

V122I PATIENTS ARE AT HIGHER RISK OF hATTR PROGRESSION¹

Identifying patients with the V122I variant is urgent

2.6 years

is the **median survival time** for V122I patients, compared to 5.8 years for patients with other variants, following an hATTR diagnosis.²⁻⁴

PREVALENCE^{1,5-9}

V122I (V142I) is one of 120 inherited gene variants associated with hATTR. It's the **most common variant** in the United States, and **~4% of African Americans** are carriers.⁵⁻⁸

Disease Progression

The V122I variant is also associated with more aggressive disease progression compared with other variants or wild-type ATTR, with patients at higher risk of the following^{1,9}:

- Heart failure
- Cardiovascular death
- All-cause mortality

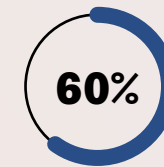


V122I PATIENTS OFTEN PRESENT WITH MIXED PHENOTYPE^{3,6,10,11}

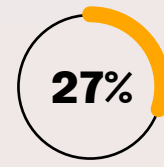
In patients with the V122I variant, cardiomyopathy may coincide with or follow polyneuropathy.¹⁰



Cardiac complications^{3,11}



Sensory neuropathy^{3,11}



Gastrointestinal symptoms^{3,11}



Renal impairment⁶



Motor neuropathy^{3,11}

Early diagnosis and intervention are critical to slow disease progression.¹²

CONFIRMING A DIAGNOSIS OF hATTR

Establish a diagnosis in 3 steps^{1,3,13}

1

Rule out AL amyloidosis with simple monoclonal light-chain assays



2

Detect amyloid deposition in myocardial tissue with nuclear scintigraphy (eg, ^{99m}Tc-PYP) or cardiac biopsy



3

Once ATTR-CM is confirmed, **use genetic testing** to determine if it is hereditary

Use genetic testing to detect TTR variants and distinguish hATTR from wtATTR^{1,14}

Following a diagnosis, genetic testing can accurately distinguish hATTR from wtATTR, with current techniques **detecting over 99% of TTR variants.**^{1,14} Clinical testing kits can be ordered at no cost through the Alnylam Act® Program.

ALNYLAM ACT®—US GENETIC TESTING AND COUNSELING PROGRAM

The Alnylam Act® program was created to provide access to genetic testing and counseling to patients as a way to help people make more informed decisions about their health.

- While Alnylam provides financial support for this program, tests and services are performed by independent third parties
- Healthcare professionals must confirm that patients meet certain criteria to use the program
- Alnylam receives de-identified patient data from this program, but at no time does Alnylam receive patient-identifiable information. Alnylam may use healthcare professional contact information for research purposes
- Healthcare professionals or patients who use this program have no obligation to recommend, purchase, order, prescribe, promote, administer, use, or support any Alnylam product
- No patients, healthcare professionals, or payers, including government payers, are billed for this program

Click here to order a genetic test and learn more about Alnylam Act®.

AL=amyloid light chain; ^{99m}Tc-PYP=technetium-^{99m} pyrophosphate; ATTR-CM=cardiomyopathy of transthyretin-mediated amyloidosis; TTR=transthyretin; wtATTR=wild-type transthyretin-mediated amyloidosis.

Diagnosis is based on the independent medical judgment of the healthcare professional.

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