnant, or suspect you are pregnant. XGEVA® can harm your unborn baby.

Tell your doctor if you:

- Are taking any other medicine containing denosumab (for example, Prolia®)
- Have symptoms of low blood calcium such as muscle stiffness or cramps
- Have symptoms of severe jaw bone problems such as pain or numbness
- Have ongoing pain or slow healing after dental surgery
- Have symptoms of high blood calcium such as nausea, vomiting, headache, and decreased alertness
- Are pregnant, plan to become pregnant, suspect you are pregnant, or breastfeeding

While taking XGEVA®, you should:

- Tell your doctor about all medications you are taking. Your doctor needs to know if you are taking other medications that also lower blood calcium levels.
- Take good care of your teeth and gums and visit a dentist as recommended
- Tell your dentist that you are taking XGEVA®
- Tell your doctor if you plan to have dental surgery or teeth removed
- Talk to your doctor before you stop taking XGEVA® about your risk for broken bones in your spine.
- Women of child bearing age should use highly effective contraception while taking XGEVA® and for at least 5 months after the last dose of XGEVA®

What are the possible side effects of XGEVA®?

In patients with bone metastases from solid tumors using XGEVA®, the most common side effects were tiredness/weakness, low phosphate levels in your blood, and nausea. The most common serious side effect of XGEVA® was shortness of breath.

In multiple myeloma patients receiving XGEVA®, the most common side effects were diarrhea, nausea, low red blood cells, low blood platelets and calcium levels, back pain, swelling of the lower legs or hands, upper respiratory tract infection, rash, and headache. The most common serious adverse reaction in multiple myeloma patients was pneumonia.

These are not all the possible side effects of XGEVA®. For more information, ask your doctor or pharmacist.

Call your doctor for medical advice about side effects. You are encouraged to report negative side effects of prescription drugs to the FDA. Visit www.fda.gov/medwatch, or call 1-800-FDA1088.

Please see full Prescribing Information.

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When prostate cancer has spread to your bones,

Are you doing all you can to help prevent serious bone problems?*

Ask your doctor about XGEVA[®], a bone-targeting
medicine for preventing serious bone problems¹

Visit [XGEVA.com](https://www.amgen.com/xgeva) to learn more

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IMPORTANT SAFETY INFORMATION (cont'd)

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**Please see additional Important Safety Information
on pages 10-11.**

References: **1.** XGEVA[®] (denosumab) prescribing information, Amgen. **2.** Data on file, Amgen; 2020. **3.** Bone Metastases. American Cancer Society. Updated March 10, 2023. <https://www.cancer.org/cancer/managing-cancer/advanced-cancer/bone-metastases.html>. Accessed May 16, 2025. **4.** Bhowmik D, Song X, Intorcica M, Gray S, Shi N. Examination of burden of skeletal-related events in patients naive to denosumab and intravenous bisphosphonate therapy in bone metastases from solid tumors population. *Curr Med Res Opin.* 2019;35(3):513-523. **5.** Oster G, Lamerato L, Glass AG, et al. Natural history of skeletal-related events in patients with breast, lung, or prostate cancer and metastases to bone: a 15-year study in two large US health systems. *Support Care Cancer.* 2013;21(12):3279-3286. **6.** Saad F, Eastham J. Zoledronic acid improves clinical outcomes when administered before onset of bone pain in patients with prostate cancer. *Urology.* 2010;76(5):1175-1181.

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