You are cordially invited to attend this educational program

Jakafi® ruxolitinib (tablets) 5mg • 10mg • 15mg • 20mg • 25mg

Jakafi XR™ (ruxolitinib) extended release tablets 11mg • 22mg • 33mg • 44mg • 55mg

Polycythemia Vera and Myelofibrosis: Identifying When to Intervene With JAKAFI®/JAKAFI XR™ (ruxolitinib)

REGISTRATION

Online
https://sphase.info/inc13841

You may also register by contacting your Incyte representative(s) Jennifer French at (248) 860-2278 or jfrench@incyte.com with the following information: name, title/degree, state(s) and state license number(s), affiliation, address, phone, and email.

Prior to registering, please review the program title and speaker to ensure you have not attended this program before.

PRESENTED BY

Michael Scola, MD
Atlantic Health
Morristown, NJ

Thursday, September 10, 2026
6:00 PM
Eastern Standard Time

Cooper's Hawk Winery &
17440 Hall Road
Clinton Township, MI 43038

The program will begin at 6:00 PM. Please plan to arrive 15 minutes early.

Due to a change in policy, Incyte will no longer provide or pay for alcohol at Speaker Programs.

Appropriate attendees include licensed healthcare professionals (HCPs) with a direct role in patient care.

Please see Indications, Important Safety Information for JAKAFI/JAKAFI XR on back cover and accompanying Full Prescribing Information.

Please note this program is intended for US healthcare professionals who practice in a specialty relevant to the program's FDA-approved indication or disease state. This program is sponsored by Incyte Corporation and is not eligible for CE credits.

This is an educational event intended only for appropriate healthcare professionals. Spouses, guests, and other individuals who are not the intended audience of this educational program are not permitted to attend. Healthcare professionals who are subject to federal, state, or local laws or government ethics restrictions may not attend this event. Incyte will report the cost of any meals provided at this event as required by federal, state, or local laws.

Incyte and its representatives will process your personal information that you provide when you register in order to attend an educational event presented by Incyte. You can learn more about Incyte's privacy practices at the following site: **https://www.incyte.com/privacy-policy**. Please contact **privacy@incyte.com** if you have any questions or concerns.

IMPORTANT SAFETY INFORMATION

INDICATIONS AND USAGE

- JAKAFI®/JAKAFI XR™ (ruxolitinib) is for treatment of intermediate or high-risk myelofibrosis (MF), including primary MF, post–polycythemia vera MF and post–essential thrombocythemia MF in adults.
- JAKAFI®/JAKAFI XR™ (ruxolitinib) is for treatment of polycythemia vera (PV) in adults who have had an inadequate response to or are intolerant of hydroxyurea.

WARNINGS AND PRECAUTIONS

Thrombocytopenia, Anemia and Neutropenia

- JAKAFI®/JAKAFI XR™ (ruxolitinib) can cause dose-related effects of thrombocytopenia, anemia and neutropenia. Perform a pre-treatment complete blood count (CBC) and monitor CBCs every 2 to 4 weeks until doses are stabilized, and then as clinically indicated.
- Manage thrombocytopenia by reducing the dose or temporarily interrupting JAKAFI/JAKAFI XR. Platelet transfusions may be necessary.
- Patients developing anemia may require blood transfusions and/or dose modifications of JAKAFI/JAKAFI XR.
- Severe neutropenia (ANC $<0.5 \times 10^9$/L) was generally reversible by withholding JAKAFI/JAKAFI XR until recovery.

Risk of Infection

Tuberculosis

- Serious bacterial, mycobacterial, fungal and viral infections have occurred. Delay starting JAKAFI/JAKAFI XR until active serious infections have resolved. Observe patients receiving JAKAFI/JAKAFI XR for signs and symptoms of infection and manage promptly.
- Tuberculosis (TB) infection with JAKAFI/JAKAFI XR has been reported. Observe patients taking JAKAFI/JAKAFI XR for signs and symptoms of active TB and manage promptly. Prior to initiating, evaluate patients for TB risk factors and test those at higher risk for latent infection. Consult a physician with expertise in the treatment of TB before starting in patients with evidence of active or latent TB. Continuation during treatment of active TB should be based on the overall risk-benefit determination.

Progressive Multifocal Leukoencephalopathy

- Progressive multifocal leukoencephalopathy (PML) has occurred with JAKAFI/JAKAFI XR treatment. If PML is suspected, stop JAKAFI/JAKAFI XR and evaluate.

Herpes Zoster and Herpes Simplex

- Herpes zoster infection, reactivation and/or dissemination has been reported in patients receiving JAKAFI/JAKAFI XR. Advise patients about early signs and symptoms of herpes zoster and seek treatment. Monitor patients for the development of herpes simplex infections. If a patient develops evidence of dissemination of herpes simplex, consider interrupting treatment.

Hepatitis B

- Increases in hepatitis B viral load with or without associated elevations in alanine aminotransferase and aspartate aminotransferase have been reported in patients with chronic hepatitis B virus (HBV) infections.

Symptom Exacerbation Following Interruption or Discontinuation of Treatment

- When discontinuing JAK-Inhibitors, including JAKAFI/JAKAFI XR, myeloproliferative neoplasm-related signs and symptoms may flare. After discontinuation, some patients with myelofibrosis have experienced fever, respiratory distress, hypotension, disseminated intravascular coagulation (DIC), or multi-organ failure. If any of these occur after discontinuation or while tapering JAKAFI/JAKAFI XR, evaluate and treat any intercurrent illness and consider restarting or increasing the dose. Instruct patients not to interrupt or discontinue JAKAFI/JAKAFI XR without consulting their physician. When discontinuing or interrupting JAKAFI/JAKAFI XR for reasons other than life-threatening toxicities, consider gradual tapering rather than abrupt discontinuation.

Non-Melanoma Skin Cancer (NMSC)

- NMSC including basal cell, squamous cell, and Merkel cell carcinoma have occurred. Perform periodic skin examinations.

Lipid Elevations

- Treatment with JAKAFI/JAKAFI XR has been associated with increases in total cholesterol, low-density lipoprotein cholesterol, and triglycerides. Assess lipid parameters 8-12 weeks after initiation.

Major Adverse Cardiovascular Events (MACE)

- Another JAK-inhibitor has increased the risk of major adverse cardiovascular events (MACE), including cardiovascular death, myocardial infarction, and stroke (compared to those treated with TNF blockers), in patients with rheumatoid arthritis, a condition for which JAKAFI/JAKAFI XR is not indicated. Consider the benefits and risks for the individual patient prior to initiating or continuing therapy, particularly in patients who are current or past smokers and patients with other cardiovascular risk factors. Patients should be informed about the symptoms of serious cardiovascular events and the steps to take if they occur.

Thrombosis

- Another JAK-inhibitor has increased the risk of thrombosis, including deep venous thrombosis (DVT), pulmonary embolism (PE), and arterial thrombosis (compared to those treated with TNF blockers), in patients with rheumatoid arthritis, a condition for which JAKAFI/JAKAFI XR is not indicated. In patients with myelofibrosis (MF) and polycythemia vera (PV), the rates of thromboembolic events were similar in JAKAFI/JAKAFI XR and control treated patients. Patients with symptoms of thrombosis should be promptly evaluated and treated appropriately.

Secondary Malignancies

- Another JAK-inhibitor has increased the risk of lymphoma and other malignancies, excluding NMSC (compared to those treated with TNF blockers), in patients with rheumatoid arthritis, a condition for which JAKAFI/JAKAFI XR is not indicated. Patients who are current or past smokers are at additional increased risk.

Adverse Reactions

- In polycythemia vera and myelofibrosis, the most common hematologic adverse reactions (incidence >20%) were thrombocytopenia and anemia. The most common nonhematologic adverse reactions (incidence ≥15%) are bruising, dizziness, headache and diarrhea.

Drug Interactions

- Avoid concomitant use with fluconazole doses greater than 200 mg. Dose modifications may be required when administering fluconazole doses of 200 mg or less, or with strong CYP3A4 inhibitors, or in patients with renal or hepatic impairment. Patients should be closely monitored and the dose titrated based on safety and efficacy.

Pregnancy

- Use during pregnancy is not recommended and should only be used if the potential benefit justifies the potential risk to the fetus. Women taking JAKAFI/JAKAFI XR should not breastfeed during treatment and for 2 weeks after the final dose.

Please see accompanying Full Prescribing Information for JAKAFI/JAKAFI XR.

10% Total Recycled Fiber

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