



Victory looks like this

PLUVICTO is not chemotherapy.

It's different.



PLUVICTO[®]

lutetium Lu 177 vipivotide tetraxetan
INJECTION FOR INTRAVENOUS USE

Patient portrayal.

Now FDA approved *as early as metastatic prostate cancer diagnosis*

What is PLUVICTO[®] (lutetium Lu 177 vipivotide tetraxetan)?

PLUVICTO is a prescription treatment used to treat adults with metastatic prostate-specific membrane antigen–positive (PSMA+) prostate cancer and are:

- androgen pathway modulation-naïve or -sensitive (mAPMN/S) in combination with hormone therapy, or
- androgen pathway modulation-resistant (mAPMR) after hormone therapy, and
 - appropriate to delay chemotherapy, or
 - have received prior chemotherapy

IMPORTANT SAFETY INFORMATION

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

Use of PLUVICTO involves exposure to radioactivity. Long-term, accruing radiation exposure is associated with an increased risk for cancer. Drink plenty of water and urinate as often as possible during the first hours after administration.

Please see additional Important Safety Information throughout.

Find out if PLUVICTO could be right for you.

In the PSMAAddition clinical study, PLUVICTO reduced the risk of cancer worsening by an additional 28% vs hormone therapy alone.

86% of men on PLUVICTO had their tumors shrink or disappear (vs 81%).

FDA, US Food and Drug Administration.

Table of Contents

About metastatic prostate cancer (mPC) and PLUVICTO

Types of mPC 3

Why PSMA matters 4

How PLUVICTO works 5

Who could benefit from PLUVICTO? 6

Studied in men like you

Men with PSMA+ mHSPC who are responding to hormone therapy 7–8

Men with PSMA+ mCRPC after hormone therapy 9–10

Men with PSMA+ mCRPC after both chemotherapy and hormone therapy 11–12

PLUVICTO side effects 13

The PLUVICTO treatment experience

Getting PLUVICTO 14

What targeted radiation with PLUVICTO means for you 15

What to expect with PLUVICTO 16

Coverage 17

Novartis Patient Support™ 18

Patient portrayal.

 **PLUVICTO®**
lutetium Lu 177 vipivotide tetraxetan
INJECTION FOR INTRAVENOUS USE

There are different types of metastatic prostate cancer (mPC)

If your prostate cancer has spread outside of the prostate, it has become metastatic

Metastatic Hormone-Sensitive Prostate Cancer (mHSPC):
mPC that responds to hormone therapy.



Patient
portrayal.

mHSPC can progress over time



Patient
portrayal.

Metastatic Castration-Resistant Prostate Cancer (mCRPC): mPC that has stopped responding to hormone treatment that lowers testosterone.

mHSPC is also known as mAPMN/S prostate cancer.

- mHSPC can be newly diagnosed or it may be a situation in which early or localized prostate cancer becomes metastatic
- Over time, mHSPC can stop responding to hormone therapies that lower testosterone and become mCRPC

mCRPC is also known as mAPMR prostate cancer.

If you have mCRPC, you still have treatment options that are different from hormone therapy and are not necessarily chemotherapy.

The longer you can keep mPC from worsening, the better.

mAPMN/S prostate cancer, metastatic androgen pathway modulation-naïve or -sensitive prostate cancer;
mAPMR prostate cancer, metastatic androgen pathway modulation-resistant prostate cancer.

 **PLUVICTO[®]**
lutetium Lu 177 vipivotide tetraxetan
INJECTION FOR INTRAVENOUS USE

A photograph showing a female patient, a male patient, and a male doctor in a white lab coat sitting on a blue couch in a modern office setting. The doctor is looking at the male patient, who is looking at the female patient. A large potted plant is in the background.

Patient and doctor portrayal.

Your PSMA status can help determine your treatment options

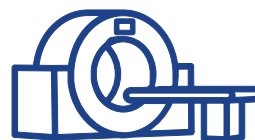
PSMA, or prostate-specific membrane antigen, is normally found on prostate cells, and its levels are up to 1000 times higher in prostate cancer cells. If you have higher levels of PSMA compared with a standard level, your PSMA status is considered PSMA positive (PSMA+).

>80% of men with prostate cancer have PSMA+ status, and you could too.

PSMA is different than PSA

PSA
LEVELS ↑

PSA, or prostate-specific antigen, is a protein made by the prostate that is numerically measured through a blood test. High levels of PSA can tell you and your doctor that cancer may be present somewhere in the body.



PSMA, on the other hand, is detected with a PSMA-PET scan. This can show where the cancer has spread in your body and if your mPC is PSMA+.

Ask your doctor about your PSMA status to determine whether PLUVICTO could be right for you.

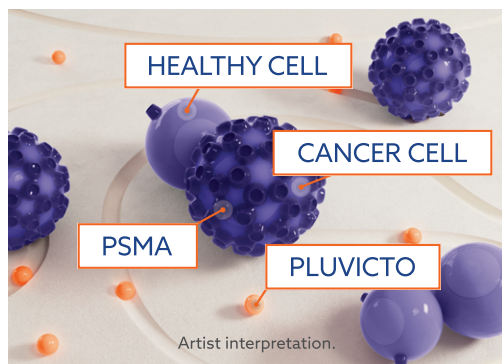
PET, positron emission tomography.

 **PLUVICTO[®]**
lutetium Lu 177 vipivotide tetraxetan
INJECTION FOR INTRAVENOUS USE

PLUVICTO is not chemotherapy. It's different.

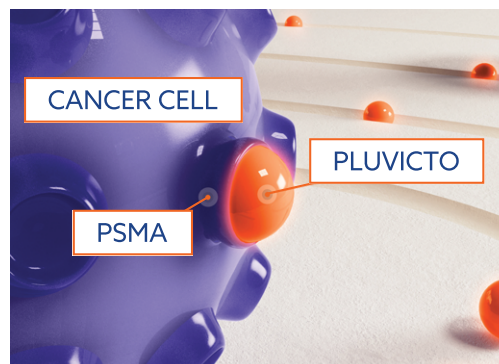
PLUVICTO is a targeted therapy with the goal to deliver radiation directly into PSMA+ cells to destroy them from within

Think of PLUVICTO in 3 steps:



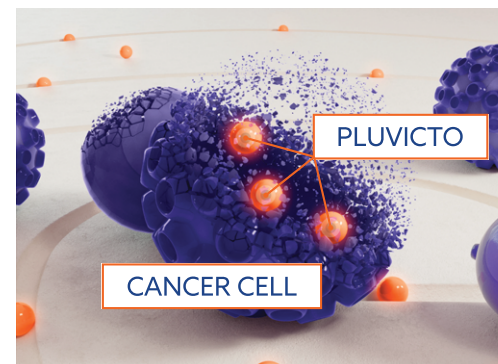
1. Locate

PLUVICTO is designed to find and attack PSMA+ cells. PSMA is found on many prostate cancer cells and also some healthy cells.



2. Enter

When PLUVICTO finds PSMA on the surface of a cell, it goes into the cell.



3. Destroy

Once inside, PLUVICTO releases radiation, damaging or destroying the cell from within. It may also affect some nearby healthy cells.

IMPORTANT SAFETY INFORMATION (continued)

What is the most important information I should know about PLUVICTO? (continued)

To minimize radiation exposure to others following administration of PLUVICTO, limit close contact (less than 3 feet) with household contacts for 2 days or with children and pregnant women for 7 days. Refrain from sexual activity for 7 days, and sleep in a separate bedroom from household contacts for 3 days, from children for 7 days, or from pregnant women for 15 days.

Please see additional Important Safety Information throughout.



Studied in men like you across different types of PSMA+ mPC

Here are examples of men who could benefit from PLUVICTO:



Patient portrayal.

- **Newly diagnosed** with PSMA+ mPC that responds to hormone therapy (mHSPC)

[Click here to see PLUVICTO results](#)



Patient portrayal.

- Has PSMA+ **mCRPC** and **already tried hormone therapy**
- His doctor says it is **appropriate for him to delay chemotherapy**

[Click here to see PLUVICTO results](#)



Patient portrayal.

- Has been living with PSMA+ **mCRPC**
- Already **tried hormone therapy and chemotherapy**

[Click here to see PLUVICTO results](#)

Ask your doctor if PLUVICTO could be right for you.

IMPORTANT SAFETY INFORMATION (continued)

PLUVICTO may cause serious side effects, including:

Low level of blood cell counts, which may be severe and life-threatening. Tell your doctor right away if you develop any new or worsening symptoms, including:

- Tiredness or weakness
- Pale skin
- Shortness of breath
- Bleeding or bruising more easily than normal or difficulty stopping bleeding
- Frequent infections with signs such as fever, chills, sore throat, or mouth ulcers

Please see additional Important Safety Information throughout.



The PSMAAddition clinical study included men with PSMA+ mPC who haven't yet received mPC treatment and whose cancer is responding to hormone therapy (mHSPC, also known as mAPMN/S prostate cancer)



1144 men were divided into 2 groups:

- 572 men received PLUVICTO plus hormone therapy*
 - PLUVICTO was given once every 6 weeks for up to 6 doses
- 572 men received hormone therapy alone*

Patient portrayal.



*Hormone therapy included a combination of testosterone-lowering treatment called androgen deprivation therapy (ADT) and testosterone receptor blocker treatment called androgen receptor pathway inhibitor (ARPI). mAPMN/S prostate cancer, metastatic androgen pathway modulation-naïve or -sensitive prostate cancer; mHSPC, metastatic hormone-sensitive prostate cancer.

IMPORTANT SAFETY INFORMATION (continued)

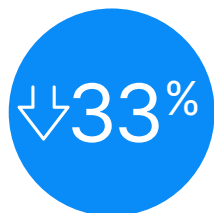
PLUVICTO may cause serious side effects, including (continued):

Kidney problems, which can be severe. You should stay well hydrated before and after treatment. Tell your doctor right away if you develop any new or worsening urinary symptoms.

Please see additional Important Safety Information throughout.

 **PLUVICTO[®]**
lutetium Lu 177 vipivotide tetraxetan
INJECTION FOR INTRAVENOUS USE

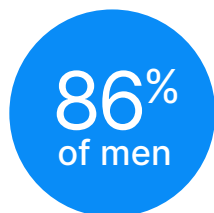
PLUVICTO helped men with PSMA+ mHSPC live longer without cancer worsening



In a primary analysis, PLUVICTO reduced the risk of cancer worsening by an additional 28% vs hormone therapy alone.

In an updated analysis 14 months later, PLUVICTO reduced the risk of cancer worsening by an additional 33% vs hormone therapy alone

50% of men on hormone therapy alone lived without cancer worsening for 48.5 months while **men on PLUVICTO lived longer than that without cancer worsening** (the exact length of time is continuing to be measured).



86% of men had tumors shrink or disappear

86% of men on PLUVICTO plus hormone therapy had tumors disappear or shrink vs **81%** of men on hormone therapy alone.

This result is called the overall response rate (ORR),* which is calculated by adding complete response (CR), which is when a tumor disappears, and partial response (PR), which is when a tumor shrinks.

- CR: **63%** with PLUVICTO plus hormone therapy vs **49%** with hormone therapy alone
- PR: **23%** with PLUVICTO plus hormone therapy vs **32%** with hormone therapy alone



Nearly 9 out of 10 men had undetectable PSA levels*

87% of men on PLUVICTO plus hormone therapy had undetectable PSA (<0.2 ng/mL) at 48 weeks vs **75%** of men on hormone therapy alone.

*Measuring ORR and PSA response were not the main goals of the PSMAAddition clinical study. These findings are not statistically significant and do not impact the results related to cancer worsening.

IMPORTANT SAFETY INFORMATION (continued)

PLUVICTO may cause serious side effects, including (continued):

All radiopharmaceuticals, including PLUVICTO, have the potential to **cause harm to an unborn baby**.

- You should use effective contraception during treatment with PLUVICTO and for 14 weeks after your last dose

PLUVICTO may cause temporary or permanent **infertility**.

Please see additional Important Safety Information throughout.

[Click here to see more PLUVICTO results from this study.](#)

 **PLUVICTO**[®]
lutetium Lu 177 vipivotide tetraxetan
INJECTION FOR INTRAVENOUS USE

The PSMAfore clinical study included men with PSMA+ mPC who stopped responding to testosterone-lowering hormone therapy (mCRPC, also known as mAPMR prostate cancer) and didn't receive chemotherapy*



468 men were divided into 2 groups:

- 234 men were treated with PLUVICTO
 - PLUVICTO was given once every 6 weeks for up to 6 doses
- 234 men were treated with a second hormone therapy

Patient portrayal.



*These men had already received hormone therapy for mPC.
mAPMR prostate cancer, metastatic androgen pathway modulation-resistant prostate cancer; mCRPC, metastatic castration-resistant prostate cancer.

IMPORTANT SAFETY INFORMATION (continued)

The most common side effects of PLUVICTO include:

- | | | |
|-------------------------------|-------------|-------------------|
| • Decreased blood cell counts | • Tiredness | • Nausea |
| • Laboratory abnormalities | • Dry mouth | • Kidney problems |

Please see additional Important Safety Information throughout.

 **PLUVICTO[®]**
lutetium Lu 177 vipivotide tetraxetan
INJECTION FOR INTRAVENOUS USE

PLUVICTO helped men with PSMA+ mCRPC live longer without cancer worsening

2x

2x more time without cancer worsening

Median radiographic progression-free survival (rPFS) was **9.3 months** for men on PLUVICTO vs **5.6 months** for men on a second hormone therapy.

Median rPFS is the time when half of the men in the study are still alive without their cancer getting worse based on imaging results.

In an updated analysis 17 months later*:

- Median rPFS was **11.6 months** for men on PLUVICTO vs **5.6 months** for men on a second hormone therapy

Survival analysis (overall survival)

Median overall survival (OS) was higher in patients on PLUVICTO (**24.5 months**) vs patients on a second hormone therapy (**23.1 months**). These results were not statistically significant.

More than
3x

More than 3x the men had tumors shrink or disappear

49% of men on PLUVICTO had tumors disappear or shrink vs **14%** on a second hormone therapy. That's 3.5 times as many.

This result is called the overall response rate (ORR),[†] which is calculated by adding complete response (CR), which is when a tumor disappears, and partial response (PR), which is when a tumor shrinks.

- CR: **21%** with PLUVICTO vs **2.8%** with a second hormone therapy
- PR: **28%** with PLUVICTO vs **11%** with a second hormone therapy

PSA
LEVELS↓

3x more men had their PSA level drop[†]

51% of men on PLUVICTO had at least a 50% drop in PSA vs **17%** on a second hormone therapy.

If PSA was 100 ng/mL before the clinical study, then PSMAfore would measure the PSA level if it dropped to 50 ng/mL or lower.

[Click here to see more PLUVICTO results from this study.](#)

*Additional analysis conducted to learn more about rPFS in PLUVICTO patients.

[†]Measuring ORR and PSA response were not the main goals of the PSMAfore clinical study. These findings are not statistically significant and do not impact the results for rPFS.

IMPORTANT SAFETY INFORMATION (continued)

The most common side effects of PLUVICTO include (continued):

These are not all of the possible side effects of PLUVICTO. Call your doctor for 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-FDA-1088.

Please see additional Important Safety Information throughout.



The VISION clinical study included men with PSMA+ mPC who stopped responding to testosterone-lowering hormone therapy (mCRPC, also known as mAPMR prostate cancer) and had already tried both chemotherapy and hormone therapy



Patient portrayal.

831 men were divided into 2 groups:

- 551 men were treated with PLUVICTO plus standard therapy*
 - PLUVICTO was given once every 6 weeks for up to 6 doses
- 280 men were treated with hormone therapy alone

*Standard therapy was chosen by a doctor from among existing approved treatments and did not include chemotherapy, immunotherapy, systemic isotopes like radium-223 (^{223}Ra), or drugs still being studied. mAPMR prostate cancer, metastatic androgen pathway modulation-resistant prostate cancer; mCRPC, metastatic castration-resistant prostate cancer.

IMPORTANT SAFETY INFORMATION

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

Use of PLUVICTO involves exposure to radioactivity. Long-term, accruing radiation exposure is associated with an increased risk for cancer. Drink plenty of water and urinate as often as possible during the first hours after administration.

Please see additional Important Safety Information throughout.

 **PLUVICTO[®]**
lutetium Lu 177 vipivotide tetraxetan
INJECTION FOR INTRAVENOUS USE

PLUVICTO helped men with PSMA+ mCRPC live longer

15
months

PLUVICTO may help you live longer

Median overall survival (OS) was **15.3 months** for men on PLUVICTO plus standard therapy vs **11.3 months** for men on standard therapy alone.

9
months

9 months without cancer worsening

Median radiographic progression-free survival (rPFS) was **8.7 months** for men on PLUVICTO plus standard therapy vs **3.4 months** for men on standard therapy alone.*

Median rPFS is the time when half of the men in the study are still alive without their cancer getting worse based on imaging results.

*rPFS results may be misread. In the clinical study, many patients treated with standard therapy alone dropped out early.

IMPORTANT SAFETY INFORMATION (continued)

What is the most important information I should know about PLUVICTO? (continued)

To minimize radiation exposure to others following administration of PLUVICTO, limit close contact (less than 3 feet) with household contacts for 2 days or with children and pregnant women for 7 days. Refrain from sexual activity for 7 days, and sleep in a separate bedroom from household contacts for 3 days, from children for 7 days, or from pregnant women for 15 days.

Please see additional Important Safety Information throughout.

49%
of men

49% of men had tumors shrink or disappear

On PLUVICTO plus standard therapy, **49%** of men had their tumors shrink or disappear vs **1.6%** with standard therapy alone.

This result is called the overall response rate (ORR), which is calculated by adding complete response (CR), which is when a tumor disappears, and partial response (PR), which is when a tumor shrinks.

- CR: **9%** with PLUVICTO vs **0%** with standard therapy
- PR: **40%** with PLUVICTO vs **1.6%** with standard therapy

[Click here to see more PLUVICTO results from this study.](#)





Patient and doctor portrayal.

It's normal to have concerns about side effects

Here are some of the most common side effects of PLUVICTO:

Tiredness

Dedicate times for rest to conserve energy for important activities.

Dry mouth

Unless your doctor has restricted your fluid intake, consider sipping water regularly, try using saliva substitutes, or chew sugarless gum.

Nausea

Try to eat small, frequent meals that are easier to digest and avoid strong food-related odors. Tell your doctor if you have unmanageable nausea as they may prescribe anti-nausea medication.

Laboratory abnormalities

Follow your doctor's instructions for laboratory tests. Tell your doctor if you have fever, chills, breathing problems, or unusual bruising or bleeding.

These are not all of the possible side effects of PLUVICTO. Call your doctor for 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-FDA-1088.

Talk to your care team about any side effects. Your health care provider may temporarily delay your next dose, decrease your dose, or completely stop your treatment with PLUVICTO if you develop certain side effects.

IMPORTANT SAFETY INFORMATION (continued)

PLUVICTO may cause serious side effects, including:

Low level of blood cell counts, which may be severe and life-threatening. Tell your doctor right away if you develop any new or worsening symptoms, including:

- Tiredness or weakness
- Pale skin
- Shortness of breath
- Bleeding or bruising more easily than normal or difficulty stopping bleeding
- Frequent infections with signs such as fever, chills, sore throat, or mouth ulcers

Please see additional Important Safety Information throughout.

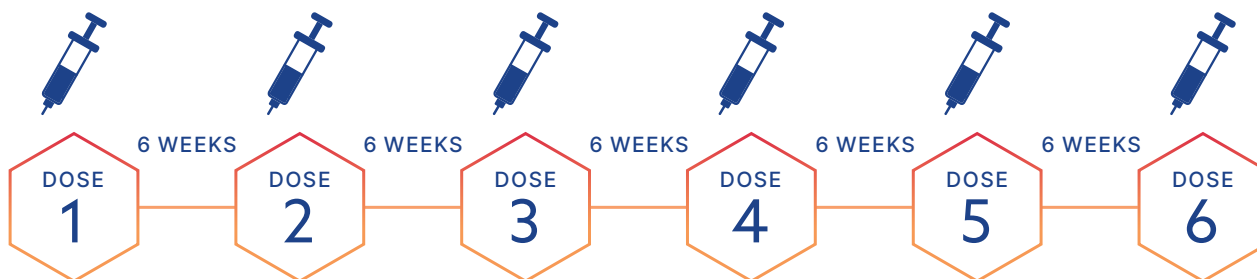


Getting PLUVICTO

PLUVICTO is given every 6 weeks for up to 6 doses*

After that, your PLUVICTO treatment is complete. If PLUVICTO is given together with other treatments, you may continue taking them. Talk to your doctor about your treatment plan.

PLUVICTO
(intravenous injection or infusion)



You will receive PLUVICTO at an approved treatment center

~90% of PLUVICTO-eligible patients are within 30 miles of a treatment site[†]

The number of treatment centers is expanding, and PLUVICTO can now be administered in all 50 states and Puerto Rico.

*Dosing may change or stop based on disease progression or unmanageable side effects.

[†]Based on claims data and latest health care provider location of patients.

IMPORTANT SAFETY INFORMATION (continued)

PLUVICTO may cause serious side effects, including (continued):

Kidney problems, which can be severe. You should stay well hydrated before and after treatment. Tell your doctor right away if you develop any new or worsening urinary symptoms.

Please see additional Important Safety Information throughout.





What targeted radiation with PLUVICTO means for you

Radiation from PLUVICTO does not stay in your body for long



Within 2 days, over half of the radiation will leave your body.

Within about 14 days, most of the radiation (>99%) will be gone.

Radiation exposure to others is limited and can be compared to taking 3 flights across the United States



After you receive 1 dose of PLUVICTO, care partners who follow the radiation safety requirements may be exposed to the same amount of radiation as 3 flights from the East Coast to the West Coast.

IMPORTANT SAFETY INFORMATION (continued)

PLUVICTO may cause serious side effects, including (continued):

All radiopharmaceuticals, including PLUVICTO, have the potential to **cause harm to an unborn baby**.

- You should use effective contraception during treatment with PLUVICTO and for 14 weeks after your last dose

PLUVICTO may cause temporary or permanent **infertility**.

Please see additional Important Safety Information throughout.

 **PLUVICTO**[®]
lutetium Lu 177 vipivotide tetraxetan
INJECTION FOR INTRAVENOUS USE

What to expect with PLUVICTO

Your medical oncologist or urologist will refer you to your treating team who will deliver and oversee PLUVICTO at a treatment center.

While you are on PLUVICTO, these doctors work as a team to guide your care. You'll also receive support from nurses and other health care professionals along the way.

How to be prepared

Before you begin any treatment, it's important to get a sense of what day-to-day life may look like. Your sweat, blood, and urine give off radiation after each dose of PLUVICTO. Therefore, follow these instructions.

Before treatment



- Select a treatment center with your doctor and schedule a consult and pretreatment bloodwork there
- Before you go, ask your treatment center about what to expect on the day of treatment and how long treatment will take. It may take less than 1 hour

After treatment



- You can help eliminate this radiation through frequent urination. Your doctor may recommend drinking about 8 ounces of fluid every hour on the day of your dose to help you urinate frequently
- Your health care team will inform you about radiation safety requirements, including social distancing and hygiene considerations

[Click here for more guidance and tips for the PLUVICTO treatment experience.](#)

IMPORTANT SAFETY INFORMATION (continued)

The most common side effects of PLUVICTO include:

- | | | |
|-------------------------------|-------------|-------------------|
| • Decreased blood cell counts | • Tiredness | • Nausea |
| • Laboratory abnormalities | • Dry mouth | • Kidney problems |

Please see additional Important Safety Information throughout.





Patient portrayal.

Coverage

When you and your health care provider have decided it's time for you to start treatment with PLUVICTO, here's what you'll need to know about insurance coverage for PLUVICTO.

PLUVICTO may be accessible to most insured men*

More than **80%** of insured men were covered for PLUVICTO

The other 20% of men do not have available policies and/or situations may be decided on an individual basis. Follow up with your plan to determine your coverage.

More than **8 out of 10** men covered paid \$0 out of pocket per infusion

This is based on a study from 2023 to 2024. Approximately 85% of patients in the study paid \$0 for PLUVICTO. Out-of-pocket costs for PLUVICTO for remaining patients vary. It may be as high as the full price of the product. There may also be added costs related to treatment, including but not limited to administration fees.

This coverage data comes from patients who had taken hormone therapy and chemotherapy.

*This is not a guarantee of coverage. Patient out-of-pocket costs may vary. Coverage and reimbursement decisions vary.

IMPORTANT SAFETY INFORMATION (continued)

The most common side effects of PLUVICTO include (continued):

These are not all of the possible side effects of PLUVICTO. Call your doctor for 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-FDA-1088.

Please see additional Important Safety Information throughout.

 **PLUVICTO[®]**
lutetium Lu 177 vipivotide tetraxetan
INJECTION FOR INTRAVENOUS USE

Novartis Patient Support™

A comprehensive program designed to assist you every step of the way

We can help you:



1:1 patient navigation support

A dedicated team is here to support and guide you through the referral process, financial assistance, and what to anticipate with treatment, and provide answers to common questions.



Navigate the insurance process

The Novartis Patient Support team can work with your provider to help navigate insurance coverage for your medication.



Get financial support*

We offer savings options and resources to help you access treatment. If you have private insurance, you could be eligible for co-pay support and may pay as little as \$0 for your PLUVICTO treatment.



If you have already been prescribed PLUVICTO, call Novartis Patient Support for assistance from the Patient Support Team at **1-844-638-7222**, Monday-Friday, 8:00 AM-8:00 PM ET, excluding holidays.

*Limitations apply. Valid only for those with private insurance. The Program provides that an eligible patient will be responsible for the first \$0 and then may receive assistance for up to a maximum of \$15,000 over the course of the treatment to cover eligible out-of-pocket costs for the product. The patient is responsible for any costs once the limit is reached. Program not valid (i) under Medicare, Medicaid, TRICARE, VA, DoD, or any other federal or state healthcare program, (ii) where patient is not using insurance coverage at all, (iii) where the patient's insurance plan reimburses for the entire cost of the drug, or (iv) where product is not covered by patient's insurance. The value of this program is exclusively for the benefit of patients and is intended to be credited toward patient out-of-pocket obligations and maximums, including applicable co-payments, coinsurance, and deductibles. Program is not valid where prohibited by law. Patient may not seek reimbursement for the value received from this program from other parties, including any health insurance program or plan, flexible spending account, or health care savings account. Patient is responsible for complying with any applicable limitations and requirements of their health plan related to the use of the Program. Valid only in the United States and Puerto Rico. This Program is not health insurance. Program may not be combined with any third-party rebate, coupon, or offer. Proof of purchase may be required. Novartis reserves the right to rescind, revoke, or amend the Program and discontinue support at any time without notice.

IMPORTANT SAFETY INFORMATION

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

Use of PLUVICTO involves exposure to radioactivity. Long-term, accruing radiation exposure is associated with an increased risk for cancer. Drink plenty of water and urinate as often as possible during the first hours after administration.

Please see additional Important Safety Information throughout.



Taking an active role

in your care can help you feel empowered

Over 30,000 men
with metastatic prostate cancer have already been treated with PLUVICTO.

Patient portrayal.

At your next doctor's visit, remember to:

1

Bring your questions

Prepare them in advance by jotting them down.

2

Ask about your PSMA status

This is a key step to determine if PLUVICTO could be right for you.

3

Discuss PLUVICTO

You and your doctor can decide if PLUVICTO may be your next step.



PLUVICTO®

lutetium Lu 177 vipivotide tetraxetan
INJECTION FOR INTRAVENOUS USE

IMPORTANT SAFETY INFORMATION (continued)

What is the most important information I should know about PLUVICTO? (continued)

To minimize radiation exposure to others following administration of PLUVICTO, limit close contact (less than 3 feet) with household contacts for 2 days or with children and pregnant women for 7 days. Refrain from sexual activity for 7 days, and sleep in a separate bedroom from household contacts for 3 days, from children for 7 days, or from pregnant women for 15 days.

Please see additional Important Safety Information throughout.

Please see full [Prescribing Information](#).

Care partners—there are resources available to help you support your loved one and play an active role in their care.

[Click here to learn more.](#)

 **NOVARTIS**

Novartis Pharmaceuticals Corporation
East Hanover, New Jersey 07936-1080

© 2026 Novartis

7/26

FA-11646263