

More than a pen—  
**YOUR  
EVERYDAY BLEED  
PROTECTION<sup>a</sup>**

**Prophylaxis treatment in a prefilled, subcutaneous pen** to prevent or reduce the frequency of bleeding episodes in adults and children 12 years of age and older with hemophilia B with or without inhibitors or hemophilia A with or without inhibitors. It is not known if Alhemo<sup>®</sup> is safe and effective in people receiving ongoing immune tolerance induction or in children younger than 12 years of age

<sup>a</sup>It is important to follow the daily dosing schedule of Alhemo<sup>®</sup> to stay protected against bleeding.



Celebrating  
**35<sup>+</sup>**  
YEARS  
serving the **hemophilia** community



Needles provided separately and may require a prescription in some states.

### Important Safety Information

**What is the most important information I should know about Alhemo<sup>®</sup>?**

- **It is important to follow the daily dosing schedule of Alhemo<sup>®</sup> to stay protected against bleeding.** This is especially important during the first 4 weeks of treatment to make sure a correct maintenance dose is established. Use Alhemo<sup>®</sup> exactly as prescribed by your healthcare provider (HCP). **Do not** stop using Alhemo<sup>®</sup> without talking to your HCP. If you miss doses or stop using Alhemo<sup>®</sup>, you may no longer be protected against bleeding
- **Your HCP may prescribe factor VIII, factor IX, or bypassing agents during treatment with Alhemo<sup>®</sup>.** Carefully follow your HCP's instructions regarding when to use on-demand factor VIII, factor IX, or bypassing agents and the recommended dose and schedule for breakthrough bleeds

**Royal** lives with hemophilia B with inhibitors, uses Alhemo<sup>®</sup>, and is an employee of Novo Nordisk.

# Are you facing challenges with your current factor treatment?

Are you still experiencing **bleeds despite using Factor 9 treatment?**

Based on a survey over a 12-month period in a real-world study of 150 people with hemophilia B

Up to **8 out of 10** people with hemophilia B using Factor 9 reported experiencing at least 1 bleed<sup>a</sup>

**108 people** on standard half-life (SHL) Factor 9 and **34 people** on extended half-life (EHL) Factor 9

33% treating on demand and 67% treating with prophylaxis

<sup>a</sup>Data from a study with 150 people in the United States and Europe who received Factor 9 treatment. Bleed data were patient reported from the previous 12 months. People in the United States had lower bleeding rates than those in Europe, which may affect how this information applies to different people. Findings have not been confirmed by a clinical study that compared treatments.

In a real-world study that included 112 people with hemophilia B

**~1 in 4**

of 65 people with hemophilia B on factor treatment said they **felt worried about adequate protection from bleeds** at least sometimes<sup>b</sup>

Do vein health or administration challenges cause you to **delay or avoid treatment?**

In a real-world study of people with hemophilia B

**40%** of 65 people reported **feeling worried about losing access to a vein** due to their current factor treatment at least sometimes<sup>b</sup>

**31%** of 65 people reported having **physical discomfort** due to treatment administration at least sometimes<sup>b</sup>

Nearly **30%** of 65 people reported experiencing **blown or ruptured veins** due to their treatment at least sometimes<sup>b</sup>

Have you ever **avoided activities** due to **factor level concerns?**

**Bleed protection can vary between doses,** due to "peaks and troughs" in Factor 9 levels

Would you consider a therapy that **provides a steady level of bleed protection** without peaks and troughs?

You deserve daily bleed protection with a treatment **DESIGNED TO MEET THE CHALLENGES OF HEMOPHILIA B**

<sup>b</sup>Data from an online survey through PicnicHealth from 2020-2022 among 112 people with hemophilia B in the United States. The survey used a cross-sectional study design to collect answers. A person's answers could change over time, and the study didn't track patients continuously. Survey response options were: "Never," "Rarely," "Sometimes," "Often," and "Always." Findings have not been confirmed by a clinical study that compared treatments.



# Transformative administration with a prefilled pen<sup>a,b</sup>

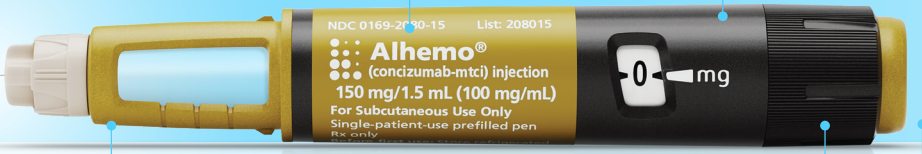
Subcutaneous administration (no need for vein access)

**Ultra-thin needle<sup>c</sup>**

- NovoFine® Plus 32G 4 mm needles are designed for less pain and increased injection comfort
- Needle as thin as 2 human hairs

**Portable and ready to use: Prefilled, no mixing required<sup>d</sup>**

**Room temperature stable up to 4 weeks<sup>d</sup>**



The image shows a yellow and black Alhemo pen-injector. The label on the pen reads: "NDC 0169-2040-15 List: 208015 Alhemo® (concizumab-mtci) injection 150 mg/1.5 mL (100 mg/mL) For Subcutaneous Use Only Single-patient-use prefilled pen Rx only". The dose selector window shows "0 mg".

**Low injection volume**

- (Example: 0.14 mL per 0.2 mg/kg dose for 70 kg person using the gold label 150 mg/1.5 mL pen)

**Dose selector**

- Dial up to 80 dose increments
- Can be turned in either direction to adjust dose

**Push-button technology**

- Dosing does not extend button

**No IV infusions**

**No mixing**

**No vials**

**No refrigeration required<sup>d</sup>**  
(up to 4 weeks after first use)

Administration designed to fit **your** lifestyle<sup>a,b</sup>

**15 YEARS** in other conditions  
Novo Nordisk pen device used for

“ I like the once-daily dosing because of the **small needle** and low dosage volume. ”  
—**Royal** lives with hemophilia B with inhibitors, uses Alhemo®, and is an employee of Novo Nordisk.

**98%** rated the pen **easy to use**  
(78 people)

**97%** rated the pen **easy to learn to use**  
(78 people)

**99%** rated the pen **easy to store**  
(76 people)

Easy=easy or very easy.

Less than **90 seconds** to prepare and administer

**~6 seconds** to inject<sup>b</sup>



Read Instructions for Use or watch Instructions for Use Video for full administration instructions.

**Study design:** The study included 80 people with hemophilia A or B, with or without inhibitors and their caregivers. It aimed to assess how the Alhemo® pen-injector is easy to learn how to use and easy to use. After training, participants prepared and performed a single injection on an injection pad or dummy and training time, preparation, injections, and number of complete injections were measured. Participants rated the pen's ease of use on a scale of very difficult, difficult, neither difficult nor easy, easy, very easy. Limitations include different experiences with real at-home use and rating based on a 1 practice injection.

## Important Safety Information (cont'd)

**Do not use Alhemo® if you** are allergic to concizumab-mtci or any of the ingredients in Alhemo®.

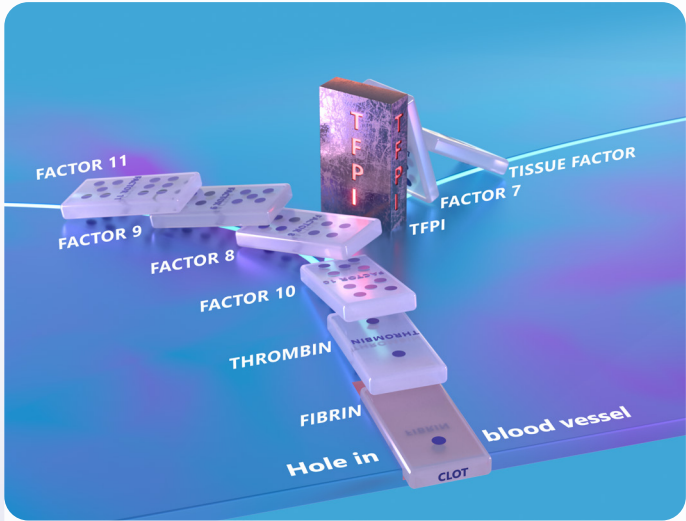
**Before using Alhemo®, tell your HCP about all of your medical conditions, including if you:**

- Have a planned surgery. Talk to your HCP about when to stop using Alhemo® and when to start it again if you have a planned surgery

<sup>a</sup>Read the Instructions for Use for information about how to prepare and inject Alhemo® and how to properly throw away used pens and needles. Your healthcare provider should show you or your caregiver how to use Alhemo® before you use it for the first time.  
<sup>b</sup>After the dose counter is at “0,” count slowly to 6 while the needle is still in your skin.  
<sup>c</sup>Needles provided separately and may require a prescription in some states. A new needle is required for each injection.  
<sup>d</sup>Store in refrigerator before first use. After first use, Alhemo® can be stored at room temperature below 86 °F (30 °C) or in a refrigerator at 36 °F to 46 °F (2 °C to 8 °C) for up to 4 weeks.  
IV=intravenous.

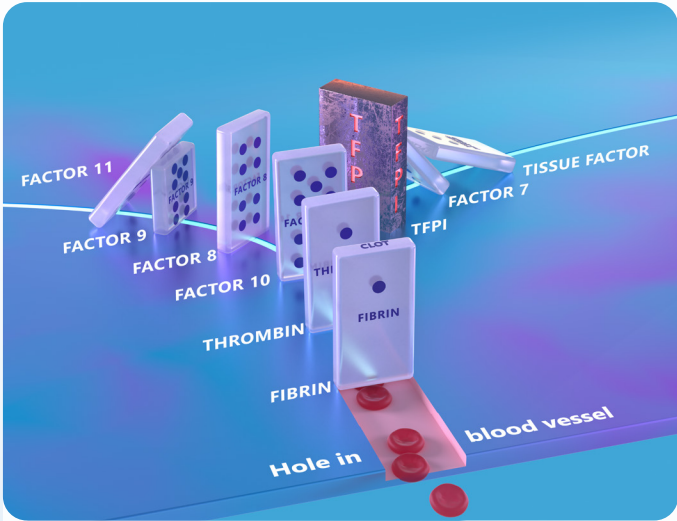
# Alhemo® is an innovative approach to preventing bleeds in hemophilia B

The clotting cascade is a series of steps, like a domino effect, where each domino represents a different clotting protein. When the dominoes fall properly, clotting occurs:



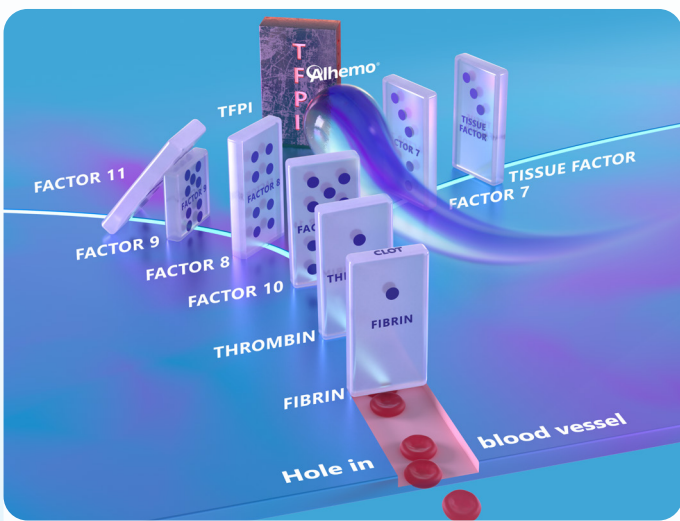
### Clotting cascade without hemophilia

Factor 9 is part of the clotting cascade that falls onto other dominoes to form clots and prevent bleeding. A protein called tissue factor pathway inhibitor, or TFPI, is also part of the process. It blocks the rest of the cascade's dominoes so there is not too much clotting.



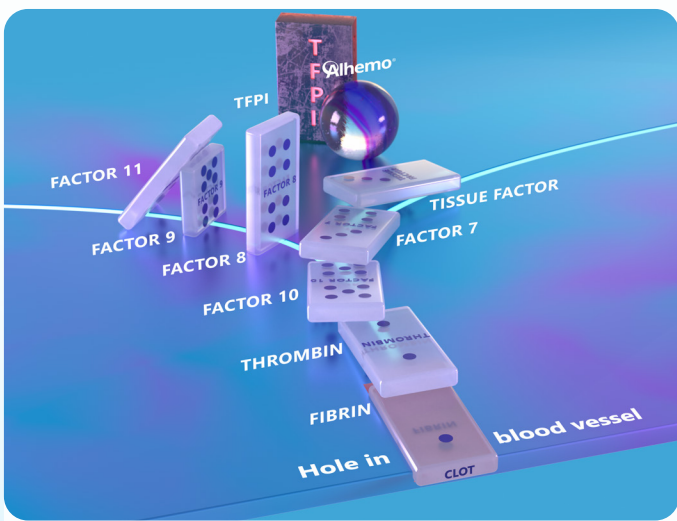
### Clotting cascade in hemophilia B

In hemophilia B, the Factor 9 domino cannot fall onto the next domino, and TFPI still blocks the dominoes from falling on the other side of the cascade. When the dominoes do not fall, clots will not form, and bleeding may occur.



### How Alhemo® works

Alhemo® stops TFPI from blocking the dominoes, so they can continue to fall, even without Factor 9.



### Bleed prevention

As a result, the domino cascade can be completed and a clot can form.

Alhemo® helps keep blood in balance

✓ Helps the body create the right amount of thrombin

✓ Keeps Alhemo® levels consistent to avoid peaks and troughs

✓ Works fast in 4 days and can exit the body quickly<sup>a</sup>

Watch a [video](#) on how Alhemo® works.

It's important to take Alhemo® daily, especially during the first 4 weeks, to ensure you get the correct maintenance dose and stay protected from bleeding. Always use Alhemo® exactly as prescribed. Do not stop or miss doses without first consulting your healthcare provider, as this may reduce your protection against bleeding.

To find the right maintenance dose for you, your provider will check Alhemo® levels in your blood. Additional blood tests may be done during treatment.

<sup>a</sup>After your Day 1 loading dose, the amount of Alhemo® builds up in the body to a stable amount around Day 4 and remains stable with daily maintenance doses. If you stop Alhemo®, 90% of it is expected to leave the body by the end of approximately 4 days after the last dose. The time for 50% of drug to leave the body is approximately 1 day.

TFPI=tissue factor pathway inhibitor.

### Important Safety Information (cont'd)

**Before using Alhemo®, tell your HCP about all of your medical conditions, including if you (cont'd):**

- Are pregnant, breastfeeding, or plan to become pregnant or breastfeed. It is not known if Alhemo® may harm your unborn baby or if Alhemo® passes into your breast milk
  - Your HCP may do a pregnancy test before you start treatment with Alhemo®
  - **Females who are able to become pregnant**, talk to your HCP about using effective birth control (contraception) methods during treatment with Alhemo® and for 7 weeks after ending treatment

**Tell your HCP about all the medicines you take**, including prescription and over-the-counter medicines, vitamins, and supplements.

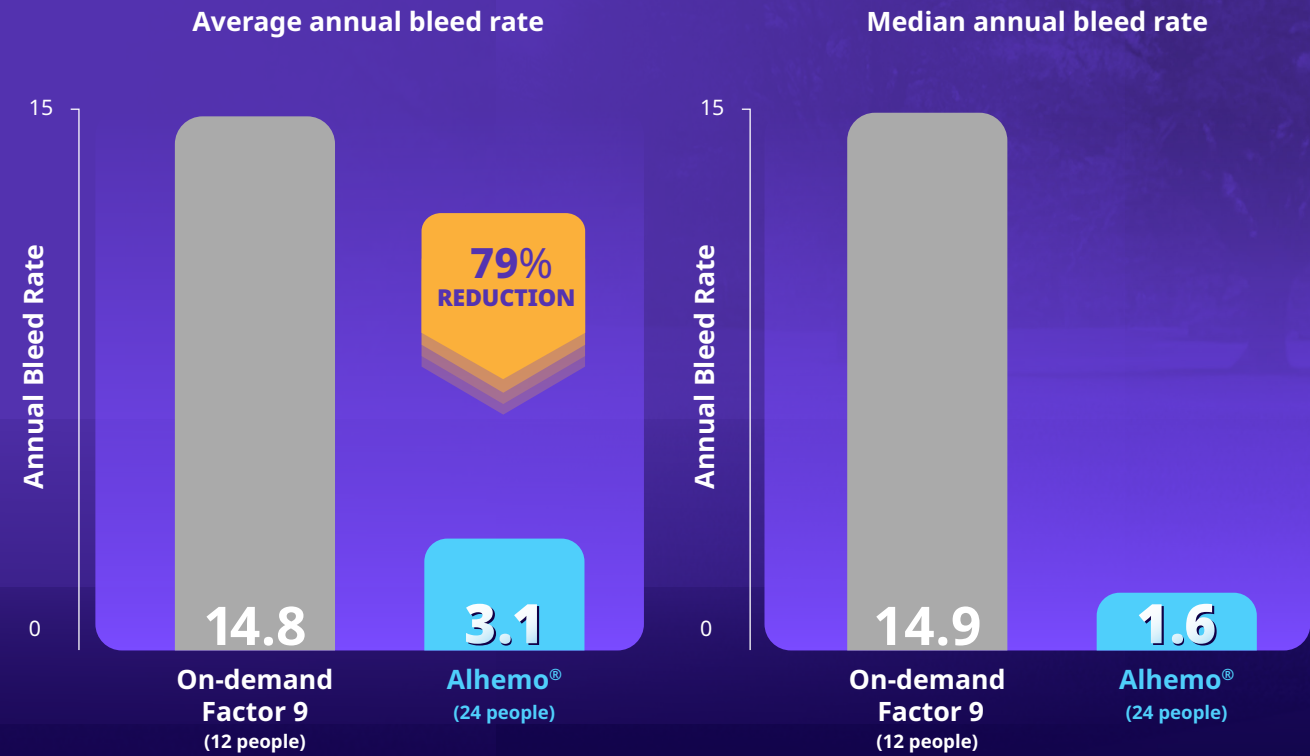


Results from a clinical trial with people who have hemophilia B or hemophilia A

# Powerful bleed protection

Primary study results in people with hemophilia B:

## Treated spontaneous and traumatic bleeds in people with hemophilia B



Clinical study of Alhemo® included 156 people aged 12 years and older who had hemophilia A or B without inhibitors. Alhemo® was assessed in a group of people who had previously received on-demand factor replacement, including 12 people with hemophilia B who were treated with no prophylaxis (on-demand Factor 9 replacement) and 24 people with hemophilia B who received Alhemo® prophylaxis for at least 32 weeks.

- Efficacy was evaluated separately in people with hemophilia A and hemophilia B. For people with hemophilia A (27 people), the average annual bleed rate (ABR) was 19.3 for those using on-demand Factor 8 and 2.7 for those using Alhemo® prophylaxis. This corresponded to a reduction of 86%

# Safety confirmed in multiple clinical trials

**320**

**people in clinical trials,**  
including 66 males with hemophilia B

In the clinical trial with people who have hemophilia B or hemophilia A randomized to receive Alhemo®, injection site reactions and headaches were the most common side effects, each reported in 7% using Alhemo®.

Majority of injection site reactions were mild.



**Royal** lives with hemophilia B with inhibitors, uses Alhemo®, and is an employee of Novo Nordisk.

- NO boxed warning**
- NO routine liver monitoring required**

Alhemo® is safe to use with Factor 8 or Factor 9 products. Follow your healthcare provider's instructions on when to use Factor 8 or Factor 9 for breakthrough bleeds, including the recommended dose and schedule.

## Important Safety Information (cont'd)

### What are the possible side effects of Alhemo®?

#### Alhemo® may cause serious side effects, including:

- Blood clots (thromboembolic events).** Alhemo® may cause blood clots to form in blood vessels, such as in your arms, legs, heart, lung, brain, eyes, kidneys, or stomach. You may be at risk for getting blood clots if you use high or frequent doses of factor products or bypassing agents to treat breakthrough bleeds, or if you have certain conditions. Get medical help right away if you have any signs and symptoms of blood clots, including: swelling, warmth, pain, or redness of the skin; headache; trouble speaking or moving; eye pain or swelling; sudden pain in your stomach or lower back area; feeling short of breath or severe chest pain; confusion; numbness in your face; and problems with your vision



Personalized dosing **for you**



**Royal** lives with hemophilia B with inhibitors, uses Alhemo®, and is an employee of Novo Nordisk.

It is important to follow the daily dosing schedule of Alhemo® to stay protected against bleeding, especially during the first 4 weeks of treatment, to help establish your maintenance dose.

**If you miss doses, or stop using Alhemo®, you may no longer be protected against bleeding.**

<sup>a</sup>Should be performed before administering next scheduled dose.

If you miss a dose during the first 4 weeks of treatment, contact your healthcare provider right away. Your healthcare provider will tell you how much Alhemo® to inject.

Watch [Royal's video](#) and see why he prefers personalized dosing.

**Day 1**

- You will inject a larger dose (a loading dose) of Alhemo® on your first day of treatment
- Your dose will be based on your weight: 1 mg/kg

**Day 2+**

- Your dose will now be 0.2 mg/kg 1 time per day until you take a blood test

**Day 28** (4 weeks after starting Alhemo®)

- To determine the right maintenance dose, you will take the blood test, which will show how much Alhemo® is in your body<sup>a</sup>
- Your healthcare provider may do additional blood tests during treatment with Alhemo®

**Prepare for your laboratory test**

- Schedule** your blood draw appointment and confirm its location—which may not be at your doctor's office.

**Wait** until after the blood draw to take your daily dose of Alhemo® on the day of your test.

**Did you know** ?

Alhemo® has a test that measures the amount of concizumab-mtci in your blood? This allows your healthcare provider to prescribe the dose that fits your body's needs.

**3 pen options, each contains multiple doses of Alhemo®**



**1 gold label pen (150 mg/1.5 mL) has about 10 days of daily Alhemo® treatment:**  
10 days of 0.2 mg/kg daily maintenance treatment for a person weighing 154 lb (70 kg).

**Important Safety Information (cont'd)**

**What are the possible side effects of Alhemo® (cont'd)?**  
**Alhemo® may cause serious side effects, including (cont'd):**

- **Blood clots (thromboembolic events).** Alhemo® may cause blood clots to form in blood vessels, such as in your arms, legs, heart, lung, brain, eyes, kidneys, or stomach. You may be at risk for getting blood clots if you use high or frequent doses of factor products or bypassing agents to treat breakthrough bleeds, or if you have certain conditions. Get medical help right away if you have any signs and symptoms of blood clots, including: swelling, warmth, pain, or redness of the skin; headache; trouble speaking or moving; eye pain or swelling; sudden pain in your stomach or lower back area; feeling short of breath or severe chest pain; confusion; numbness in your face; and problems with your vision

PLACEHOLDER FOR TABS

PLACEHOLDER FOR TABS



# Administration designed with **you in mind**

In a device-handling study of the Alhemo® pen involving 44 adults and 21 adolescents with hemophilia A or B, with or without inhibitors, as well as 15 caregivers, participants were trained and then practiced a simulated injection using a pad or dummy. They then shared their experience through a questionnaire. Nearly all participants, 78 people (98%), said the Alhemo® pen was easy or very easy to use. These results are based on a simulated setting and may not fully reflect at-home use.

Read the **Instructions for Use** for information about how to prepare and inject Alhemo® and how to properly throw away used pens and needles. Your healthcare provider should show you or your caregiver how to use Alhemo® before you use it for the first time.

Alhemo® is given as an **injection under the skin** (subcutaneous injection) by you or a caregiver.

Alhemo® is administered **once daily**.

**PREP  
ADMINISTER  
PROTECT**

...less than  
**90 seconds!**

Inject in  
**~6 seconds<sup>b</sup>**



**1. Check Alhemo® pen**



**2. Attach new needle**



**3. Prime before each dose**  
Dial 1 marking to test flow before each dose.

**4. Select dose**



**5a. Prepare injection site**

**5b. Inject Alhemo®<sup>a,b</sup>**

**6. Remove needle**

**7. Recap pen**

Alhemo® is recommended to be used with NovoFine® and NovoFine® Plus 32G 4 mm injection needles.

## Remember to:

### Rotate

injection sites daily.

### Always

use a new needle  
for each injection.

### Never share Alhemo®

pens and needles with another  
person, even if the needle is changed.

<sup>a</sup>You can inject in the skin of your stomach area (abdomen) at least 2 inches from your belly button (navel) or your upper legs (thigh). Change (rotate) your injection site with each injection every day. Do not use the same site for each injection. Do not inject into skin that is tender, bruised, red or hard or areas where there are moles, scars, or stretch marks.

<sup>b</sup>After the dose counter is at "0," count slowly to 6 while the needle is still in your skin.

## Important Safety Information (cont'd)

### What are the possible side effects of Alhemo® (cont'd)?

#### Alhemo® may cause serious side effects, including (cont'd):

- **Allergic reactions.** Alhemo® can cause allergic reactions, including redness of the skin, rash, hives, itching, and stomach-area (abdominal) pain. Stop using Alhemo® and get emergency medical help right away if you develop any signs or symptoms of a severe allergic reaction, including: itching on large areas of skin; trouble swallowing; wheezing; pale and cold skin; dizziness due to low blood pressure; redness or swelling of lips, tongue, face, or hands; shortness of breath; tightness of the chest; and fast heartbeat

**The most common side effects of Alhemo® include:** bruising, redness, bleeding, itching, rash or lump at the injection site, headache, and hives. These are not all the possible side effects of Alhemo®. Call your doctor for medical advice about side effects.

# Alhemo® offers innovative administration

Not intended to be a comparison of efficacy or safety

| Select administration features  | Alhemo® <sup>a</sup>                     | HYMPAVZI™                                  | Qfitlia™                                      | SHL and EHL Factor 9 Prophylaxis <sup>c,d</sup>    |
|---|--|--|---|--|
| Prefilled pen device for all doses  | ✓  | ✓<br>300 mg dose requires 2 injection pens | ✗<br>Vial and syringe needed for 2 of 3 doses | ✗  |
| Low range (≤0.5 mL) of injection volume <sup>b</sup>                          | ✓<br>0.14 mL to 0.35 mL                  | ✗<br>1.0 mL to 2.0 mL                      | ✓<br>0.1 mL to 0.5 mL                         | ✗<br>Varies by weight and target factor levels     |
| Smallest needle size<br><small>(higher gauge number = thinner needle)</small> | ✓<br>32G needle as thin as 2 human hairs | ✗<br>27G                                   | ✗<br>27G                                      | ✗<br>23G to 25G suggested                          |
| FDA authorized/cleared lab test   | ✓  | ✗  | ✓   | ✓  |
| No venous access needed   | ✓  | ✓  | ✓   | ✗  |
| Dosage schedule   | Daily                                    | Once weekly                                | Once every 1 or 2 months                      | Once weekly for SHL and every 7 to 14 days for EHL |

<sup>a</sup>Read the Instructions for Use for information about how to prepare and inject Alhemo® and how to properly throw away used pens and needles. Your healthcare provider should show you or your caregiver how to use Alhemo® before you use it for the first time.  
<sup>b</sup>For a person weighing 70 kg on Alhemo® 0.2 mg/kg, the volume to inject ranges from 0.14 mL to 0.35 mL, depending on pen size. HYMPAVZI™ volume to inject is 1 mL for the 150 mg dose and 2 mL for the 300 mg dose. Qfitlia™ volume to inject is 0.5 mL for a 50 mg dose, 0.2 mL for a 20 mg dose, and 0.1 mL for a 10 mg dose.  
<sup>c</sup>BeneFIX® (coagulation Factor 9 [recombinant]).  
<sup>d</sup>Idelvion® (coagulation Factor 9 [recombinant], albumin fusion protein).  
EHL=extended half-life; SHL=standard half-life.

## Important Safety Information

### What is the most important information I should know about Alhemo®?

- **It is important to follow the daily dosing schedule of Alhemo® to stay protected against bleeding.** This is especially important during the first 4 weeks of treatment to make sure a correct maintenance dose is established. Use Alhemo® exactly as prescribed by your healthcare provider (HCP). **Do not** stop using Alhemo® without talking to your HCP. If you miss doses or stop using Alhemo®, you may no longer be protected against bleeding
- **Your HCP may prescribe factor VIII, factor IX, or bypassing agents during treatment with Alhemo®.** Carefully follow your HCP's instructions regarding when to use on-demand factor VIII, factor IX, or bypassing agents and the recommended dose and schedule for breakthrough bleeds

# NovoCare®—comprehensive support for your journey



## Enrollment

The Patient Enrollment Form, including the prescription, is sent from the provider's office to NovoCare®, and a case manager coordinates with the provider throughout.



## Welcome call

After NovoCare® gets the prescription, a Patient Liaison will contact you to complete enrollment and serve as your main support.



## Insurance coverage and costs

Information about insurance coverage and possible out-of-pocket costs is provided, along with details about savings offers for eligible patients.



## Field Reimbursement Manager

Field Reimbursement Managers can answer provider questions and provide education on insurance coverage and access to Alhemo®.



## Specialty pharmacy shipment

If requested by your health care provider, NovoCare® can triage your prescription to a specialty pharmacy following approval by your insurance company.

For more personalized assistance and information, visit [NovoCare.com](https://www.novocare.com) or **call 844-668-6732**  
8:00 AM to 8:00 PM, Monday through Friday EST]



# EVERYDAY BLEED PROTECTION<sup>a</sup>

## in a pen designed with you in mind

**Prefilled, subcutaneous pen** to prevent or reduce frequency of bleeding episodes in adults and children 12 years of age and older with hemophilia B or hemophilia A

<sup>a</sup>It is important to follow the daily dosing schedule of Alhemo<sup>®</sup> to stay protected against bleeding.

**Alhemo<sup>®</sup>**  
concizumab-mtci  
injection | 60 mg | 150 mg | 300 mg pens

**Royal** lives with hemophilia B with inhibitors, uses Alhemo<sup>®</sup>, and is an employee of Novo Nordisk.



- **Power to prevent bleeds:**  
3.1 average and 1.6 median bleed rate with Alhemo<sup>®</sup> in hemophilia B
- **Portable and ready to use: Prefilled, no mixing required<sup>b,c</sup>**  
Ultra-thin 32G 4 mm needle, low injection volume<sup>d</sup>
- **Safety demonstrated** in 320 people, including 66 with hemophilia B
- **Most common side effects with Alhemo<sup>®</sup> in people without inhibitors:**  
Injection site reactions (7%) and headaches (7%)

Clinical study of Alhemo<sup>®</sup> included 156 people aged 12 years and older who had hemophilia A or B without inhibitors. Alhemo<sup>®</sup> was assessed in a group of people who had previously received on-demand factor replacement, including 12 people with hemophilia B who were treated with no prophylaxis (on-demand Factor 9) for at least 24 weeks and 24 people with hemophilia B who received Alhemo<sup>®</sup> prophylaxis for at least 32 weeks. Efficacy was evaluated separately in people with hemophilia A and hemophilia B. For people with hemophilia B, the average annual bleed rate (ABR) was 14.8 for people using on-demand Factor 9 and 3.1 for those using Alhemo<sup>®</sup> prophylaxis. The median ABR for people with hemophilia B was 14.9 for people using on-demand Factor 9 and 1.6 for those using Alhemo<sup>®</sup> prophylaxis. For people with hemophilia A (27 people), the average ABR was 19.3 for people using on-demand Factor 8 and 2.7 for those using Alhemo<sup>®</sup> prophylaxis.

<sup>b</sup>Store in refrigerator before first use. After first use, Alhemo<sup>®</sup> can be stored at room temperature below 86 °F (30 °C) or in a refrigerator at 36 °F to 46 °F (2 °C to 8 °C) for up to 4 weeks.

<sup>c</sup>Read the Instructions for Use for information about how to prepare and inject Alhemo<sup>®</sup>, and how to properly throw away used pens and needles.

Your healthcare provider should show you or your caregiver how to use Alhemo<sup>®</sup> before you use it for the first time.

<sup>d</sup>For a person who weighs 70 kg (154 lb) on a daily dose of 0.2 mg/kg and using the (gold label) 150 mg/1.5 mL pen, the volume to inject is 0.14 mL per dose.

### Important Safety Information (cont'd)

#### What are the possible side effects of Alhemo<sup>®</sup>?

#### Alhemo<sup>®</sup> may cause serious side effects, including:

- **Blood clots (thromboembolic events).** Alhemo<sup>®</sup> may cause blood clots to form in blood vessels, such as in your arms, legs, heart, lung, brain, eyes, kidneys, or stomach. You may be at risk for getting blood clots if you use high or frequent doses of factor products or bypassing agents to treat breakthrough bleeds, or if you have certain conditions. Get medical help right away if you have any signs and symptoms of blood clots, including: swelling, warmth, pain, or redness of the skin; headache; trouble speaking or moving; eye pain or swelling; sudden pain in your stomach or lower back area; feeling short of breath or severe chest pain; confusion; numbness in your face; and problems with your vision



Novo Nordisk Inc., 800 Scudders Mill Road, Plainsboro, New Jersey 08536 U.S.A.

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NovoFine<sup>®</sup> is a registered trademark of Novo Nordisk A/S.

Novo Nordisk is a registered trademark of Novo Nordisk A/S.

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**Ask your Rare Blood Community Liaison about Alhemo<sup>®</sup>. Visit [Alhemo.com](https://Alhemo.com)**