



You are cordially invited to join a presentation on:  
**Anabolic Therapy for the Treatment of Osteoporosis**

**Presented In Person by**  
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North Texas Preferred Health Partners  
Plano, TX

**Program Objectives**  
To focus on osteoporosis treatment that rebuilds bone.

**Date and Location**  
Tuesday, April 28, 2026  
6:30 PM CT  
At  
**STK Steakhouse**  
**2000 McKinney Ave, Suite 100**  
**Dallas, TX 75201**

**RSVP Information**  
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## INDICATIONS AND IMPORTANT SAFETY INFORMATION

### INDICATIONS AND USAGE

TYMLOS is indicated for the:

- treatment of postmenopausal women with osteoporosis at high risk for fracture (defined as a history of osteoporotic fracture or multiple risk factors for fracture), or patients who have failed or are intolerant to other available osteoporosis therapy. In postmenopausal women with osteoporosis, TYMLOS reduces the risk of vertebral fractures and nonvertebral fractures.
- treatment to increase bone density in men with osteoporosis at high risk for fracture (defined as a history of osteoporotic fracture or multiple risk factors for fracture), or patients who have failed or are intolerant to other available osteoporosis therapy.

### IMPORTANT SAFETY INFORMATION

**Contraindications:** TYMLOS is contraindicated in patients with a history of systemic hypersensitivity to abaloparatide or to any component of the product formulation. Reactions have included anaphylaxis, dyspnea, and urticaria.

**Please see additional Important Safety Information throughout.**



**Risk of Osteosarcoma:** It is unknown whether TYMLOS will cause osteosarcoma in humans. Osteosarcoma has been reported in patients treated with a PTH-analog in the post marketing setting; however, an increased risk of osteosarcoma has not been observed in observational studies in humans. There are limited data assessing the risk of osteosarcoma beyond 2 years of TYMLOS use. Avoid use of TYMLOS for patients at an increased baseline risk for osteosarcoma including patients with open epiphysis (pediatric and young adult patients); metabolic bone diseases other than osteoporosis, including Paget's disease of the bone; bone metastases or a history of skeletal malignancies; prior external beam or implant radiation therapy involving the skeleton; or hereditary disorders predisposing to osteosarcoma.

**Orthostatic Hypotension:** Orthostatic hypotension may occur with TYMLOS, typically within 4 hours of injection. Associated symptoms may include dizziness, palpitations, tachycardia, or nausea, and may resolve by having the patient lie down. For the first several doses, TYMLOS should be administered where the patient can sit or lie down if necessary.

**Hypercalcemia:** TYMLOS may cause hypercalcemia. TYMLOS is not recommended in patients with pre-existing hypercalcemia or in patients who have an underlying hypercalcemic disorder, such as primary hyperparathyroidism, because of the possibility of exacerbating hypercalcemia.

**Hypercalciuria and Urolithiasis:** TYMLOS may cause hypercalciuria. It is unknown whether TYMLOS may exacerbate urolithiasis in patients with active or a history of urolithiasis. If active urolithiasis or pre-existing hypercalciuria is suspected, measurement of urinary calcium excretion should be considered.

**Pregnancy and Lactation:** TYMLOS is not indicated for use in females of reproductive potential.

#### **Adverse Reactions:**

- The most common adverse reactions (incidence  $\geq 2\%$ ) reported with TYMLOS in postmenopausal women with osteoporosis are hypercalciuria (11%), dizziness (10%), nausea (8%), headache (8%), palpitations (5%), fatigue (3%), upper abdominal pain (3%), and vertigo (2%).
- The most common adverse reactions (incidence  $\geq 2\%$ ) reported with TYMLOS in men with osteoporosis are injection site erythema (13%), dizziness (9%), arthralgia (7%), injection site swelling (7%), injection site pain (6%), contusion (3%), abdominal distention (3%), diarrhea (3%), nausea (3%), abdominal pain (2%), and bone pain (2%).

#### **Please see the accompanying full Prescribing Information.**

This program is sponsored by Radius Health, Inc. This invitation is nontransferable. Attendance at this program is limited to health care professionals (HCPs) involved in the care or treatment of patients with osteoporosis. Further, the following specialties are excluded from participation: Adolescence, Pediatrics, Dentistry, Psychiatry, and Veterinary Services. Guests or spouses who are not HCPs involved in the care or treatment of patients with osteoporosis may not attend. No CME credits are offered for this program. This program may include the provision of a modest meal. Radius Health does not offer such a meal to HCPs whose institutions prohibit such hospitality, nor does Radius Health offer a meal where federal or state laws (e.g., Vermont, Minnesota and New Jersey) limit an HCP's ability to accept such a meal. Accordingly, please consult your legal or ethics advisor regarding any applicable limitation before attending this program. If you are licensed to practice in a state where meals are either prohibited and/or restricted and you accept a meal, you understand that you will be required to reimburse Radius Health for the cost of this meal. Please note that Radius Health is required to report the value of a provided meal pursuant to applicable federal and/or state laws.