On behalf of Dova, Linda Karrer (650-880-0456, Lkarrer@dova.com), cordially invites you to attend:

Clinical Evidence Supporting the Role of DOPTELET® (avatrombopag) for Adult Patients with Chronic Immune Thrombocytopenia (ITP) Who Have Had an Insufficient Response to a Previous Treatment

Wednesday, January 15, 2020

Registration: 6:00 PM

Program begins: 6:30 PM

Venue

The Sea by Alexander's Steakhouse

4269 El Camino Real

Palo Alto, CA 94306

Presented by

Misty Mahaffey, BSN, MS, RN
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This presentation does not qualify for continuing medical education (CME), continuing nursing education (CNE), or continuing education (CE).

The inclusion of a Healthcare Professional's spouse or guest at an educational program is not permitted.

Attendance at the same program is limited to two (2) times in a calendar year.

Your support of these guidelines will ensure a high quality learning environment for all participating Healthcare Professionals.

INDICATION

DOPTELET® (avatrombopag) is indicated for the treatment of thrombocytopenia in adult patients with chronic immune thrombocytopenia who have had an insufficient response to a previous treatment.

IMPORTANT SAFETY INFORMATION

Warnings and Precautions

DOPTELET is a thrombopoietin (TPO) receptor agonist and TPO receptor agonists have been associated with thrombotic and thromboembolic complications in patients with chronic immune thrombocytopenia. Thromboembolic events (arterial and venous) have been reported in patients with chronic immune thrombocytopenia treated with TPO receptor agonists. In clinical trials, 7% (9/128) of patients with chronic immune thrombocytopenia treated with DOPTELET developed a thromboembolic event. Consider the potential increased thrombotic risk when administering DOPTELET to patients with known risk factors for thromboembolism, including genetic prothrombotic conditions (Factor V Leiden, Prothrombin 20210A, Antithrombin deficiency or Protein C or S deficiency). DOPTELET should not be administered to patients with chronic immune thrombocytopenia in an attempt to normalize platelet counts. Follow the dosing guidelines to achieve target platelet counts.

Contraindications: None.

Drug Interactions

Dose adjustments are recommended for patients with chronic immune thrombocytopenia taking moderate or strong dual CYP2C9 and CYP3A4 inducers or inhibitors.

Adverse Reactions

The most common adverse reactions (≥10%) were: headache, fatigue, contusion, epistaxis, upper respiratory tract infection, arthralgia, gingival bleeding, petechiae and nasopharyngitis.

Please see accompanying Full Prescribing Information for DOPTELET (avatrombopag).
Also available at DOPTELET.com. PM-US-DOP-0187