

YOUR GUIDE TO CLL and treatment with VENCLEXTA + obinutuzumab

INFORMATION AND TIPS TO HELP YOU MANAGE YOUR TREATMENT

This guide is intended only for patients prescribed VENCLEXTA + obinutuzumab by a healthcare professional to treat CLL

CLL: chronic lymphocytic leukaemia.

The images in this guide do not feature
real patients.



ABOUT THIS GUIDE

Your doctor has prescribed VENCLEXTA + obinutuzumab as part of your treatment plan for CLL.

In this guide you'll learn about how this combination of treatments works, and how and when it is given. You'll also find out how to help minimise the risk of experiencing certain side effects, as well as how to manage them if they do occur.

This guide will also come with some treatment cards for you to fill in during the first few weeks of treatment. These are intended to be an easy way to remember what dose of VENCLEXTA you need to take each week and any other special instructions that your healthcare team has for you.

REMEMBER

Your healthcare team is your primary support every step of the way. They are the experts and can help you with any questions or concerns about your treatment. Always consult your doctor if you have any questions.

Your healthcare team contact details

Specialist: _____

Specialist nurse: _____

Hospital phone: _____

Out of hours phone: _____



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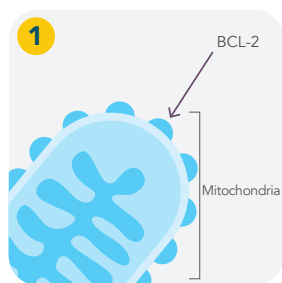
BEFORE STARTING TREATMENT

About CLL

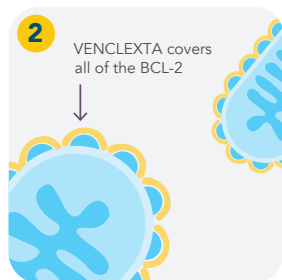
CLL is a type of cancer where the blood and bone marrow contain too many of a type of white blood cells (lymphocytes).

How VENCLEXTA works

VENCLEXTA works by blocking a protein in the body called “BCL-2” that helps cancer cells survive. It is therefore known as a “BCL-2 inhibitor”.



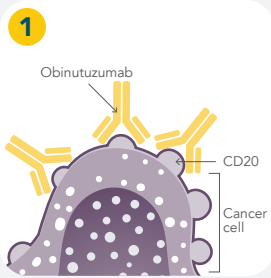
Inside the cancer cells, there are structures called “mitochondria” which help make energy. BCL-2 is found on the surface of these mitochondria.



VENCLEXTA sticks to the BCL-2 and blocks it. Without the help of the BCL-2, the cancer cells die.

How obinutuzumab works

Obinutuzumab works in a different way to VENCLEXTA. It is known as a “CD20 antibody”.



CD20 is a different type of protein (an “antigen”) found on the surface of some cells in the body, including CLL cancer cells.

Obinutuzumab attaches to the CD20.



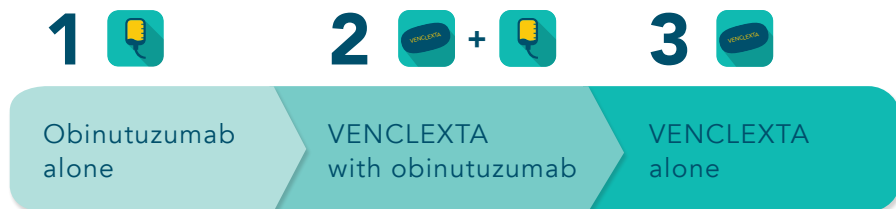
Once it attaches, it stops the abnormal growth of the cancer cells.



YOUR TREATMENT PLAN

Getting off to a good start on your VENCLEXTA + obinutuzumab combination is important, but there's a lot to remember.

Firstly, there are 3 main phases of treatment that last about 1 year in total:



Phase 1: Obinutuzumab alone

Your doctor will start you on obinutuzumab, which will be given to you each time by a healthcare professional via an "infusion". An infusion is where a medicine is fed gradually into your veins via an intravenous (IV) bag (similar to a "drip").

You will receive multiple infusions in the first month. Your healthcare team will discuss with you about scheduling these infusion appointments and how long they will take.

Phase 2: VENCLEXTA with obinutuzumab

After the first 3 weeks of obinutuzumab treatment, your doctor will start you on a low dose of VENCLEXTA, which comes as an oral tablet, and gradually increase the dose you take until you are at the full dose. This "ramp up" usually lasts about 5 weeks, but your doctor may extend this ramp up period based on your response to the therapy.

DO NOT STOP USING THIS MEDICINE OR CHANGE YOUR DOSE unless your doctor tells you to.

This "ramp up" is important because certain side effects are more likely to occur when first starting treatment (see pages 14–18 for more information).

VENCLEXTA RAMP UP PERIOD



Tablets not actual size

By starting on a low dose and closely monitoring your response as the dose is increased, the risk of these side effects can be reduced. This monitoring includes blood tests before treatment starts and at each weekly dose increase.

While you take your VENCLEXTA tablets daily, you will continue to receive obinutuzumab infusions, usually once every 28 days (4 weeks), until you have finished “6 cycles” in total (including the first month discussed in Phase 1).

Phase 3: VENCLEXTA alone

After your last obinutuzumab infusion, you will continue taking the full dose of your VENCLEXTA treatment (400 mg tablets per day), unless your doctor tells you to stop or reduces the dose temporarily.

You do not need to keep taking VENCLEXTA forever. Once you reach the end of the 12 “cycles” since treatment began (about a year in total), you have finished treatment and your doctor will tell you to stop taking your VENCLEXTA tablets.

DURING TREATMENT

WHEN AND HOW TO TAKE VENCLEXTA

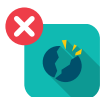
Take VENCLEXTA exactly as your doctor has prescribed. If you have questions about how to take VENCLEXTA, ask your doctor or pharmacist.



Take the tablets during or immediately after a meal, at about the same time every day.



Swallow the tablets whole with a glass of water.



DO NOT chew, crush or break the tablets.

STAYING HYDRATED

It is important to stay hydrated and **drink plenty of water every day** when taking VENCLEXTA, but **especially** during particular days in the VENCLEXTA ramp up phase. This is because drinking plenty of water will reduce the risk of getting a particular side effect called tumour lysis syndrome (TLS), as the water will help remove cancer cell breakdown products from your blood through your urine (see pages 16–18 for more information).

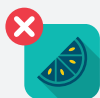


6–8
glasses of water
(1.5–2.0 L)

Make sure you drink **6–8 glasses of water** (1.5–2.0 L) as instructed by your doctor throughout your treatment with VENCLEXTA, but especially:

- The two days before, and the day that you take your **first** VENCLEXTA dose
- The two days before, and the day you **increase** your VENCLEXTA dose

OTHER IMPORTANT THINGS TO REMEMBER



DO NOT eat grapefruit (or drink its juice), Seville oranges (or marmalades) or starfruit while you are taking VENCLEXTA as these products may increase the amount of VENCLEXTA in your blood.



DO NOT change your dose unless your doctor tells you to.



Some medicines may interfere with VENCLEXTA and affect how it works. For patients with CLL or SLL, when you start treatment and during the time when the dose is gradually increased, **DO NOT** take VENCLEXTA and talk to your doctor if you are taking any of the following medicines:

- Ketoconazole, voriconazole, itraconazole or posaconazole, which are used to treat fungal infections
- Clarithromycin, which is used to treat bacterial infections
- Indinavir, lopinavir, telaprevir, or ritonavir, which are used to treat HIV or Hepatitis C virus infections
- For full list of medicines, please refer to the full CMI at abbv.ie/nz-ven-cmi

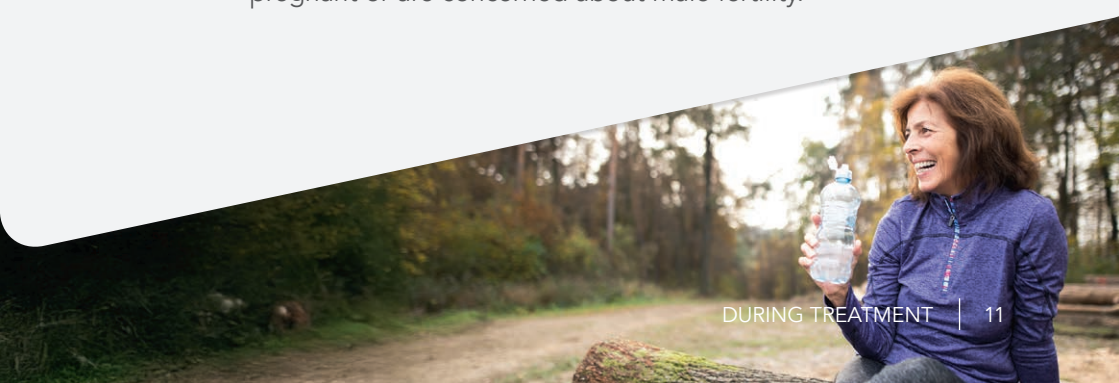
It is important to tell your doctor if you are taking these or any other medications, including prescription and over-the-counter medicines, vitamins and herbal supplements.



Your doctor will schedule blood tests during the first 5 weeks of VENCLEXTA treatment to check for side effects (see pages 14–18 for more information).



Remind any doctor or dentist you visit that you are using VENCLEXTA. Tell your doctor immediately if you become pregnant or are concerned about male fertility.



WHAT HAPPENS IF I DON'T TAKE THE CORRECT DOSE OF VENCLEXTA?



If you miss your dose at
your scheduled dose time

If it has been
LESS THAN 8 HOURS

Take your dose as soon
as possible, and take the
next dose at the usual
time the next day.

If it has been
MORE THAN 8 HOURS

Do not take the dose
that day. Take your next
dose at your usual time
the next day.

If you vomit after taking VENCLEXTA, do not take an extra dose. Take the next dose at your usual time the next day. If you are unsure, talk to your doctor or pharmacist.



If you think you may have taken too much VENCLEXTA, immediately telephone your doctor, or the National Poisons Centre (telephone 0800 764 766) or go to the Accident and Emergency at your nearest hospital.

Do this even if there are no signs of discomfort or poisoning.

REMEMBERING TO TAKE YOUR MEDICATION

Forgetting to take a dose can happen to anyone. Something unexpected can happen, leading to a change in your routine, or you may run out of your medication, or it can simply slip your mind. Whatever the reason, it is important to stick to your treatment exactly as prescribed by your doctor.

You should always talk to your healthcare team if you are unsure about anything.

Forming good habits early is a helpful way to stick to your treatment plan. Here are some other tips that may help you remember to take VENCLEXTA at the same time each day:

- Set a daily routine, or combine it with a daily task
- Set up electronic reminders (e.g. via email or text)
- Set an alarm on your mobile phone, alarm clock or smart speaker
- Ask someone to remind you



POSSIBLE SIDE EFFECTS

Like all medicines, VENCLEXTA + obinutuzumab can cause side effects.

Not everyone will get them, but it's important to be aware of what they are so you can get help from your healthcare team right away if necessary.

Tell your doctor or pharmacist if you notice any of the following and they worry you:

- diarrhoea
- tummy pain
- constipation
- nausea (feeling sick)
- vomiting
- reduced appetite
- weight loss
- a sore inside the mouth
- looking pale
- feeling tired or weak
- having little or no energy
- shortness of breath when exercising
- feeling dizzy or fainting
- headache
- trouble sleeping
- low blood pressure
- bleeding



The list on the left includes some of the less serious side effects of your medicine. They are usually mild and short-lived.



To help avoid side effects and ensure proper use, talk to your healthcare team before you take VENCLEXTA. Talk about any health conditions or problems you may have.

This includes if you:

- have or have had any problems with your liver or kidneys
- think you may have an infection
- have had any recent immunisations
- take any medicines for any other condition



SERIOUS SIDE EFFECTS & WHAT TO DO ABOUT THEM

Low white blood cell count (neutropenia) and infections

Your doctor will check your blood count during treatment with VENCLEXTA. Low white blood cell count can increase your risk for infection. Some infections can be very serious. Symptoms of infection may include:

- fever or chills
- feeling weak
- feeling confused
- cough, runny nose, sore throat
- congestion on the chest
- pain or burning when passing urine

Tumour Lysis Syndrome (TLS)

Some people having treatment for cancer can develop TLS, which is caused by cancer cells being broken down too quickly. When cancer cells are destroyed, they release their contents into the bloodstream, which causes an imbalance of chemicals (such as potassium, uric acid and phosphorus).

TLS can cause serious damage to your kidneys, can affect your heart and muscles, and can even lead to death. TLS is most likely to occur in the first 5 weeks of your VENCLEXTA treatment, which is why you follow the 5-week dose 'ramp up' when you start taking VENCLEXTA, to help prevent this from happening.

TLS can occur within 6–8 hours after the first dose and at each dose increase during the 'ramp up'.

Having your blood tested is important in order to treat and prevent TLS. Before you start your treatment, your doctor will do blood tests and a scan (for example, a CT scan) to see if you are at risk of developing TLS.

It is important for you to keep your scheduled appointments for blood tests and to take any additional medicines your doctor may prescribe for you to help prevent TLS (if you are at higher risk). The changes in your blood that could lead to TLS may have no symptoms until the situation becomes very serious.



If you have any questions or concerns about side effects, speak to your healthcare team

SYMPTOMS OF TLS

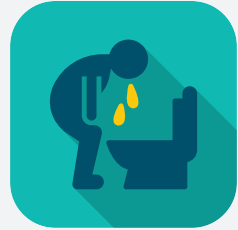
The following symptoms are associated with TLS.



Fever or chills



Dark or cloudy urine



Feeling sick
or vomiting



Pain in the muscles
or joints



Feeling confused



Feeling
unusually tired



Being short
of breath



Convulsions or fits



Changes in your
heart rate – slow,
fast or irregular

If you notice any of these, contact your doctor immediately, or go straight to the Accident and Emergency Department at your nearest hospital.

MEASURES TO HELP REDUCE YOUR RISK OF TLS

Both you and your healthcare team need to work together to minimise the risk of TLS occurring.

What your healthcare team will do:



Before you start VENCLEXTA, your healthcare team will have assessed your risk of developing TLS and produced a plan to monitor you accordingly.



If they determine you are at risk of TLS, they may give you medicines to help prevent the build-up of uric acid in your body, a potential consequence of TLS.



As a precaution, your first dose may be given in hospital, so that, if required, you can be given fluids, have blood tests, and be monitored. For some people at risk of TLS, your healthcare team may continue to give you some of your treatments in hospital.



Your healthcare team will tell you when you need to have your blood tested to check for initial signs of TLS.

What you need to do:



Make sure you keep your scheduled appointments for blood tests to check for signs of TLS, because the changes in your blood that could lead to TLS may have no noticeable symptoms.



Drink plenty of water.
See page 10 for more details.



AFTER TREATMENT

STOPPING VENCLEXTA TREATMENT

Unlike some other treatments for CLL VENCLEXTA is only given for a fixed duration of time. It can be taken for up to 12 “cycles” (about a year) however your doctor will tell you if you need to finish treatment any earlier.

Being off VENCLEXTA treatment after taking it daily for about a year may be a little scary, but could also seem freeing.

These mixed feelings may mean that you worry if every problem with your body means that the cancer is coming back. You may also feel pressure to return to your “previous life”, but also feel that you cannot because the cancer experience has changed the way you approach life. Make sure that you take the time to adjust to your new physical and emotional state, at your own pace.

If your cancer gets worse, either while taking VENCLEXTA or at some timepoint after you have stopped taking it, your doctor will also discuss your other treatment options with you.

LIVING WELL WITH CLL

Looking after yourself

Cancer can be very strenuous, both physically and emotionally. Therefore, it's important to try to look after your yourself and your wellbeing as much as possible.



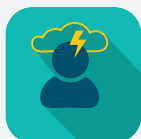
Nutrition – Good nutrition can help your body cope with your treatment and any side effects that occur. If you need some help in determining your dietary needs, your healthcare team may be able to help, or may refer you to a dietitian.



Stay hydrated – As mentioned earlier, staying hydrated is very important while taking VENCLEXTA, as this can help flush any cancer cell breakdown products from your blood through your urine and reduce the risk of side effects. See page 10 for details.



Staying active – Physical activity may help you feel better, less tired and has many other health benefits. However, everyone has different capabilities when it comes to exercising. Your doctor will be able to advise you on the amount and type of exercises that might suit you.



Dealing with stress and anxiety – Being diagnosed with cancer and the subsequent treatment of it can be a very stressful and overwhelming time in your life. If you are feeling depressed or anxious, it's important that you discuss this with your doctor in order to receive professional help.



However, there are many things you can also do yourself to try to minimise the stress in your life. These include:

- Looking beyond your cancer and making sure you connect with people and activities that are separate from it
- Set yourself small, simple, manageable goals
- Not isolating yourself: try to maintain your regular social interactions as much as possible



Find support – Talking about your feelings can sometimes be difficult, but people often cope better with cancer when they're open with their partners, family members and friends about their condition and their fears and concerns. You may also find it easier to talk to people going through a similar experience via a dedicated support group. To find and join such a group, ask your doctor or try contact one the services below.

More information and support



Go to the VENCLEXTA website www.venclexta.co.nz for these helpful resources and more:

- Short videos on the following:
 - WHAT IS CLL?
 - LIVING WITH CLL? AN OVERVIEW FROM A NZ HAEMATOLOGIST
 - SIDE EFFECTS WITH VENCLEXTA
- An online version of this booklet

LEUKAEMIA & BLOOD CANCER NEW ZEALAND

Phone: 0800 15 10 15
info@leukaemia.org.nz
www.leukaemia.org.nz

CLL ADVOCATES NZ

info@clladvocates.nz
www.clladvocates.nz

VENCLEXTA MONITORING CARD

WEEK 1 OF RAMP UP



Remember to drink
**6-8 GLASSES OF
WATER** each day

Day 1

When and where should I do my pre-dose laboratory tests?

☐ Clinic ☐ Other location/address: _____

Date/time: _____ Phone: _____

When should I take my dose?

☐ Clinic ☐ Other location/address: _____

Date/time: _____ Phone: _____

When and where should I do my post-dose laboratory tests?

☐ Clinic ☐ Other location/address: _____

Date/time: _____ Phone: _____

Additional instructions (if any): _____

Day 2

When and where should I do my pre-dose laboratory tests?

☐ Clinic ☐ Other location/address: _____

Date/time: _____ Phone: _____

When should I take my dose?

☐ Clinic ☐ Other location/address: _____

Date/time: _____ Phone: _____

Additional instructions (if any): _____

Rest of the week

Additional instructions (if any): _____

This monitoring card is intended only for patients prescribed
VENCLEXTA + obinutuzumab by a healthcare professional to treat CLL.

AbbVie Limited, Wellington 6011, New Zealand.
NZ-VENC-260016. August 2026.

 **VENCLEXTA®**
venetoclax tablets

VENCLEXTA MONITORING CARD

WEEK 2 OF RAMP UP



Remember to drink
**6–8 GLASSES OF
WATER** each day

Day 1

When and where should I do my pre-dose laboratory tests?

☐ Clinic ☐ Other location/address: _____

Date/time: _____ Phone: _____

When should I take my dose?

☐ Clinic ☐ Other location/address: _____

Date/time: _____ Phone: _____

When and where should I do my post-dose laboratory tests?

☐ Clinic ☐ Other location/address: _____

Date/time: _____ Phone: _____

Additional instructions (if any): _____

Day 2

When and where should I do my pre-dose laboratory tests?

☐ Clinic ☐ Other location/address: _____

Date/time: _____ Phone: _____

When should I take my dose?

☐ Clinic ☐ Other location/address: _____

Date/time: _____ Phone: _____

Additional instructions (if any): _____

Rest of the week

Additional instructions (if any): _____

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VENCLEXTA MONITORING CARD

WEEK 3 OF RAMP UP



Remember to drink
**6–8 GLASSES OF
WATER** each day

Day 1

When and where should I do my pre-dose laboratory tests?

☐ Clinic ☐ Other location/address: _____

Date/time: _____ Phone: _____

When should I take my dose?

☐ Clinic ☐ Other location/address: _____

Date/time: _____ Phone: _____

When and where should I do my post-dose laboratory tests? ☐ Not required

☐ Clinic ☐ Other location/address: _____

Date/time: _____ Phone: _____

Additional instructions (if any): _____

Day 2

When and where should I do my pre-dose laboratory tests? ☐ Not required

☐ Clinic ☐ Other location/address: _____

Date/time: _____ Phone: _____

When should I take my dose?

☐ Clinic ☐ Other location/address: _____

Date/time: _____ Phone: _____

Additional instructions (if any): _____

Rest of the week

Additional instructions (if any): _____

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VENCLEXTA MONITORING CARD

WEEK 4 OF RAMP UP



Remember to drink
**6–8 GLASSES OF
WATER** each day

Day 1

When and where should I do my pre-dose laboratory tests?

☐ Clinic ☐ Other location/address: _____

Date/time: _____ Phone: _____

When should I take my dose?

☐ Clinic ☐ Other location/address: _____

Date/time: _____ Phone: _____

When and where should I do my post-dose laboratory tests? ☐ Not required

☐ Clinic ☐ Other location/address: _____

Date/time: _____ Phone: _____

Additional instructions (if any): _____

Day 2

When and where should I do my pre-dose laboratory tests? ☐ Not required

☐ Clinic ☐ Other location/address: _____

Date/time: _____ Phone: _____

When should I take my dose?

☐ Clinic ☐ Other location/address: _____

Date/time: _____ Phone: _____

Additional instructions (if any): _____

Rest of the week

Additional instructions (if any): _____

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VENCLEXTA MONITORING CARD

WEEK 5 OF RAMP UP



Remember to drink
**6–8 GLASSES OF
WATER** each day

Day 1

When and where should I do my pre-dose laboratory tests?

☐ Clinic ☐ Other location/address: _____

Date/time: _____ Phone: _____

When should I take my dose?

☐ Clinic ☐ Other location/address: _____

Date/time: _____ Phone: _____

When and where should I do my post-dose laboratory tests? ☐ Not required

☐ Clinic ☐ Other location/address: _____

Date/time: _____ Phone: _____

Additional instructions (if any): _____

Day 2

When and where should I do my pre-dose laboratory tests? ☐ Not required

☐ Clinic ☐ Other location/address: _____

Date/time: _____ Phone: _____

When should I take my dose?

☐ Clinic ☐ Other location/address: _____

Date/time: _____ Phone: _____

Additional instructions (if any): _____

Rest of the week

Additional instructions (if any): _____

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NOTES

YOUR FIRST 5 WEEKS OF VENCLEXTA – AT A GLANCE

This is only a guide. Your doctor will determine your dose, the amount of water you should drink and when you should have blood tests, the frequency of which may change to help prevent tumour lysis syndrome (TLS). You should always follow the advice of your healthcare team.

2 DAYS BEFORE  **DRINK AT LEAST 6–8 GLASSES OF WATER (ABOUT 2 LITRES) EVERY DAY**

			DAY 1	DAY 2	DAY 3–6	DAY 7
WEEK 1	20 mg once a day 2 x 	 Blood test before taking your first VENCLEXTA tablet. Doctor OK to proceed?	Doctor tells you to take your first dose.  Blood test 6–8 hours later. Doctor OK to proceed? Continue as advised.	 Blood test 24 hours later. Doctor OK to proceed? Continue as advised.		 Blood test before your next dose of VENCLEXTA.
 DRINK AT LEAST 6–8 GLASSES OF WATER EVERY DAY						
WEEK 2	50 mg once a day 1 x 	Doctor OK to proceed?	Take your next dose.  Blood test 6–8 hours later. Doctor OK to proceed? Continue as advised.	 Blood test 24 hours later. Doctor OK to proceed? Continue as advised.		 Blood test before your next dose of VENCLEXTA.
 DRINK AT LEAST 6–8 GLASSES OF WATER EVERY DAY						
WEEK 3	100 mg once a day 1 x 	Doctor OK to proceed?	Take your next dose.  Blood test 6–8 hours later if scheduled by doctor. Doctor OK to proceed? Continue as advised.	 Blood test 24 hours later if scheduled by doctor. Doctor OK to proceed? Continue as advised.		 Blood test before your next dose of VENCLEXTA.
 DRINK AT LEAST 6–8 GLASSES OF WATER EVERY DAY						
WEEK 4	200 mg once a day 2 x 	Doctor OK to proceed?	Take your next dose.  Blood test 6–8 hours later if scheduled by doctor. Doctor OK to proceed? Continue as advised.	 Blood test 24 hours later if scheduled by doctor. Doctor OK to proceed? Continue as advised.		 Blood test before your next dose of VENCLEXTA.
 DRINK AT LEAST 6–8 GLASSES OF WATER EVERY DAY						
WEEK 5	400 mg once a day 4 x 	Doctor OK to proceed?	Take your next dose.  Blood test 6–8 hours later if scheduled by doctor. Doctor OK to proceed? Continue as advised.	 Blood test 24 hours later if scheduled by doctor. Doctor OK to proceed? Continue as advised.		
 DRINK AT LEAST 6–8 GLASSES OF WATER EVERY DAY						

Tablets not actual size

Before you start VENCLEXTA, or a new dose, you will need to:

- Wait for your healthcare team to give you the go-ahead to take it.

You should take your VENCLEXTA tablet(s) at the same time every day with a meal. Your doctor will tell you how many and at what time of day to take it. As follow-up blood tests may be required during the first 5 weeks of treatment, taking it in the morning may be the most suitable time for many people.



Please consult your doctor or healthcare team for further information and refer to the Consumer Medicine Information (CMI) for your medication. CMIs are available from your pharmacist, online at abbv.ie/nz-ven-cmi, or by calling AbbVie on 0800 900 030.

Scan the QR code to access more resources for your VENCLEXTA treatment journey.



Always take your medicine exactly as your doctor, pharmacist or nurse has told you. Check with your doctor, pharmacist or nurse if you have any questions about your disease or treatment.



Remember to stay hydrated while taking VENCLEXTA.

VENCLEXTA in combination with obinutuzumab or ibrutinib is fully funded for untreated chronic lymphocytic leukaemia (CLL). VENCLEXTA in combination with rituximab is fully funded for relapsed/refractory CLL. VENCLEXTA in combination with azacitidine or low dose cytarabine is fully funded for acute myeloid leukaemia (AML). Special Authority criteria apply. Refer to the VENCLEXTA Pharmac Special Authority criteria <https://abbv.ie/NZ-Venetoclax-OnlineSchedule>

VENCLEXTA[®] is supplied in New Zealand by: AbbVie Limited, Wellington 6011, New Zealand Tel: 0800 900 030. **IMPORTANT INFORMATION ABOUT VENCLEXTA[®]** Venclexta is a prescription medicine containing venetoclax. Venclexta is available as film-coated tablets of various strength (10 mg, 50 mg, 100 mg venetoclax). It is used to treat adults with chronic lymphocytic leukaemia (CLL) or small lymphocytic lymphoma (SLL). Venclexta is taken alone or in combination with other medicines. Your doctor will let you know which combination medicines, how to take them, and how long to take them. Typically, you will start treatment with Venclexta at a low dose. If you are taking Venclexta for CLL or SLL, your doctor will gradually increase your dose over 5 weeks up to the full dose. **Use strictly as directed by your doctor. VENCLEXTA has risks and benefits.** You must not take it if you are allergic to venetoclax or to any of the inactive ingredients. For CLL or SLL, do not take Venclexta if you are taking any of the following medicines: medicines used to treat or prevent fungal infections, including ketoconazole, posaconazole, voriconazole, itraconazole; clarithromycin (an antibiotic); or ritonavir (a medicine used to treat HIV and hepatitis C). Do not drink grapefruit juice, or eat grapefruit, starfruit or Seville oranges or marmalades. Do not give Venclexta to children and adolescents under 18 years of age. Do not take Venclexta if you are pregnant or plan to become pregnant, or if you are breastfeeding or plan to breastfeed. If you are a woman of child-bearing age, you must use a highly effective form of contraception during treatment with Venclexta and for at least 30 days after your last dose. Tell your doctor, nurse, or pharmacist if you have any kidney or liver problems; if you think you may have an infection; or if you recently received or are scheduled for any vaccinations. Do not stop using Venclexta or change the dose without checking with your doctor. **VENCLEXTA can cause tumour lysis syndrome (TLS)**, which is caused by the fast breakdown of cancer cells. TLS is a very serious side effect that can be fatal. TLS is most likely to occur when you are first starting treatment. To help prevent TLS, it is important to stay hydrated and drink water every day when taking Venclexta. Particularly, starting two days before and on the day of your first dose of Venclexta and every time the dose is increased, drink 6 to 8 glasses (approximately 1.5–2 L total) of water each day. Let your healthcare provider know immediately if you experience: fever or chills; feeling sick or vomiting; being short of breath; feeling unusually tired; changes in your heart rate (slow, fast or irregular); your urine looks dark or cloudy; feeling confused; convulsions or fits; or pain in the muscles or joints while on treatment with Venclexta. Ensure you follow all your doctor's instructions carefully and keep all your appointments, including those for blood tests. You may experience a low number of neutrophils, a type of white blood cells – this can be severe and need treatment. Your doctor will check your blood counts during treatment with Venclexta. You may experience infections during treatment with Venclexta. Some infections can be very serious or even fatal. Your doctor will closely monitor and treat you right away if you have fever or any signs of infection during treatment with Venclexta. Tell your doctor immediately if you have signs of an infection before, or while taking Venclexta, including: fever or chills, feeling weak or confused, cough, runny nose, sore throat; congestion on the chest; or pain or burning when passing urine. Some of the less serious side effects of Venclexta include diarrhoea; tummy pain; constipation, nausea (feeling sick); vomiting; reduced appetite; weight loss; mouth sores; looking pale; feeling tired; having little or no energy; shortness of breath when exercising; feeling dizzy; headache; low blood pressure; bleeding. Tell your doctor or pharmacist if you notice anything else that is making you feel unwell. Some medicines and Venclexta may interfere with each other, so tell your doctor if you are taking medicines containing any of the following: fluconazole, ciprofloxacin, erythromycin, diltiazem, verapamil, captopril, felodipine, dronedarone, amiodarone, quinidine, rifampicin, carvedilol, ciclosporin, quercetin, ranolazine, ticagrelor, azithromycin, nafcillin, carbamazepine, phenytoin, St John's wort (Hypericum perforatum), bosentan, efavirenz, etravirine, modafinil, warfarin, digoxin, everolimus, or sirolimus. Tell your doctor or pharmacist if you are taking any other medicines, including any medicines, vitamins or supplements that you buy without prescription. Tell any other doctors, pharmacists, dentists, or surgeons treating you that you are taking Venclexta and remind them before you start any new medicines. **If you have any questions about using VENCLEXTA, including its risks and benefits, how much to use, how and when to use it, or storage conditions, ask your healthcare professional and refer to the Consumer Medicine Information (CMI) available from www.medsafe.govt.nz or free phone 0800 900 030. Ask your doctor if VENCLEXTA is right for you. Use strictly as directed. If symptoms continue, or you have side effects, see your doctor, pharmacist, or healthcare professional.** V7a. ©2026 AbbVie. All rights reserved. AbbVie[®] is a registered trademark of AbbVie Inc. VENCLEXTA[®] and its designs are registered trademarks of AbbVie Manufacturing Management Unlimited Company. 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