# Instruction Leaflet for Parents

## Zolgensma
## Intravenous Infusion

**Composition:**
Onasemnogene abeparvovec
Each vial contains: $2.0 \times 10^{13}$ vg/mL

This leaflet contains concise information about the drug. If you have any further questions, refer to your doctor or pharmacist.

**Who is this drug intended for?**
**Zolgensma is intended for the treatment of children up to two years of age who have been diagnosed with SMA, with or without symptoms of the disease.**
**The drug is administered as a single dose, by intravenous infusion.**

SMA is caused by a defect in a gene called SMN1. The defect in this gene leads to insufficient production of a protein called SMN. Zolgensma is a genetic treatment: it contains the gene that encodes the missing protein. After the administration of Zolgensma, the body will be able to produce a sufficient amount of the missing protein properly.

## Special warnings and side effects related to the use of the drug

### 1. Acute liver injury, acute liver failure, or an increase in liver enzyme levels

This drug may cause an increase in the levels of liver enzymes, severe damage to the liver or acute liver failure. Acute liver failure might lead to life threatening situations and even fatal outcome. For this reason, a corticosteroid drug will be administered starting on the day before the treatment with Zolgensma and for at least an additional 30 days after the administration of the single dose treatment. The corticosteroid treatment will be discontinued gradually.
After receiving the Zolgensma treatment, the patient will undergo a series of routine blood tests to monitor liver function for at least three months. Monitoring might be longer, depending on clinical judgment:

- Once a week during the first month after receiving Zolgensma
- Once a week during the gradual tapering off period of corticosteroids, or more frequently according to clinical judgment
- If the patient is clinically stable with normal test results at the end of the gradual tapering off period of corticosteroids, the liver functions should be monitored once every two weeks for another month

The attending physician must be notified in cases of yellowish skin tone or eyes, if the patient misses a dose of steroids, or if the dose is vomited or if the patient experiences a decrease in alertness.

Depending on the test results, other symptoms or the physician's clinical judgment, further evaluations may be required.

### 2. Vaccinations before and after the administration of the drug

Consult the medical team regarding the dates of the vaccinations scheduled close to the period during which the steroids are administered.

### 3. Infectious diseases

Infectious diseases (such as a cold, the flu, bronchitis – bronchiolitis, otitis media [middle ear infection], gastroenteritis [stomach flu]) before or after the treatment with Zolgensma may lead to severe complications. Close attention must be paid to possible signs of such illnesses, such as cough, wheezing, sneezing, a runny nose, a sore throat or fever. The attending physician must be informed immediately in cases of symptoms indicative of a possible infection.

### 4. Thrombocytopenia - a low level of platelets

Zolgensma may lead to a reduction in blood platelet count and cause an increased risk of the appearance of bruises or bleeding.
The attending physician must be notified if signs of bruising ("blue marks") or bleeding appear.
A platelet count must be performed once a week during the first month after the treatment, and then every two weeks during the second and third months, until the blood platelet level returns to normal.

### 5. Cardiac side effects - a high level of troponin-I

Troponin-I is a protein that may indicate cardiac damage when its level in the blood increases.
There may be an increase in the blood levels of this protein. Therefore, the blood levels of this protein must be monitored for at least three months after the treatment: a test will be performed once a week during the first month after the treatment, and then once a month during the second and third months, until the levels return to normal.

### 6. Treatment of bodily secretions

Zolgensma is cleared from the body primarily via the patient's bodily secretions. Therefore, for about one month after the infusion, diapers with stool should be put into two plastic bags before disposal in the regular trash. Furthermore, make sure to wash your hands after contact with stool, bodily secretions and fluids.

### 7. Thrombotic Microangiopathy (TMA, thrombotic lesions that block small blood vessels)

Zolgensma might cause a decrease in blood platelet and red blood cell counts, acute kidney injury, and increase the risk of the appearance of bruises or bleeding, which might be signs of TMA. Cases of TMA that occurred approximately a week after receiving the Zolgensma infusion have been

reported. Refer for immediate medical treatment if after the treatment with Zolgensma the patient shows signs of bleeding or bruises, seizures, or a decrease in urination.

**How is the drug used?**
Zolgensma is administered as a single dose by intravenous infusion through a catheter inserted into a peripheral vein.
The doctor will perform regular medical follow ups of the treated child.
For complete information about the drug, see the patient leaflet.

**Side effects**
Common side effects:
- an increase in liver enzymes and vomiting

The following side effects were reported after the drug Zolgensma was approved for use. Since these side effects were voluntarily reported, their frequency or a causal connection to exposure to the drug cannot always be well established:
- Blood and lymph system disorders: thrombotic microangiopathy (TMA, thrombotic lesions that block small blood vessels)
- Acute liver failure that might lead to life threatening situations and even fatal outcome, Acute liver injury
- Fever
- Increased troponin protein level
- Thrombocytopenia (low platelet level)

If any side effect appears or worsens, or if the patient develops side effects not mentioned in the leaflet, consult the attending physician.

Side effects can be reported to the Ministry of Health by clicking the link "Report of side effects due to pharmacological treatment" on the homepage of the Ministry of Health (www.health.gov.il), which opens an online form for the report of side effects, or using the following link:
https://sideeffects.health.gov.il

You may also report to the registration holder, Novartis Israel LTD. at:
safetydesk.israel@novartis.com

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