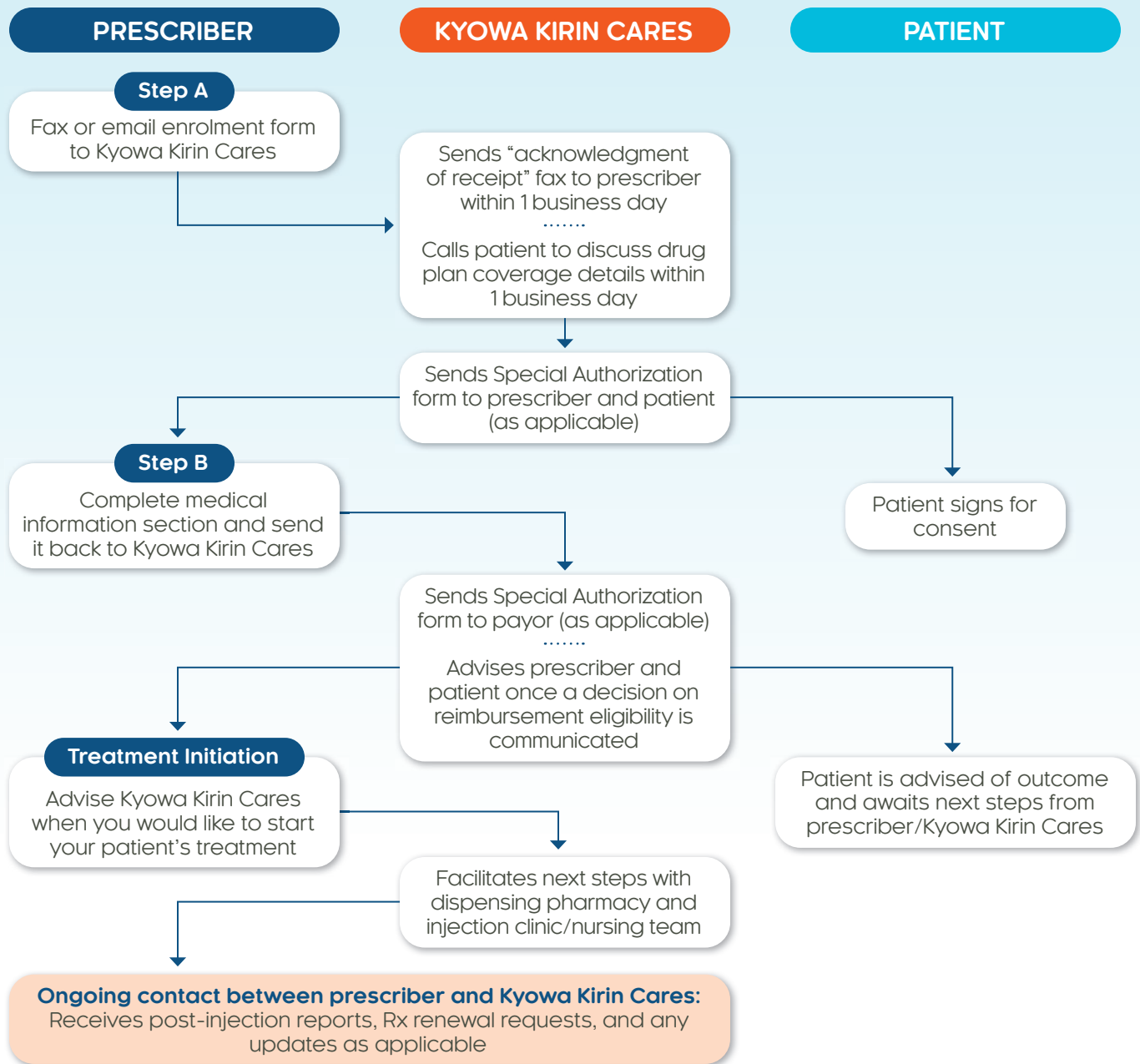


The Kyowa Kirin Cares™ Patient Support Program for your patients taking PrCRYSVITA®

Kyowa Kirin is committed to patients with rare diseases, which is why we created the Kyowa Kirin Cares Patient Support Program—a suite of services designed to help your eligible patient(s) along their CRYSVITA® (burosumab injection) treatment journey.

Kyowa Kirin Cares Program Flow



CRYSVITA (burosumab injection) is indicated for the treatment of:

- X-linked hypophosphatemia (XLH) in adult and pediatric patients 6 months of age and older.
- FGF23-related hypophosphatemia in tumour-induced osteomalacia (TIO) associated with tumours that cannot be curatively resected or localized in adult patients.



Getting your patient started with Kyowa Kirin Cares for CRYSVITA



Visit [CRYSVITAHCP.ca](https://www.kyowakirin.com/CRYSVITA-HCP) for the enrolment form and more information

Initiating enrolment

- Ensure your patient has provided consent (verbal or written); if verbal, please indicate on the enrolment form
- Ensure you have signed the enrolment form as the prescriber
- Fax or email to 1-888-355-1217 or KKCares@Innomar-Strategies.com

Medical information paperwork required

- Complete prescriber/physician information section of the Special Authorization form
 - See "Coverage Form Checklist for Pediatric and Adult Patients" for initial requests and renewals
- Send back relevant paperwork to Kyowa Kirin Cares for submission

Coverage form checklist for CRYSVITA in pediatric and adult patients

When completing Special Authorization forms, ensure that the following information is included, if required:

- ✓ Has the patient ever received any treatment for their medical condition (for which CRYSVITA coverage is being requested)?
- ✓ What previous treatment(s) have been tried? Reason for stopping them?
- ✓ Dosage/dosing regimen being requested for CRYSVITA
- ✓ Indication requested
- ✓ Is CRYSVITA being prescribed according to the Health Canada-authorized indication?
- ✓ Medical rationale for requesting CRYSVITA
- ✓ **For pediatric patients (≥6 months and <18 years of age) with XLH**
 - Is their current (within 3 months) fasting serum phosphorus below the normal range for their age? (lab report required)
 - Are the patient's epiphyses not yet closed?
 - Does the patient have radiographic evidence of rickets, with a rickets severity score (RSS) total score of two or greater?
 - Was a genetic test completed? (not always required)
- ✓ **For adult patients with XLH**
 - Was a genetic test performed to confirm a *PHEX* gene variant in the patient? If not, was serum intact FGF23 level confirmed to be high or inappropriately normal?
 - Is the patient's eGFR 60 mL/min or greater? If not, is it greater than 45 mL/min with confirmation that the renal insufficiency is not due to ectopic mineralization (e.g., nephrocalcinosis)?
 - Description of the patient's clinical presentation/physical findings
 - List of prior therapies tried and clinical outcomes of these therapies
- ✓ **For TIO**
 - Specify that the tumour cannot be curatively resected or localized
 - Is their current (within 3 months) fasting serum phosphorus below the normal range for the age? (lab report required)
 - Is their current (within 3 months) corrected serum calcium level below normal range? (lab report required)
- ✓ **For special authorization renewals (XLH or TIO)**
 - Current (within 3 months) serum phosphorus (lab report required)
 - Has the patient had a positive clinical response? (if yes, please list responses)

Ongoing contact after therapy initiation

Once your patient has initiated therapy, Kyowa Kirin Cares will contact you for:

- Prescription renewals
- Post-injection reports (if applicable)
- Special Authorization renewals

Please consult the CRYSVITA Product Monograph at <https://www.kkna.kyowakirin.com/wp-content/uploads/Crysvita-PM-English.pdf> for important information relating to contraindications, warnings and precautions, adverse reactions, drug interactions, dosing and administration, and conditions of clinical use. The Product Monograph is also available by calling us at 1-866-590-9508.

eGFR=estimated glomerular filtration rate; FGF23=fibroblast growth factor 23.



If you have any questions, call us at 1-833-KYOWA-CA (1-833-596-9222).



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COMM-CA-CRY-0122 March 2026

KYOWA KIRIN

