

## ARA Theranostics

# PATIENT INFORMATION LU-177 PSMA TREATMENT

INNOVATIVE THERAPY FOR PROSTATE CANCER PATIENTS

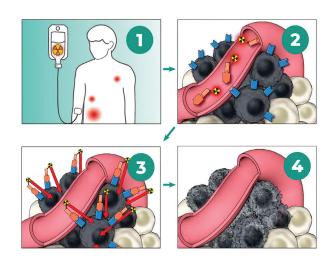
#### PROSTATE-SPECIFIC MEMBRANE ANTIGEN (PSMA) THERAPY

The FDA approved Lu-177 PSMA-617 in March of 2022 for treatment in certain men with metastatic prostate cancer. Known by the brand name Pluvicto™, Lu-177 PSMA-617 is the first of a new class of PSMA-based radiopharmaceuticals that use selective targeting to eliminate prostate cancer cells. In doing so, they provide a treatment option for men whose prostate cancer has progressed despite having received traditional therapies.

#### **HOW DOES PLUVICTO WORK?**

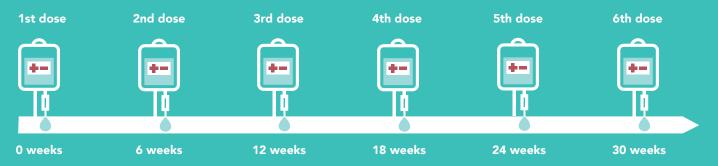
Pluvicto™ has a strong attraction to prostate cancer cells, but does not affect other healthy prostate cells. After being given by intravenous injection, it circulates through the body locating and attaching itself to prostate cancer cells wherever they are — even pockets of cancer that are not visible to the naked eye or conventional imaging. It then eliminates those cells with minute amounts of radiation, leaving the surrounding tissues virtually untouched.

1) Pluvicto is infused through an IV. 2) Pluvicto seeks out prostate cells (in black) anywhere they have metastasized in the body. 3) Pluvicto attaches to the prostate cancer and delivers a microscopic amount of radiation to the cancer cells. 4) The radiation kills the cancer cells, leaving surrounding healthy tissue (in white) unharmed.



### PSMA (Pluvicto) treatment schedule

Pluvicto™ is administered by infusion, which is an IV (intravenous) medication given over 30 minutes. The infusion and associated care take approximately 2 to 3 hours to complete on each infusion day. It is usually given in 6 separate infusions, 6 weeks apart. Depending on your reaction to the treatment, the schedule may be adjusted.











#### WHO IS A CANDIDATE FOR PLUVICTO?

Men with metastatic, castrate-resistant prostate carcinoma (mCRPC) are potential candidates for **Pluvicto™**. In other words, these are men whose prostate cancer has progressed despite prior therapies such as surgical resection, radiation therapy, androgen receptor pathway inhibition, and/or taxane-based chemotherapy.

PET/CT imaging with PSMA is required to confirm that the metastases will accumulate PSMA, and therefore respond to  $Pluvicto^{TM}$ .

Guidelines may change in the future. Discuss **Pluvicto**™ with your cancer care provider and please contact our ARA theranostics coordinator to see if you are a candidate. Direct your inquiries to Alex DiFonzo at (512) 519-3456, ext. 2351, or the theranostics team at theranostics@ausrad.com.

#### SIDE EFFECTS OF PLUVICTO

Overall side effects are mild, including dry mouth, nausea, vomiting, fatigue, loss of appetite, weight loss, change in bowel habits, urinary tract infection, and abdominal pain. These are minimal and will be closely monitored and managed by your health care team. If you have serious side effects, your cancer care provider may decide to change, pause, or stop the treatment.

#### IS PLUVICTO SAFE?

Pluvicto™ has been determined by the FDA to be a safe treatment for prostate cancer. Due to the specific targeting of the treatment, tumor cells receive a high dose of radiation to eliminate them, but surrounding healthy cells are minimally impacted by the treatment and can survive. Any medicine that doesn't go to the tumor cells is filtered out through the kidneys and then eliminated in the urine. You will receive instructions on what to do at home to minimize radiation exposure to others.

#### MANAGING POST-TREATMENT RADIATION

Most of the radiation from the treatment leaves your body through the urine within three days after the radiopharmaceutical infusion. During that period, you will need to follow safety guidelines to protect others from radiation exposure. The theranostics team will review the protocols with you before you leave the ARA Theranostics Center.

#### A NOTE ON RADIATION EXPOSURE

**Pluvicto**<sup>™</sup> will contribute to your long-term radiation exposure, which can raise your lifetime risk of developing a second cancer. However, **Pluvicto**<sup>™</sup> alone has not been proven to be a strong cause of cancer, and the benefits of treatment are determined to outweigh the risks.



#### Is Pluvicto covered by Medicare and insurance?

**Pluvicto™** is currently covered by Medicare for some situations, but not others. Uniform coverage for all situations is expected by the end of the year, but coverage is expanding quickly so please check with our theranostics team for the latest information. In the meantime, **Pluvicto™** is available for patients on a self-pay basis.



#### How do I schedule?

A referral from your cancer care provider is required to schedule your treatment. If you have any questions about the treatment or scheduling the treatment, please talk to one of our theranostics coordinators at (512) 519-3456, ext. 2351. You can also reach us at theranostics@ausrad.com.

#### **ABOUT THE ARA THERANOSTICS TEAM**

The ARA theranostics team includes six molecular radiologists who are all double boarded in diagnostic radiology and nuclear medicine, plus highly-trained nuclear medicine technologists and a medical support group that works with insurance and scheduling. Our team partners with each patient's cancer care provider to ascertain and monitor the treatment that is best for each patient.

#### THE ARA THERANOSTICS CENTER

The Theranostics Center at ARA has been designed at our Midtown location to comfortably and safely administer the radiopharmaceuticals that are used in theranostics treatments. The treatments typically last from 2 to 6 hours depending on the radiopharmaceutical being used and the Center is made to be accommodating for patients during their stay. Wi-Fi and television are provided in the infusion room. Patients may also bring a book, computer, or other quiet activity to occupy their time. Snacks and drinks are provided to patients during the treatment period. Lunch is also offered to patients whose treatments last most of the day.



ARA Theranostics

EXPERTS IN MOLECULAR IMAGING & THERAPY

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