REBINYN® (Coagulation Factor IX (Recombinant), GlycoPEGylated) is available as a lyophilized powder in single-dose vials of 500, 1000, and 2000 IU (3).

Do not use in patients who have known hypersensitivity to REBINYN® or its components, including hamster proteins (4).

Hypersensitivity reactions, including anaphylaxis, may occur. Should hypersensitivity reactions occur, discontinue REBINYN® and administer appropriate treatment (5.1).

Development of neutralizing antibodies (inhibitors) may occur. Perform an assay that measures Factor IX inhibitor concentration if bleeding is not controlled with the recommended dose of REBINYN® or if the expected plasma Factor IX activity levels are not attained (5.2, 5.5).

The use of Factor IX-containing products has been associated with the development of thrombotic complications (5.3).

Factor IX activity assay results may vary with the type of activated partial thromboplastin time reagent used (5.5).

The most frequently reported adverse reactions (≥ 1%) were itching and injection site reactions (6).

Animals administered repeat doses of REBINYN® showed accumulation of PEG in the choroid plexus. The potential clinical implications of these animal findings are unknown (6.3).

To report SUSPECTED ADVERSE REACTIONS, contact Novo Nordisk Inc. at 1-877-668-6777 or FDA at 1-800-FDA-1088 or www.fda.gov/medwatch.

Pediatric Use: No dose adjustment is needed (8.4).

See 17 for PATIENT COUNSELING INFORMATION and FDA-approved patient labeling.

Revised 06/2020
**FULL PRESCRIBING INFORMATION**

1 INDICATIONS AND USAGE

REBINYN® Coagulation Factor IX (Recombinant), GlycoPEGylated, is a recombinant DNA-derived coagulation Factor IX concentrate indicated for use in adults and children with hemophilia B for:
- On-demand treatment and control of bleeding episodes
- Perioperative management of bleeding

Limitations of Use:
REBINYN® is not indicated for routine prophylaxis in the treatment of patients with hemophilia B. REBINYN® is not indicated for immune tolerance induction in patients with hemophilia B.

2 DOSAGE AND ADMINISTRATION

For intravenous infusion after reconstitution only.

2.1 Dosing Guidelines

- Dose and duration of treatment depend on the location and extent of bleeding, and the patient's clinical condition.
- If monitoring of Factor IX activity is performed, use a chromogenic assay or selected one-stage clotting assay validated for use with REBINYN® [see Warnings and Precautions (5.5)].
- Each carton and vial label for REBINYN® states the actual Factor IX potency in IU.

On-demand Treatment and Control of Bleeding Episodes

REBINYN® dosing for on-demand treatment and control of bleeding episodes is provided in Table 1.

Table 1: Dosing for On-demand Treatment and Control of Bleeding Episodes

<table>
<thead>
<tr>
<th>Type of bleeding</th>
<th>Recommended dose IU/kg body weight</th>
<th>Additional information</th>
</tr>
</thead>
<tbody>
<tr>
<td>Minor and moderate</td>
<td></td>
<td></td>
</tr>
<tr>
<td>For example: Uncomplicated joint bleeds, minor muscular bleeds, mucosal or subcutaneous bleeds</td>
<td>40</td>
<td>A single dose should be sufficient for minor and moderate bleeds. Additional doses of 40 IU/kg can be given.</td>
</tr>
<tr>
<td>Major</td>
<td></td>
<td></td>
</tr>
<tr>
<td>For example: Intracranial, retroperitoneal, ilioinguinal, and neck bleeds, muscle bleeds with compartment syndrome and bleeds associated with a significant decrease in the hemoglobin level</td>
<td>80</td>
<td>Additional doses of 40 IU/kg can be given.</td>
</tr>
</tbody>
</table>

Perioperative Management

REBINYN® dosing for perioperative management is provided in Table 2.

Table 2: Dosing for Perioperative Management

<table>
<thead>
<tr>
<th>Type of surgical procedure</th>
<th>Recommended dose IU/kg body weight</th>
<th>Additional Information</th>
</tr>
</thead>
<tbody>
<tr>
<td>Minor</td>
<td></td>
<td></td>
</tr>
<tr>
<td>For example: Implanting pumps in subcutaneous tissue, skin biopsies or simple dental procedures</td>
<td>40</td>
<td>A single pre-operative dose should be sufficient. Additional doses can be given if needed.</td>
</tr>
<tr>
<td>Major</td>
<td></td>
<td></td>
</tr>
<tr>
<td>For example: Body cavity is entered, mesenchymal barrier is crossed, fascial plane is opened, organ is removed, normal anatomy is operatively altered</td>
<td>80</td>
<td>Pre-operative dose</td>
</tr>
</tbody>
</table>

2.2 Reconstitution

- Use aseptic technique during the reconstitution procedures.
- If the patient uses more than one vial of REBINYN® per infusion, reconstitute each vial according to the following instructions.

Overview of REBINYN® Package

Vial with REBINYN® powder
- Plastic cap
- Rubber stopper (under plastic cap)
- Pre-filled syringe with histidine diluent
- Syringe tip (under syringe cap)
- Scale
- Thread
- Plunger rod
- Protective paper
- Protective cap
- Spike (under protective paper)

Vial with REBINYN® vial
- Syringe cap

The instructions below serve as a general guideline for reconstitution of REBINYN®. For full instructions, refer to the FDA-approved patient information and instructions for Use.

Reconstitution

1. Bring the REBINYN® vial and the pre-filled diluent syringe to room temperature.
2. Remove the plastic cap from the REBINYN® vial.
3. Wipe the rubber stopper on the vial with a sterile alcohol swab and allow it to dry prior to use.
4. Remove the protective paper from the vial adapter. Do not remove the vial adapter from the protective cap.
5. Place the vial on a flat and solid surface. While holding the protective cap, place the vial adapter over the REBINYN® vial and press down firmly on the protective cap until the vial adapter spike penetrates the rubber stopper.
6. Remove the protective cap from the vial adapter.
7. Grasp the plunger rod as shown in the diagram. Attach the plunger rod to the syringe by holding the plunger rod by the wide top end.
   - Turn the plunger rod clockwise into the rubber plunger inside the pre-filled diluent syringe until resistance is felt.
8. Break off the syringe cap from the pre-filled diluent syringe by snapping the perforation of the cap.
9. Connect the pre-filled diluent syringe to the vial adapter by turning it clockwise until it is secured.
10. Push the plunger rod to slowly inject all the diluent into the vial.
11. Without removing the syringe, gently swirl the REBINYN® vial until all of the powder is dissolved.

12. Administer the REBINYN® solution immediately [see Administration (2.3)]. If not used immediately after reconstitution, store the solution in the vial with the vial adapter and the syringe attached, at room temperature ≤ 86°F (30°C). Do not store for longer than 4 hours.

2.3 Administration

For intravenous infusion only.
- Accidental needle stick with a needle contaminated with blood can transmit infectious viruses including HIV (AIDS) and hepatitis. If a needle stick occurs, obtain immediate medical attention. Place needles in a sharps container after single use.
- Inspect the reconstituted REBINYN® solution visually prior to administration [see Description (11)]. The solution should be clear and have no particles. Do not use if particulate matter or discoloration is observed.
- Do not administer REBINYN® in the same tubing or container with other medicinal products.

1. Invert the REBINYN® vial and slowly draw the solution into the syringe.
2. Detach the syringe from the vial adapter by turning the syringe counterclockwise.
3. Attach the syringe to the luer end of an infusion needle set.
4. Infuse the reconstituted REBINYN® intravenously slowly over 1 to 4 minutes.
5. After infusion, safely dispose of the syringe with the infusion set, the vial with the vial adapter, any unused REBINYN®, and other waste materials.

Caution: The pre-filled diluent syringe is made of glass with an internal tip diameter of 0.037 inches, and is compatible with a standard Luer-lock connector.

Some needless connectors for intravenous catheters are incompatible with the glass diluent syringes (for example, certain connectors with an internal spike, such as Clave® / MicroClave®).
InVisión-Plus®, InVisión-Plus CS®, InVisión-Plus Junior®, Bionector®), and their use can damage the connector and affect acceptable cycling. To administer REBINYN® through incompatible needless connectors, withdraw the reconstituted product into a standard 10 mL sterile Luer-lock plastic syringe. If you encounter any problems with attaching the pre-filled histidine-diluent syringe to any Luer-lock compatible device, please contact Novo Nordisk at (844) 305-4448.

3 DOSAGE FORMS AND STRENGTHS REBINYN® is available as a white to off-white lyophilized powder in single-dose vials containing nominally 500, 1000, or 2000 IU per vial. Each carton of reconstituted vials contains 24 vials. REBINYN® states the actual Factor IX potency in IU/vial. After reconstitution with 4 mL of histidine diluent, the reconstituted solution contains approximately 125, 250 or 500 IU per mL of REBINYN® respectively.

4 CONTRAINDICATIONS REBINYN® is contraindicated in patients who have known hypersensitivity to REBINYN® or its components (including hamster proteins) [see Warnings and Precautions (5.1) and Description (11)].

5 WARNINGS AND PRECAUTIONS

5.1 Hypersensitivity Reactions

Allergic-type hypersensitivity reactions, including anaphylaxis, are possible with REBINYN®. The product may contain traces of hamster proteins which in some patients may cause allergic reactions. Early signs of allergic reactions, which can progress to anaphylaxis, may include angioedema, chest tightness, difficulty breathing, wheezing, urticaria, and itching. Observe patients for signs and symptoms of acute hypersensitivity reactions, particularly during the early phases of exposure to the product. Discontinue use of REBINYN® if allergic- or anaphylactictype reactions occur, and institute appropriate treatment.

5.2 Inhibitors

The formation of inhibitors (neutralizing antibodies) to Factor IX may occur during Factor replacement therapy in the treatment of hemophilia B. Monitor all patients using clinical observations and laboratory tests for the development of inhibitors [see Warnings and Precautions (5.5)].

An association between the development of Factor IX inhibitors and allergic reactions has been reported. Evaluate patients experiencing allergic reactions for the presence of an inhibitor. Patients with Factor IX inhibitors may be at an increased risk of severe allergic reactions with subsequent exposure to Factor IX.

5.3 Thrombotic Events

The use of Factor IX-containing products has been associated with thrombotic complications. Due to the potential risk of thrombotic complications, monitor patients for early signs of thrombotic and consumptive coagulopathy when administering this product to patients with liver disease, post-operatively, to newborn infants, or to patients at risk of thrombosis or disseminated intravascular coagulation (DIC). In each of these situations, the benefit of treatment with REBINYN® should be weighed against the risk of these complications.

5.4 Nephrotic Syndrome

Nephrotic syndrome has been reported following immune tolerance induction therapy with Factor IX products in hemophilia B patients with Factor IX inhibitors, often with a history of allergic reactions to Factor IX. The safety and efficacy of using REBINYN® for immune tolerance induction is not known.

5.5 Monitoring Laboratory Tests

If monitoring of Factor IX activity is performed, use a chromogenic assay. A validated one-stage clotting assay validated for use with REBINYN® [see Dosage and Administration (2.1)].

The one-stage clotting assay results can be significantly affected by the type of activated partial thromboplastin time (aPTT) reagent used, which can result in over- or underestimation of Factor IX activity. Avoid the use of silica-based reagents, as some may overestimate the level of Factor IX. A validated one-stage clotting or chromogenic assay is not available locally, then use of a reference laboratory is recommended.

If bleeding is not controlled with the recommended dose of REBINYN®, or if the expected Factor IX activity levels in plasma are not attained, then perform a Bethesda assay to determine if Factor IX inhibitors are present.

6 ADVERSE REACTIONS

Common adverse reactions (incidence ≥ 1%) reported in clinical trials for REBINYN® were itching and injection site reactions.

6.1 Clinical Trials Experience

Because clinical trials are conducted under widely varying conditions, adverse reaction rates observed in the clinical trials of a drug cannot be directly compared to rates in clinical trials of another drug and may not reflect the rates observed in clinical practice.

During the clinical development program, 115 previously treated male patients received at least one dose of REBINYN® [see Clinical Studies (14)]. A previously treated patient was defined as a subject with a history of at least 150 exposure days to other Factor IX products (adolescent/adult subjects) or 50 exposure days to other Factor IX products (pediatric subjects), and no history of inhibitors. There were 40 (35%) patients who received more than 100 exposure days to Factor IX. A total of 40 patients (35%) were treated for more than 2 years.

Adverse reactions are shown in Table 3.

Table 3: Summary of Adverse Reactions in Previously Treated Patients

<table>
<thead>
<tr>
<th>System Organ Class</th>
<th>Adverse Reaction</th>
<th>Number of subjects (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>General disorders and administration site conditions</td>
<td>Injection site reactions</td>
<td>4 (4)</td>
</tr>
<tr>
<td>Immune system disorders</td>
<td>Hypersensitivity</td>
<td>1 (1)</td>
</tr>
<tr>
<td>Skin and subcutaneous tissue disorders</td>
<td>Itching</td>
<td>3 (3)</td>
</tr>
</tbody>
</table>

6.2 Immunogenicity

Subjects were monitored for inhibitory antibodies to factor IX prior to dosing, on a monthly basis for the first three months, every two months up to one year, every three months for an additional year, and then every 6 months until end of trial. No inhibitors were reported in the clinical trials in previously treated patients.

In an ongoing trial in previously untreated patients, anaphylaxis has occurred with development of a factor IX inhibitor following treatment with REBINYN®. Inhibitor development and anaphylactic reactions are more likely to occur during the early phases of factor IX replacement therapy [see Warnings and Precautions (5.1, 5.2)].

The detection of antibody formation is highly dependent on the sensitivity and specificity of the assay. Additionally, the observed incidence of antibody (including neutralizing antibody) positivity in an assay may be influenced by several factors, including assay methodology, sample handling, timing of sample collection, concomitant medications, and underlying disease.

6.3 Neurologic Considerations

Animals administered repeat doses of REBINYN® showed accumulation of PEG in the choroid plexus [see Animal Toxicology and/or Pharmacology (13.2)]. The potential clinical implications of these animal findings are unknown. No adverse neurologic effects of PEG have been reported in infants, children, and adolescents exposed to REBINYN® during clinical trials. The potential consequences of long term exposure have not been fully evaluated [see Section 8.6].

8 USE IN SPECIFIC POPULATIONS

8.1 Pregnancy

Risk Summary

There are no data with REBINYN® use in pregnant women to determine whether there is a drug-associated risk. Animal reproduction studies have not been conducted with REBINYN®. It is unknown whether REBINYN® can cause fetal harm when administered to a pregnant woman or can affect fertility. REBINYN® should be given to a pregnant woman only if clearly needed. In the U.S. general population, the estimated background risk of major birth defect and miscarriage in clinically recognized pregnancies is 2%-4% and 15%-20%, respectively.

8.2 Lactation

Risk Summary

There is no information regarding the presence of REBINYN® in human milk, the effect on the breastfed infant, and the effects on milk production. The developmental and health benefits of breastfeeding should be considered along with the mother’s clinical need for REBINYN® and any potential adverse effects on the breastfed infant from REBINYN® or from the underlying maternal condition.

8.4 Pediatric Use

Safety and efficacy of REBINYN® were evaluated in 43 previously treated pediatric patients [see Clinical Studies (14)]. Twelve of these (28%) were 1 to 6 years of age; 13 subjects (30%) were 7 to 12 years of age; and 18 subjects (42%) were 13 to 17 years of age. Pharmacokinetic parameters were evaluated for 28 of these subjects who were treated with REBINYN® 40 IU/kg [see Clinical Pharmacology (12.3)].

No difference in the safety profile of REBINYN® was observed between previously treated pediatric subjects and adult subjects. Body weight-adjusted clearance was higher for pediatric patients than for adult subjects. Fixed doses were studied in the clinical trials and no dose adjustment was required for pediatric subjects.

Twenty-eight of the forty-three previously treated pediatric subjects (1 to 17 years old) were treated with REBINYN® for 137 bleeding episodes. Results are provided in Table 4.

Table 4: Efficacy of treatment of bleeding episodes in pediatric patients by age

<table>
<thead>
<tr>
<th>New bleeding episodes</th>
<th>≤ 6 years</th>
<th>6-12 years</th>
<th>13-17 years</th>
</tr>
</thead>
<tbody>
<tr>
<td>Number of injections</td>
<td>n=31</td>
<td>n=45</td>
<td>n=58</td>
</tr>
<tr>
<td>to treat a bleeding</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>episode</td>
<td>1 injection</td>
<td>2 injections</td>
<td>2 injections</td>
</tr>
<tr>
<td></td>
<td>9 (28%)</td>
<td>9 (19%)</td>
<td>9 (15%)</td>
</tr>
<tr>
<td></td>
<td>27 (87%)</td>
<td>4 (13%)</td>
<td>12 (13%)</td>
</tr>
<tr>
<td></td>
<td>78 (82%)</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

*Efficacy assessment was missing for one bleeding episode.

**Efficacy assessment [Response] was assessed according to a four-point scale using:

Excellent: Abrupt pain relief and/or clear improvement in objective signs of bleeding within 8 hours after a single injection;

Good: Noticeable pain relief and/or improvement in signs of bleeding within 8 hours after a single injection;

Moderate: Probable or slight beneficial effect within the first 8 hours after the first injection but requiring more than one injection within 8 hours;

Poor: No improvement, or worsening of symptoms within 8 hours after the second of two injections.

Animals administered repeat doses of REBINYN® showed accumulation of PEG in the choroid plexus [see Animal Toxicology and/or Pharmacology (13.2)]. The potential clinical implications of these animal findings are unknown. No adverse neurologic effects of PEG have been reported in adults exposed to REBINYN® during clinical trials, however use in older adults with baseline cognitive dysfunction has not been fully evaluated [see Section 6.3].

8.5 Geriatric Use

Clinical studies of REBINYN® did not include sufficient numbers of subjects age 65 and over to determine whether or not they respond differently than younger subjects.

Animals administered repeat doses of REBINYN® showed accumulation of PEG in the choroid plexus [see Animal Toxicology and/or Pharmacology (13.2)]. The potential clinical implications of these animal findings are unknown. No adverse neurologic effects of PEG have been reported in adults exposed to REBINYN® during clinical trials, however use in older adults with baseline cognitive dysfunction has not been fully evaluated [see Section 6.3].

11 DESCRIPTION

REBINYN® is a sterile, non-pyrogenic, white to off-white lyophilized powder for reconstitution with the provided histidine diluent for intravenous infusion. After reconstitution, the solution appears as a colorless to light yellow, transparent, colorless, aqueous solution. REBINYN® contains no preservatives. It should be stored at room temperature (15° to 30°C) protected from light.

12 CLINICAL PHARMACOLOGY

12.1 Mechanism of Action

REBINYN® contains Factor IX (rFIX), a recombinant human coagulation factor IX produced using mammalian cell expression technology in Chinese hamster ovary cells. The rFIX protein in REBINYN® consists of a gamma-carboxylated (Gla) domain, two EGF-like (epidermal growth factor) domains, an activation peptide (which is
cleaved off upon activation), and a protease domain. Once activated, the resulting FIXa has structural and functional properties similar to those of endogenously activated Factor IX, the primary amine acid sequence in REBINYN® is identical to the Thr148 allelic form of human-derived Factor IX and consists of 415 amino acids. The average molecular weight of REBINYN® is approximately 98 kDa and the molecular weight of the protein moiety alone is 56 kDa. The normal specific activity of REBINYN® is 152 IU/mg protein.

REBINYN® is produced by recombinant DNA technology in Chinese Hamster Ovary (CHO) cells. No additives of human or animal origin are used in the cell culture, purification, conjugation, or formulation of REBINYN®. The FIX protein is purified by a series of chromatographic steps, including an affinity chromatography step using a monoclonal antibody (produced in CHO cells), to selectively isolate FIX from the cell culture medium. The production process includes two dedicated viral clearance steps, namely a deterrent treatment step for inactivation and a 20 nm filtration step for removal of viruses. The conjugation of the PEG-group is done by an enzymatic reaction during the purification process, followed by final purification of REBINYN®.

12 CLINICAL PHARMACOLOGY

12.1 Mechanism of Action

Patients with hemophilia B are deficient in coagulation Factor IX, which is required for effective hemostasis. Treatment with REBINYN® temporarily replaces the missing coagulation Factor IX. The Factor IX in REBINYN® is conjugated to a 40-kDa polyethylene glycol molecule, which slows down its removal from the blood circulation.

12.2 Pharmacodynamics

The administration of REBINYN® increases plasma levels of Factor IX and can temporarily correct the coagulation defect in hemophilia B patients, as reflected by a decrease in aPTT.

12.3 Pharmacokinetics

Pharmacokinetic (PK) parameters of REBINYN® were evaluated in previously treated subjects, including a subset of subjects in the adult/adolescent trial and all subjects in the main phase of the pediatric trial (see Clinical Studies (14)). PK samples were collected prior to dosing and at multiple time points up to 168 hours after dosing. The analysis of plasma samples was conducted using the one-stage clotting assay.

Steady state pharmacokinetic parameters for adolescents and adults following once-weekly prophylactic treatment of REBINYN® 40 IU/kg are shown in Table 5.

Table 5: Steady-state pharmacokinetic parameters of REBINYN® (40 IU/kg) in adolescents and adults (geometric mean (CV))

<table>
<thead>
<tr>
<th>PK Parameter</th>
<th>5 ≤ years (N=6)</th>
<th>6-12 years (N=13)</th>
<th>13-17 years (N=13)</th>
<th>≥ 18 years (N=9)</th>
<th>18 years (N=20)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Half-life (hours)</td>
<td>1.6 (0.7)</td>
<td>1.1 (0.5)</td>
<td>0.8 (0.4)</td>
<td>0.8 (0.3)</td>
<td>0.8 (0.3)</td>
</tr>
<tr>
<td>Percentage Recovery&lt;sub&gt;95%&lt;/sub&gt; (IU/dl)</td>
<td>0.17 (0.2)</td>
<td>0.17 (0.4)</td>
<td>0.17 (0.4)</td>
<td>0.17 (0.5)</td>
<td>0.17 (0.5)</td>
</tr>
<tr>
<td>AUC&lt;sub&gt;0-168&lt;/sub&gt; (IU/hour/dL)</td>
<td>4617 (14)</td>
<td>5618 (19)</td>
<td>7986 (35)</td>
<td>9063 (16)</td>
<td></td>
</tr>
<tr>
<td>Clearance (mL/hour)</td>
<td>0.8 (1.30)</td>
<td>0.6 (2.19)</td>
<td>0.5 (3.04)</td>
<td>0.4 (1.47)</td>
<td></td>
</tr>
<tr>
<td>Mean residence time (hours)</td>
<td>95.4 (15)</td>
<td>105.1 (24)</td>
<td>124.2 (24.4)</td>
<td>115.5 (21.8)</td>
<td></td>
</tr>
<tr>
<td>Vss (mL/kg)</td>
<td>72.3 (14)</td>
<td>68.3 (21.7)</td>
<td>58.6 (7.8)</td>
<td>47.0 (15.9)</td>
<td></td>
</tr>
<tr>
<td>Factor IX activity 168 h after dosing (%)</td>
<td>8.4 (1.63)</td>
<td>10.9 (1.89)</td>
<td>14.6 (5.68)</td>
<td>16.8 (30.6)</td>
<td></td>
</tr>
</tbody>
</table>

Abbreviations: AUC<sub>0-168</sub> = area under plasma concentration-time curve; Vss = volume of distribution at steady state; CV = coefficient of variation.

The mean steady state pre-dose trough levels and post-dose peak levels across the clinical trials for all previously treated subjects are shown in Table 6.

Table 6: Factor IX peak and trough levels of REBINYN® (40 IU/kg) by age at steady state

<table>
<thead>
<tr>
<th>Age (years)</th>
<th>N=12</th>
<th>N=20</th>
</tr>
</thead>
<tbody>
<tr>
<td>5-6</td>
<td>65.5</td>
<td>60.6</td>
</tr>
<tr>
<td>7-12</td>
<td>71.4</td>
<td>70.7</td>
</tr>
<tr>
<td>13-17</td>
<td>82.8</td>
<td>19.7</td>
</tr>
<tr>
<td>≥ 18</td>
<td>97.9</td>
<td>23.9</td>
</tr>
</tbody>
</table>

* Factor IX activity from samples collected at clinical site visits just prior to administration of next weekly dose
** Individual geometric mean trough values

Single-dose pharmacokinetic parameters of REBINYN® in children, adolescents and adults are listed in Table 7.

Table 7: Single Dose Pharmacokinetic Parameters of REBINYN® (40 IU/kg) in children, adolescents and adults (geometric mean (CV))

<table>
<thead>
<tr>
<th>PK Parameter</th>
<th>5 ≤ years (N=13)</th>
<th>6-12 years (N=13)</th>
<th>13-17 years (N=13)</th>
<th>≥ 18 years (N=6)</th>
<th>18 years (N=6)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Half-life (hours)</td>
<td>96.9 (15.8)</td>
<td>76.2 (25.5)</td>
<td>89.4 (24.1)</td>
<td>83.0 (22.5)</td>
<td></td>
</tr>
<tr>
<td>Incremental Recovery&lt;sub&gt;95%&lt;/sub&gt; (IU/dl)</td>
<td>1.51 (7.31)</td>
<td>1.50 (16.2)</td>
<td>1.96 (14.7)</td>
<td>2.34 (11.3)</td>
<td></td>
</tr>
<tr>
<td>AUC&lt;sub&gt;0-168&lt;/sub&gt; (IU/hour/dL)</td>
<td>4617 (14)</td>
<td>5618 (19)</td>
<td>7986 (35)</td>
<td>9063 (16)</td>
<td></td>
</tr>
<tr>
<td>Clearance (mL/hour)</td>
<td>0.8 (1.30)</td>
<td>0.6 (2.19)</td>
<td>0.5 (3.04)</td>
<td>0.4 (1.47)</td>
<td></td>
</tr>
</tbody>
</table>

Abbreviations: AUC<sub>0-168</sub> = area under plasma concentration-time curve; Vss = volume of distribution at steady state; CV = coefficient of variation.

The efficacy evaluation included 105 subjects: 62 adults (18 to 65 years old), 24 adolescents (13 to 17 years old), and 20 children (1 to 12 years old).

10.9 (18.9)

8 hours

158.1 (9.6)

1.92 (19.6)

0.4 (14.7)

0.8 (13.0)

13-17 years

521 (87%) 

4617 (14)

89.4 (24.1)

83.0 (22.5)

21.3; 42.2

18.6; 34.6

23.7

82.8

97.9

60.6; 70.7

66.3; 70.7

70.7; 169.5

87.7; 109.3

19.9; 28.2

26.0; 33.0

9.2; 24.5

8.3; 28.3

18.6; 34.6

21.3; 42.2

112%, 131% and 134%. The 48 hours measurement reflects a

The efficacy evaluation included 105 subjects: 62 adults (18 to 65 years old), 24 adolescents (13 to 17 years old), and 20 children (1 to 12 years old).

10.9 (18.9)

8 hours

158.1 (9.6)

1.92 (19.6)

0.4 (14.7)

0.8 (13.0)

13-17 years

521 (87%) 

4617 (14)

89.4 (24.1)

83.0 (22.5)

21.3; 42.2

18.6; 34.6

23.7

82.8

97.9

60.6; 70.7

66.3; 70.7

70.7; 169.5

87.7; 109.3

19.9; 28.2

26.0; 33.0

9.2; 24.5

8.3; 28.3

18.6; 34.6

21.3; 42.2

112%, 131% and 134%. The 48 hours measurement reflects a
Rebinyn® (Coagulation Factor IX (Recombinant), GlycoPEGylated)

(584x763)

Rebinyn® (Coagulation Factor IX (Recombinant), GlycoPEGylated)

• Advise patients to contact their healthcare provider for further treatment and/or assessment if they experience a lack of a clinical response to Factor IX therapy, as in some cases this may be a manifestation of an inhibitor.

• Advise patients to contact their healthcare provider if they experience any thrombotic complications.

• Advise patients to follow the recommendations regarding proper sharps disposal provided in the FDA-approved Instructions for Use.

16 HOW SUPPLIED/STORAGE AND HANDLING

How Supplied

• REBINYN® is supplied in packages comprised of a single-dose vial containing nominally 500, 1000, or 2000 IU of Factor IX potency; a MixPro® pre-filled diluent syringe containing 10 mM histidine solution (1.6 mg/mL), and a sterile vial adapter with 25 micrometer filter, which serves as a needleless reconstitution device.

• The actual Factor IX potency in IU is stated on each REBINYN® carton and vial.

Table 10: REBINYN® Presentations

<table>
<thead>
<tr>
<th>Presentation (Nominal Product Strength; IU)</th>
<th>Cap Color</th>
<th>Carton NDC Number</th>
<th>Components</th>
</tr>
</thead>
<tbody>
<tr>
<td>500</td>
<td>Red</td>
<td>NDC 0169 7905 01</td>
<td>• REBINYN® in single-dose vial [NDC 0169 7955 11]</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>• Pre-filled histidine in syringe, 4 mL [NDC 0169 7009 98]</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>• Vial adapter</td>
</tr>
<tr>
<td>1000</td>
<td>Green</td>
<td>NDC 0169 7901 01</td>
<td>• REBINYN® in single-dose vial [NDC 0169 7911 11]</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>• Pre-filled histidine in syringe, 4 mL [NDC 0169 7009 98]</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>• Vial adapter</td>
</tr>
<tr>
<td>2000</td>
<td>Yellow</td>
<td>NDC 0169 7902 01</td>
<td>• REBINYN® in single-dose vial [NDC 0169 7922 11]</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>• Pre-filled histidine in syringe, 4 mL [NDC 0169 7009 98]</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>• Vial adapter</td>
</tr>
</tbody>
</table>

• The REBINYN® vials are made of glass, closed with a chlorobutyl rubber stopper (not made with natural rubber latex), and sealed with an aluminum cap.

• The pre-filled diluent syringes are made of glass, with a siliconised bromobutyl rubber plunger (not made with rubber latex).

• The closed vials and pre-filled diluent syringes are equipped with a tamper-evident snap-off cap which is made of polypropylene.

Storage and Handling

• Store REBINYN® in the original package in order to protect from light.

• Store REBINYN® under refrigeration at a temperature of 36°F-46°F (2°C-8°C) for up to 24 months from the date of manufacture until the expiration date stated on the label.

• REBINYN® may be stored at room temperature not to exceed 86°F (30°C) for up to 6 months within the 24-month time period. Record the date when the product was removed from the refrigerator in the space provided on the outer carton. The total time of storage at room temperature should not exceed 6 months. Do not return the product to the refrigerator.

• Do not use REBINYN® after the end of the 6-month period at room temperature storage, or after the expiration date stated on the vial, whichever occurs earlier.

• Do not freeze REBINYN®.

• Use REBINYN® within 4 hours after reconstitution when stored at room temperature. Store the reconstituted product in the vial.

• Discard any unused reconstituted product.

17 PATIENT COUNSELING INFORMATION

• Advise patients to read the FDA-approved patient labeling (Patient Information and Instructions for Use).

• Inform patients of the early signs of hypersensitivity reactions including rash, hives, itching, facial swelling, tightness of the chest and wheezing. Advise patients to discontinue use of the product and contact their healthcare provider if these symptoms occur.

• Advise patients to contact their healthcare provider for further treatment and/or assessment if they experience a lack of a clinical response to Factor IX therapy, as in some cases this may be a manifestation of an inhibitor.

• Advise patients to contact their healthcare provider if they experience any thrombotic complications.

• Advise patients to follow the recommendations regarding proper sharps disposal provided in the FDA-approved Instructions for Use.
Patient Product Information

REBINYN® (reh-bè-nine)
Coagulation Factor IX (Recombinant), GlycoPEGylated

Read the Patient Product Information and the Instructions For Use that come with REBINYN® before you start taking this medicine and each time you get a refill. There may be new information.

This Patient Product Information does not take the place of talking with your healthcare provider about your medical condition or treatment. If you have questions about REBINYN® after reading this information, ask your healthcare provider.

What is the most important information I need to know about REBINYN®?

Do not attempt to do an infusion yourself unless you have been taught how by your healthcare provider or hemophilia treatment center.

You must carefully follow your healthcare provider’s instructions regarding the dose and schedule for infusing REBINYN® so that your treatment will work best for you.

What is REBINYN®?

REBINYN® is an injectable medicine used to replace clotting Factor IX that is missing in patients with hemophilia B. Hemophilia B is an inherited bleeding disorder in all age groups that prevents blood from clotting normally. REBINYN® is used to treat and control bleeding in people with hemophilia B.

Your healthcare provider may give you REBINYN® when you have surgery.

Who should not use REBINYN®?

You should not use REBINYN® if you

- are allergic to Factor IX or any of the other ingredients of REBINYN®
- if you are allergic to hamster proteins

If you are not sure, talk to your healthcare provider before using this medicine.

Tell your healthcare provider if you are pregnant or nursing because REBINYN® might not be right for you.

What should I tell my healthcare provider before I use REBINYN®?

You should tell your healthcare provider if you

- Have or have had any medical conditions.
- Take any medicines, including non-prescription medicines and dietary supplements.
- Are nursing.
- Are pregnant or planning to become pregnant.
- Have been told that you have inhibitors to Factor IX.

How should I use REBINYN®?

Treatment with REBINYN® should be started by a healthcare provider who is experienced in the care of patients with hemophilia B.

REBINYN® is given as an infusion into the vein. You may infuse REBINYN® at a hemophilia treatment center, at your healthcare provider’s office or in your home. You should be trained on how to do infusions by your hemophilia treatment center or healthcare provider. Many people with hemophilia B learn to infuse the medicine by themselves or with the help of a family member.

Your healthcare provider will tell you how much REBINYN® to use based on your weight, the severity of your hemophilia B, and where you are bleeding. Your dose will be calculated in international units, IU.

Call your healthcare provider right away if your bleeding does not stop after taking REBINYN®.

If your bleeding is not adequately controlled, it could be due to the development of Factor IX inhibitors. This should be checked by your healthcare provider. You might need a higher dose of REBINYN® or even a different product to control bleeding. Do not increase the total dose of REBINYN® to control your bleeding without consulting your healthcare provider.

Use in children

REBINYN® can be used in children. Your healthcare provider will decide the dose of REBINYN® you will receive.

If you forget to use REBINYN®

If you forget a dose, infuse the missed dose when you discover the mistake. Do not infuse a double dose to make up for a forgotten dose. Proceed with the next infusions as scheduled and continue as advised by your healthcare provider.

If you stop using REBINYN®

Do not stop using REBINYN® without consulting your healthcare provider.

If you have any further questions on the use of this product, ask your healthcare provider.

What if I take too much REBINYN®?

Always take REBINYN® exactly as your healthcare provider has told you. You should check with your healthcare provider if you are not sure. If you infuse more REBINYN® than recommended, tell your healthcare provider as soon as possible.

What are the possible side effects of REBINYN®?

Common Side Effects Include:

- swelling, pain, rash or redness at the location of infusion
- itching

Other Possible Side Effects:

- You could have an allergic reaction to coagulation Factor IX products. Call your healthcare provider right away or get emergency treatment right away if you get any of the following signs of an allergic reaction: hives, chest tightness, wheezing, difficulty breathing, and/or swelling of the face.

- Your body can also make antibodies called “inhibitors” against REBINYN®, which may stop REBINYN® from working properly. Your healthcare provider may need to test your blood for inhibitors from time to time.

- You may be at an increased risk of forming blood clots in your body, especially if you have risk factors for developing blood clots. Call your healthcare provider if you have chest pain, difficulty breathing, leg tenderness or swelling.

These are not all of the possible side effects from REBINYN®. Ask your healthcare provider for more information. You are encouraged to report side effects to FDA at 1-800-FDA-1088. Tell your healthcare provider about any side effect that bothers you or that does not go away.

What are the REBINYN® dosage strengths?

REBINYN® comes in three different dosage strengths. The actual number of international units (IU) of Factor IX in the vial will be imprinted on the label and on the box. The three different strengths are as follows:

<table>
<thead>
<tr>
<th>Cap Color Indicator</th>
<th>Nominal Strength</th>
</tr>
</thead>
<tbody>
<tr>
<td>Red</td>
<td>500 IU per vial</td>
</tr>
<tr>
<td>Green</td>
<td>1000 IU per vial</td>
</tr>
<tr>
<td>Yellow</td>
<td>2000 IU per vial</td>
</tr>
</tbody>
</table>

Always check the actual dosage strength printed on the label to make sure you are using the strength prescribed by your healthcare provider.

How should I store REBINYN®?

Prior to Reconstitution (mixing the dry powder in the vial with the diluent):

Store in original package in order to protect from light. Do not freeze REBINYN®.

REBINYN® vials can be stored in the refrigerator (36–46°F [2°-8°C]) for up to 24 months until the expiration date, or at room temperature (up to 86°F [30°C]) for a single period not more than 6 months.

If you choose to store REBINYN® at room temperature:

- Note the date that the product is removed from refrigeration on the box.

- The total time of storage at room temperature should not be more than 6 months. Do not return the product to the refrigerator.

- Do not use after 6 months from this date or the expiration date listed on the vial, whichever is earlier.

Do not use this medicine after the expiration date which is on the outer carton and the vial. The expiration date refers to the last day of that month.

After Reconstitution:

The reconstituted (the final product once the powder is mixed with the diluent) REBINYN® should appear clear without visible particles.

The reconstituted REBINYN® should be used immediately. If you cannot use the reconstituted REBINYN® immediately, it should be used within 4 hours when stored at or below 86°F (30°C). Store the reconstituted product in the vial.

Keep this medicine out of the sight and out of reach of children.

What else should I know about REBINYN® and hemophilia B?

Medicines are sometimes prescribed for purposes other than those listed here. Do not use REBINYN® for a condition for which it is not prescribed. Do not share REBINYN® with other people, even if they have the same symptoms that you have.

For more information about REBINYN®, please call Novo Nordisk at 1-844-REB-INYN.

Revised: 05/2017

REBINYN® is a trademark of Novo Nordisk A/S.


Manufactured by: Novo Nordisk A/S
Novo Allé
DK-2880 Bagsvaerd, Denmark

For information about REBINYN® contact: Novo Nordisk Inc.
800 Scudders Mill Road
Plainsboro, NJ 08536, USA

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Instructions on how to use REBINYN® MixPro®
READ THESE INSTRUCTIONS CAREFULLY BEFORE USING REBINYN®.

REBINYN® is supplied as a powder. Before infusion (administration) it must be mixed (reconstituted) with the liquid diluent supplied in the syringe. The liquid diluent is a histidine solution. The mixed REBINYN® must be infused into your vein (intravenous infusion). The equipment in this package is designed to mix and infuse REBINYN®.

You will also need an infusion set (tubing and butterfly needle), sterile alcohol swabs, gauze pads, and bandages.

⚠️ Don’t use the equipment without proper training from your doctor or nurse. Always wash your hands and ensure that the area around you is clean.

When you prepare and infuse medication directly into the veins, it is important to use a clean and germ free (aseptic) technique. Improper technique can introduce germs that can infect the blood.

Don’t open the equipment until you are ready to use it. Don’t use the equipment if it has been dropped, or if it is damaged. Use a new package instead.
Don’t use the equipment if it is expired. Use a new package instead. The expiration date is printed on the outer carton.
Don’t use the equipment if you suspect it is contaminated. Use a new package instead.
Don’t dispose of any of the items until after you have infused the mixed solution.

The equipment is for single use only. Single-dose container. Discard unused portion.

Content
The package contains:
• Vial with REBINYN® powder
• Vial adapter
• Pre-filled syringe with diluent
• Plunger rod (placed under the syringe)

Vial with REBINYN® powder
Plastic cap
Rubber stopper (under plastic cap)
Pre-filled syringe with histidine diluent
Syringe tip (under syringe cap)
Spike (under protective paper)
Pre-filled syringe
Rubber Plunger
Thread
Wide top end
Scale
Syringe cap

1. Prepare the vial and the syringe
• Take out the number of REBINYN® packages you need.
• Check the expiry date.
• Check the name, strength and color of the package, to make sure it contains the correct product.
• Wash your hands and dry them properly using a clean towel or air dry.
• Take the vial, the vial adapter and the pre-filled syringe out of the carton. Leave the plunger rod untouched in the carton.
• Bring the vial and the pre-filled syringe to room temperature. You can do this by holding them in your hands until they feel as warm as your hands.

2. Attach the vial adapter
• Remove the protective paper from the vial adapter.
• Don’t take the vial adapter out of the protective cap with your fingers. If you touch the spike on the vial adapter germs from your fingers can be transferred.
• If the protective paper is not fully sealed or if it is broken, don’t use the vial adapter.

3. Attach the plunger rod and the syringe
• Grasp the plunger rod by the wide top end and take it out of the carton. Don’t touch the sides or the thread of the plunger rod. If you touch the sides or the thread germs from your fingers can be transferred.
• Immediately connect the plunger rod to the syringe by turning it clockwise into the rubber plunger inside the pre-filled syringe until resistance is felt.

4. Mix the powder with the diluent
• Hold the pre-filled syringe slightly tilted with the vial pointing downwards.
• Push the plunger rod to inject all the diluent into the vial.

• Keep the plunger rod pressed down and swirl the vial gently until all the powder is dissolved. Don’t shake the vial as this will cause foaming.
• Check the mixed solution. It must be clear and colorless. If you notice visible particles or discoloration, don’t use it. Use a new package instead.

REBINYN® is recommended to be used immediately after it is mixed.

If you cannot use the mixed REBINYN® solution immediately, it should be used within 4 hours when stored at room temperature at or below 86°F (30°C). Store the reconstituted product in the vial.
Do not freeze mixed REBINYN® solution or store it in syringes.

Keep mixed REBINYN® solution out of direct light.

If your dose requires more than one vial, repeat step A to J with additional vials, vial adapters and pre-filled syringes until you have reached your required dose.

• Keep the plunger rod pushed completely in.
• Turn the syringe with the vial upside down.
• Stop pushing the plunger rod and let it move back on its own while the mixed solution fills the syringe.
• Pull the plunger rod slightly downwards to draw the mixed solution into the syringe.
• In case you only need part of the entire vial, use the scale on the syringe to see how much mixed solution you withdraw, as instructed by your doctor or nurse.
• While holding the vial upside down, tap the syringe gently to let any air bubbles rise to the top.
• Push the plunger rod slowly until all air bubbles are gone.

• Unscrew the vial adapter with the vial.
• Don’t touch the syringe tip. If you touch the syringe tip germs from your fingers can be transferred.
Caution: The pre-filled diluent syringe is made of glass with an internal tip diameter of 0.037 inches, and is compatible with a standard Luer-lock connector.

Some needleless connectors for intravenous catheters are incompatible with the glass diluent syringes (for example, certain connectors with an internal spike, such as Clave®, MicroClave®, InVision-Plus®). The use of these needleless connectors can damage the connector and affect administration.

To administer REBINYN® through incompatible needleless connectors, withdraw reconstituted product into a standard 10 mL sterile Luer-lock plastic syringe.

If you have encountered any problems with attaching the pre-filled histidine diluent syringe to any Luer-lock compatible device, please contact Novo Nordisk at (844) 303-4448.

5. Infuse the mixed solution
REBINYN® is now ready to infuse into your vein.
- Do not mix REBINYN® with any other intravenous infusions or medications.
- Infuse the mixed solution slowly over 1 to 4 minutes as instructed by your doctor or nurse.

Infusing the solution via a central venous access device (CVAD) such as a central venous catheter or subcutaneous port:
- Use a clean and germ free (aseptic) technique. Follow the instructions for proper use for your connector and central venous access device in consultation with your doctor or nurse.
- Infusing into a CVAD may require using a sterile 10 mL plastic syringe for withdrawal of the mixed solution and infusion.
- If necessary, use 0.9% Sodium Chloride Injection, USP to flush the CVAD line before or after REBINYN® infusion.

The peel-off label found on the REBINYN® vial can be used to record the lot number.

Disposal
- After infusion, safely dispose of all unused REBINYN® solution, the syringe with the infusion set, the vial with the vial adapter, and other waste materials in an appropriate container for throwing away medical waste. Don’t throw it out with the ordinary household trash.

Don’t disassemble the vial and vial adapter before disposal.
Don’t reuse the equipment.

Important information
Contact your healthcare provider or local hemophilia treatment center if you experience any problems.
For full Prescribing Information please read the other insert included in this package.