Recommendations for dosing and administration of LUPKYNIS™ (voclosporin)

Dosing and administration instructions

Indication[1]

- Indicated in combination with MMF and steroids for the treatment of adult patients with active lupus nephritis
- Use of LUPKYNIS is not recommended with cyclophosphamide

How to take[1]

- Starting dose of 3 capsules (7.9 mg each) BID
- Take on an empty stomach (1 hour before or 2 hours after a meal)
- Take as close to a 12-hour schedule as possible
- Swallow capsules whole; do not open, crush, or divide capsules

Missed dose[1]

- Take the dose within 4 hours of the missed dose
- Beyond 4 hours, wait until the next scheduled regular dose; do not double the dose

Select safety considerations[1]

- Do not use with strong inhibitors of CYP3A4
- Not recommended if eGFR is ≤45 mL/min/1.73 m^2 unless benefit exceeds risk
- Avoid eating grapefruit or drinking grapefruit juice
- Avoid use during pregnancy and advise not to breastfeed
- For a full list of precautions, please see the Prescribing Information

Continued use[1]

- Efficacy and safety have not been established beyond 1 year
- Consider discontinuation if no therapeutic benefit is seen by 24 weeks

Find more dosing and administration information in the Prescribing Information and at LUPKYNISpro.com

BID=twice daily; eGFR=estimated glomerular filtration rate; MMF=mycophenolate mofetil.

Indications

LUPKYNIS is indicated in combination with a background immunosuppressive therapy regimen for the treatment of adult patients with active lupus nephritis (LN). *Limitations of Use*: Safety and efficacy of LUPKYNIS have not been established in combination with cyclophosphamide. Use of LUPKYNIS is not recommended in this situation.

Important Safety Information

BOXED WARNINGS: MALIGNANCIES AND SERIOUS INFECTIONS
Increased risk for developing malignancies and serious infections with LUPKYNIS or other immunosuppressants that may lead to hospitalization or death.

CONTRAINDICATIONS: LUPKYNIS is contraindicated in patients taking strong CYP3A4 inhibitors because of the increased risk of acute and/or chronic nephrotoxicity, and in patients who have had a serious/severe hypersensitivity reaction to LUPKYNIS or its excipients.

Please see additional Important Safety Information and accompanying Prescribing Information including Boxed Warning and Medication Guide for LUPKYNIS.

Lupkynis™ (voclosporin) capsules 7.9 mg

Dose adjustment recommendations for LUPKYNIS

Straightforward eGFR-based dosing[1]

- ✓ The Phase 3 study was designed to allow for dose modifications due to eGFR reductions
- ✓ Assess eGFR every 2 weeks for the first month, and every 4 weeks thereafter

Is eGFR ≥60 mL/min/1.73 m²?

YES

No dose adjustments necessary

NO

Is eGFR reduced by <20% from baseline?

No dose adjustments necessary

Is eGFR reduced by >20% and <30% from baseline?

Reduce dose to 2 capsules BID. Dose may be reduced again if eGFR remains reduced by >20% at reassessment

Reassess eGFR within 2 weeks

Is eGFR reduced by ≥30% from baseline?

Discontinue LUPKYNIS. Reassess eGFR within 2 weeks and consider reinitiating LUPKYNIS at a lower dose

Summary of eGFR dosing recommendations. Please see Prescribing Information for more details.

Important Safety Information (cont.)

WARNINGS AND PRECAUTIONS. Lymphoma and Other Malignancies: Immunosuppressants, including LUPKYNIS, increase the risk of developing lymphomas and other malignancies, particularly of the skin. The risk appears to be related to increasing doses and duration of immunosuppression rather than to the use of any specific agent.

Please see additional Important Safety Information and accompanying Prescribing Information including Boxed Warning and Medication Guide for LUPKYNIS.

Lupkynis™ (voclosporin) capsules 7.9 mg

Other dosing recommendations for specific patients

Severe renal impairment[1]

- Not recommended unless benefit outweighs risk
- Start at 15.8 mg (2 capsules) BID

Mild or moderate hepatic impairment[1]

- Start at 15.8 mg (2 capsules) BID
- Avoid use in patients with severe hepatic impairment

Hypertension >165/105 mmHg or with hypertensive emergency[1]

- Discontinue LUPKYNIS and initiate antihypertensive therapy

Drug interactions with moderate CYP3A4 inhibitors[1,a]

- Reduce dose to 15.8 mg (2 capsules) in the morning and 7.9 mg (1 capsule) in the evening
- Do not use with strong inhibitors of CYP3A4

This is a partial list. For a full description of dosing recommendations, please see the Prescribing Information for LUPKYNIS.

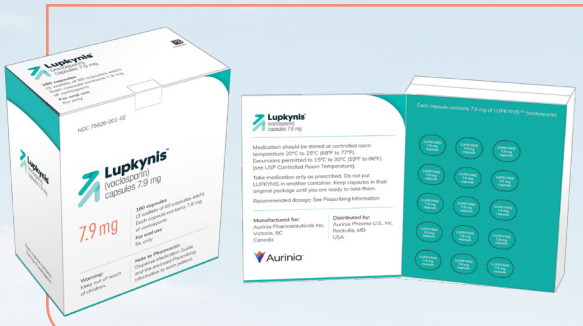
[a]Moderate CYP3A4 inhibitors include verapamil, fluconazole, and diltiazem. Strong CYP3A4 inhibitors include ketoconazole, itraconazole, and clarithromycin.[1]

Important Safety Information (cont.)

WARNINGS AND PRECAUTIONS. Serious Infections: Immunosuppressants, including LUPKYNIS, increase the risk of developing bacterial, viral, fungal, and protozoal infections (including opportunistic infections), which may lead to serious, including fatal, outcomes.

Please see additional Important Safety Information and accompanying Prescribing Information including Boxed Warning and Medication Guide for LUPKYNIS.

Lupkynis™ (voclosporin) capsules 7.9 mg



For more information on dosing recommendations, please see the Prescribing Information and visit LUPKYNISpro.com

Important Safety Information (cont.)

WARNINGS AND PRECAUTIONS

Nephrotoxicity: LUPKYNIS, like other calcineurin inhibitors (CNIs), may cause acute and/or chronic nephrotoxicity. The risk is increased when CNIs are concomitantly administered with drugs associated with nephrotoxicity.

Hypertension: Hypertension is a common adverse reaction of LUPKYNIS therapy and may require antihypertensive therapy.

Neurotoxicity: LUPKYNIS, like other CNIs, may cause a spectrum of neurotoxicities: severe include posterior reversible encephalopathy syndrome (PRES), delirium, seizure, and coma; others include tremor, paresthesia, headache, and changes in mental status and/or motor and sensory functions.

Hyperkalemia: Hyperkalemia, which may be serious and require treatment, has been reported with CNIs, including LUPKYNIS. Concomitant use of agents associated with hyperkalemia may increase the risk for hyperkalemia.

QTc Prolongation: LUPKYNIS prolongs the QTc interval in a dose-dependent manner when dosed higher than the recommended lupus nephritis therapeutic dose. The use of LUPKYNIS in combination with other drugs that are known to prolong QTc may result in clinically significant QT prolongation.

Immunizations: Avoid the use of live attenuated vaccines during treatment with LUPKYNIS. Inactivated vaccines noted to be safe for administration may not be sufficiently immunogenic during treatment with LUPKYNIS.

Pure Red Cell Aplasia: Cases of pure red cell aplasia (PRCA) have been reported in patients treated with another CNI immunosuppressant. If PRCA is diagnosed, consider discontinuation of LUPKYNIS.

Drug-Drug Interactions: Avoid co-administration of LUPKYNIS and strong CYP3A4 inhibitors or with strong or moderate CYP3A4 inducers. Reduce LUPKYNIS dosage when co-administered with moderate CYP3A4 inhibitors. Reduce dosage of certain P-gp substrates with narrow therapeutic windows when co-administered.

ADVERSE REACTIONS

The most common adverse reactions (≥3%) were glomerular filtration rate decreased, hypertension, diarrhea, headache, anemia, cough, urinary tract infection, abdominal pain upper, dyspepsia, alopecia, renal impairment, abdominal pain, mouth ulceration, fatigue, tremor, acute kidney injury, and decreased appetite.

SPECIFIC POPULATIONS

Pregnancy/Lactation: May cause fetal harm. Advise not to breastfeed.

Renal Impairment: Not recommended in patients with baseline eGFR ≤45 mL/min/1.73 m^2 unless benefit exceeds risk. If used in this population, reduce LUPKYNIS dose.

Hepatic Impairment: For mild or moderate hepatic impairment, reduce LUPKYNIS dose. Avoid use with severe hepatic impairment.

Please see accompanying Prescribing Information including Boxed Warning and Medication Guide for LUPKYNIS.

Reference: 1. LUPKYNIS [package insert]. Rockville, MD: Aurinia Pharma U.S., Inc., 2021.

Aurinia™

US-VCS-2000139 04/21

Lupkynis™ (voclosporin) capsules 7.9 mg