Servier Pharmaceuticals invites you to attend an educational program.

VORANIGO® (vorasidenib) Tablets: the First and Only mIDH1/2 Inhibitor for Patients With Grade 2 m*IDH* Glioma

Program Information

Monday, July 20, 2026 05:30 - 07:00 PM CDT

Please plan to arrive ~30 minutes early for sign in to ensure the presentation can start on time.

Las Brisas
4701 112Th Street
Lubbock, TX 79424

Faculty Presenter

Mariana Nieves , APRN

Neuro-Oncology Advanced Practice Registered Nurse

Chicago, IL

Program Objectives:

- Review key disease state information and unmet needs in m*IDH* glioma, including epidemiology, the role of *IDH1* and *IDH2* mutations in glioma, and the importance of molecular profiling for treatment planning
- Review the mechanism of action and the clinical efficacy and safety profile that supports the use of VORANIGO in patients with grade 2 astrocytoma or oligodendroglioma with a susceptible *IDH1/2* mutation

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Or contact your Servier Program Host:

Jolene Pecille (505) 319-6043 jolene.pecille@servier.com

Attendee and Reporting Policy
This non-CME accredited educational program is intended for US healthcare professionals who treat or are reasonably expected to treat patients within the FDA-approved patient population for the Company product and who have a bona fide educational need to receive the Speaker Program information. Friends, significant others, family members, and other guests may not attend this program. The Company will not pay for or provide alcohol at this program. The value of any meals or items provided to program participants may be reported in accordance with applicable federal and state laws. Healthcare professionals from certain states or institutions that restrict healthcare professionals from accepting meals or other transfers of value from pharmaceutical companies must adhere to all restrictions and requirements imposed by the law or their institution.

INDICATION

VORANIGO (40 mg tablets) is indicated for the treatment of adult and pediatric patients 12 years and older with Grade 2 astrocytoma or oligodendroglioma with a susceptible isocitrate dehydrogenase-1 (IDH1) or isocitrate dehydrogenase-2 (IDH2) mutation, as detected by an FDA-approved test, following surgery including biopsy, sub-total resection, or gross total resection.

IMPORTANT SAFETY INFORMATION

WARNINGS AND PRECAUTIONS

Hepatotoxicity: VORANIGO can cause hepatic transaminase elevations, which can lead to hepatic failure, hepatic necrosis, and autoimmune hepatitis. Monitor liver laboratory tests (AST, ALT, GGT, total bilirubin, and alkaline phosphatase) prior to the start of VORANIGO, every 2 weeks during the first 2 months of treatment, then monthly for the first 2 years of treatment, and as clinically indicated, with more frequent testing in patients who develop transaminase elevations. Reduce the dose, withhold, or permanently discontinue VORANIGO based on severity.

FDA, US Food and Drug Administration; m*IDH*, mutant isocitrate dehydrogenase.

Please see additional Important Safety Information continued on the next page and accompanying Full Prescribing Information.

Voranigo® vorasidenib tablets

IMPORTANT SAFETY INFORMATION (cont'd)

WARNINGS AND PRECAUTIONS (cont'd)

Embryo-Fetal Toxicity: Based on findings from animal studies, VORANIGO can cause fetal harm when administered to a pregnant woman. Advise pregnant women and females of reproductive potential of the potential risk to a fetus. Advise females of reproductive potential to use effective nonhormonal contraception during treatment with VORANIGO and for 3 months after the last dose, since VORANIGO can render some hormonal contraceptives ineffective. Advise male patients with female partners of reproductive potential to use effective contraception during treatment with VORANIGO and for 3 months after the last dose.

ADVERSE REACTIONS

The most common (≥15%) adverse reactions included fatigue, headache, COVID-19, musculoskeletal pain, diarrhea, nausea, and seizure. Grade 3 or 4 (≥2%) laboratory abnormalities were ALT increased, AST increased, GGT increased, and neutrophils decreased.

DRUG INTERACTIONS

Avoid concomitant use of VORANIGO with strong and moderate CYP1A2 inhibitors. Avoid concomitant use with moderate CYP1A2 inducers and smoking tobacco. Avoid concomitant use with CYP3A substrates, where a minimal concentration change can reduce efficacy. If concomitant use of hormonal contraception cannot be avoided, use nonhormonal contraception methods.

LACTATION

Advise women not to breastfeed during VORANIGO treatment and for 2 months after the last dose.

IMPAIRED FERTILITY

VORANIGO may impair fertility of females and males of reproductive potential.

Please see accompanying Full Prescribing Information.

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Voranigo®
vorasidenib tablets