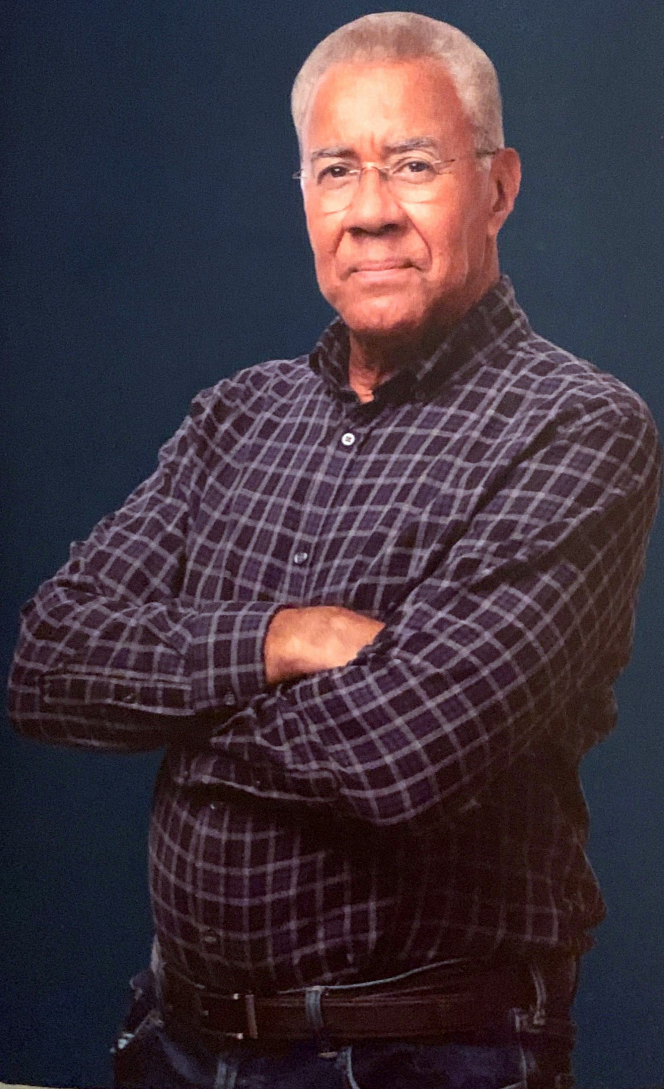


HOW OSTEOPOROSIS CAN MAKE A **MAN** SHORTER

AND WHAT YOU CAN DO NEXT





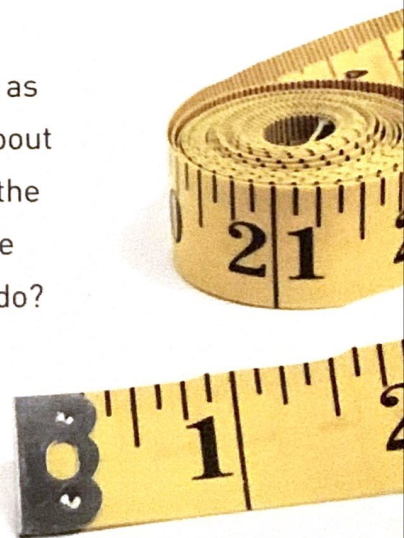
**COULD OSTEOPOROSIS
BONE HEALTH?**

**ASK YOUR DOCTOR TO
CHECK YOUR HEIGHT.
IF IT'S LOWER, YOU COULD
HAVE **MALE OSTEOPOROSIS**.**



**BE DECREASING YOUR
READ THIS.**

Some men could lose height as they age. But if you've lost about an inch of height or more in the past year, you may have male osteoporosis. What can you do? Keep reading to find out.



NOT ONLY WOMEN GET OSTEOPOROSIS AND ARE AT HIGH RISK FOR FRACTURE

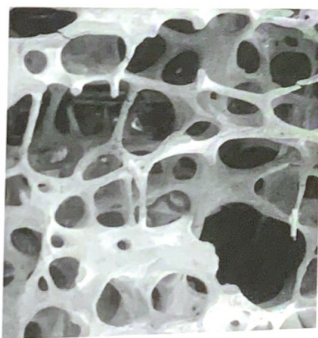
Male osteoporosis is actually the same destructive bone disease that many women get. It causes bones to become thin and brittle.

As a result, your bones become weaker and more fragile. And yes, it can result in height loss by damaging the bones in your spine.

You can see below, the difference between normal bone and osteoporotic bone, and how the bone thins with osteoporosis.

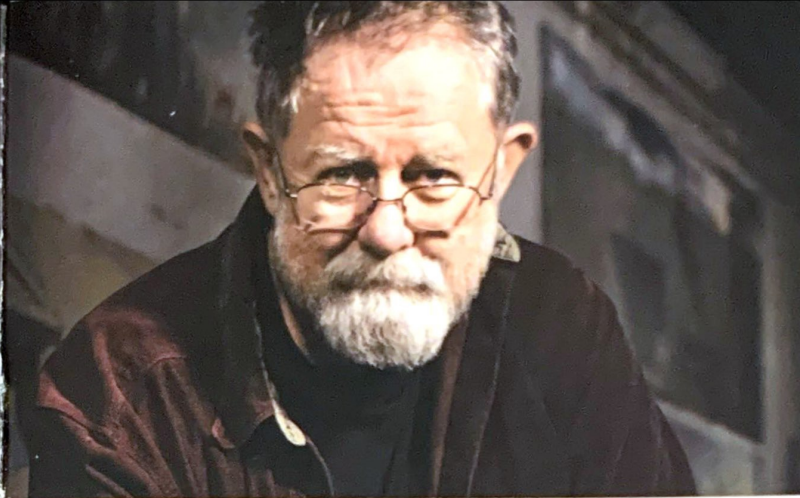


Normal bone



Bone with osteoporosis

Source: Bone images courtesy of David W. Dempster, Ph.D., 2000.
Reproduced with permission.



THE TRUTH ABOUT OSTEOPOROSIS IN MEN



12 MILLION MEN

in the US are estimated
to be at risk of developing
osteoporosis.

Osteoporosis is underdiagnosed in women, but that is even more true in men. Men often don't find out they have it until they experience fracture.

That's why it's important to ask your doctor about male osteoporosis—and to learn more about a treatment option on the next page that may be right for you.

For treatment to increase bone mass in men with osteoporosis at high risk for fracture.

GET TOUGH ON OSTEOPOROSIS WITH PROLIA®

 **prolia**
(denosumab) injection



Prolia® is a prescription medicine used to increase bone mass in men with osteoporosis who:

- are at high risk for fracture

Why consider Prolia® to help strengthen your bones?



Prolia® is proven to increase bone mineral density (BMD) in men with osteoporosis



Prolia® can help protect and strengthen bones with 1 shot every 6 months

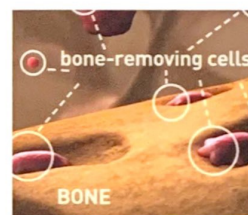
Important Safety Information

You should take calcium and vitamin D as your doctor tells you to while you receive Prolia®.

After your treatment with Prolia® is stopped, your risk for breaking bones, including bones in your spine, is increased. Do not stop taking Prolia® without first talking with your doctor.

HOW PROLIA® WORKS TO TAKE ON OSTEOPOROSIS

Prolia® can help strengthen bones by stopping cells that damage them:

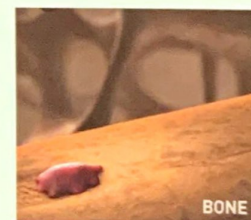


Without Prolia®

When you have osteoporosis, there is an excess of bone-removing cells.

With Prolia®

Prolia® helps stop bone-removing cells from getting to the bone and causing bone loss.



TAKE THIS BONE QUIZ

Don't wait until you experience back pain, height loss, or some other symptom to ask about osteoporosis. Bring this brochure with you into your doctor's office. Then, answer the questions on the right to help you understand if you have a high risk of developing osteoporosis.

If you're not sure how to answer some of the questions, your doctor should be able to help.

IF YOU ANSWER "YES"

to any of these, ask your doctor about a bone scan and if Prolia® is an option for you.

Who should not take Prolia®?

Do not take Prolia® if you: have low blood calcium or are allergic to denosumab or any ingredients in Prolia®.

Please see additional Important Safety Information on pages 12-13.



QUICK QUESTIONS

1. Have you broken a bone since turning 50?
☐ Yes ☐ No
2. Do you have a family history (male or female) of osteoporosis?
☐ Yes ☐ No
3. Have you experienced any height loss?
☐ Yes ☐ No
4. Do you have low bone mass (also called bone density)?
☐ Yes ☐ No
5. Do you have low testosterone or estrogen levels?
☐ Yes ☐ No

HERE'S A SCORE YOU SHOULD BE FOLLOWING

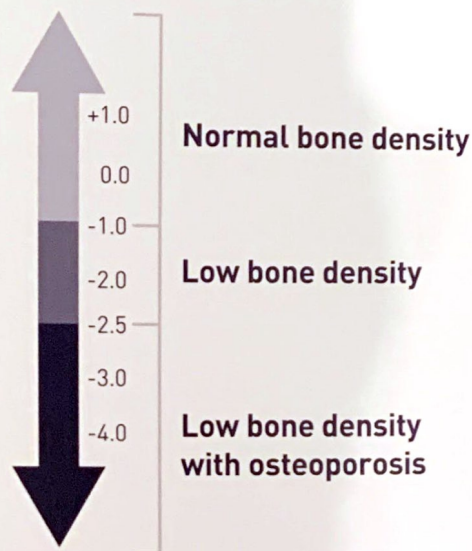


Ask your doctor about getting a bone density (DXA) scan. It's an x-ray test that is fast, painless, and accurate, and it will help confirm if you have osteoporosis.

Medicare covers DXA scans for men who are at high risk for fracture.

Then, your doctor will use something called a T-score to help determine the health of your bones.

KNOW YOUR T-SCORE



A T-score of -2.5 or lower indicates you have osteoporosis.

If you have osteoporosis, ask your doctor if Prolia® can help strengthen your bones.

Prolia® has been approved to help men
**STRENGTHEN THEIR
BONES SINCE 2012.**

Important Safety Information

Prolia® can cause serious side effects. Possible serious side effects include serious allergic reactions, low blood calcium, severe jaw bone problems, unusual thigh bone fractures, increased risk of broken bones, including broken bones in the spine after stopping Prolia®, serious infections, skin problems, and severe bone, joint or muscle pain.

Please see additional
Important Safety Information
on pages 12-13.



Important Safety Information

Do not take Prolia® (denosumab) injection if you: have low blood calcium or are allergic to denosumab or any ingredients in Prolia®.

What is the most important information I should know about Prolia®?

If you receive Prolia®, you should not receive XGEVA®. Prolia® contains the same medicine as XGEVA® (denosumab).

Prolia® can cause serious side effects:

Serious allergic reactions have happened in people who take Prolia®. Call your doctor or go to your nearest emergency room right away if you have any symptoms of a serious allergic reaction, including low blood pressure (hypotension); trouble breathing; throat tightness; swelling of your face, lips, or tongue; rash; itching; or hives.

Low blood calcium (hypocalcemia). Prolia® may lower the calcium levels in your blood. If you have low blood calcium, it may get worse during treatment. Your low blood calcium must be treated before you receive Prolia®.

Take calcium and vitamin D as your doctor tells you to help prevent low blood calcium.

Severe jaw bone problems (osteonecrosis) may occur. Your doctor should examine your mouth before you start Prolia® and may tell you to see your dentist. It is important for you to practice good mouth care during treatment with Prolia®.

Unusual thigh bone fractures. Some people have developed unusual fractures in their thigh bone. Symptoms of a fracture include new or unusual pain in your hip, groin, or thigh.

Increased risk of broken bones, including broken bones in the spine, after stopping Prolia®. After your treatment with Prolia® is stopped, your risk for breaking bones, including bones in your spine, is increased. Your risk for having more than 1 broken bone in your spine is increased if you have already had a broken bone in your spine. Do not stop taking Prolia® without first talking with your doctor. If your Prolia® treatment is stopped, talk to your doctor about other medicine that you can take.

Serious infections in your skin, lower stomach area (abdomen), bladder, or ear may happen. Inflammation of the inner lining of the heart (endocarditis) due to an infection may also happen more often in people who take Prolia®. You may need to go to the hospital for treatment.

Prolia® is a medicine that may affect the ability of your body to fight infections. People who have weakened immune systems or take medicines that affect the immune system may have an increased risk for developing serious infections.

Skin problems such as inflammation of your skin (dermatitis), rash, and eczema have been reported.

Bone, joint, or muscle pain. Some people who take Prolia® develop severe bone, joint, or muscle pain.

Before taking Prolia®, tell your doctor about all of your medical conditions, including if you:

- Take the medicine XGEVA® (denosumab)
- Have low blood calcium
- Cannot take daily calcium and vitamin D
- Had parathyroid or thyroid surgery (glands located in your neck)
- Have been told you have trouble absorbing minerals in your stomach or intestines (malabsorption syndrome)
- Have kidney problems or are on kidney dialysis
- Plan to have dental surgery or teeth removed

What are the possible side effects of Prolia®?

It is not known if the use of Prolia® over a long period of time may cause slow healing of broken bones. The most common side effects of Prolia® in men with osteoporosis are back pain, joint pain, and common cold (runny nose or sore throat).

These are not all the possible side effects of Prolia®. Call your doctor for medical advice about side effects.

You are encouraged to report negative side effects of prescription drugs to the FDA. Visit www.fda.gov/medwatch, or call 1-800-FDA-1088.

Please see accompanying Prolia® full Prescribing Information, including Medication Guide.

Ask your doctor if you have osteoporosis and if Prolia® may be right for you.

Prolia® is a prescription medicine used to increase bone mass in men with osteoporosis who:

- are at high risk for fracture

Do not take Prolia® if you: have low blood calcium or are allergic to denosumab or any ingredients in Prolia®.

Please see Important Safety Information on pages 12-13 and accompanying Prolia® full Prescribing Information, including Medication Guide.



For more information, visit prolia.com or call 1-888-426-6360.