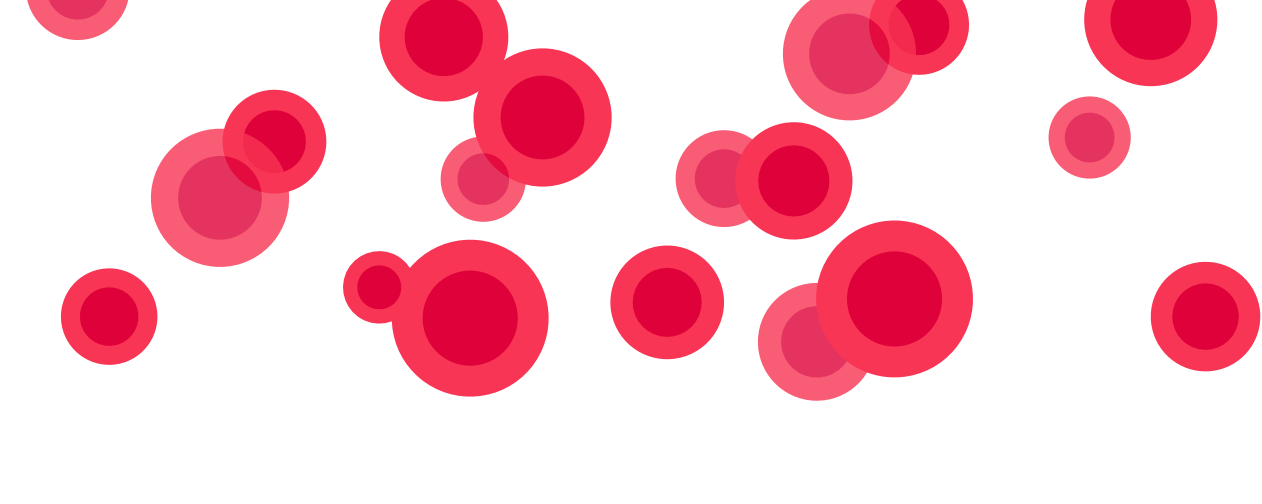


KEY FACTS ABOUT POLYCYTHEMIA VERA (PV)

(polly-sigh-THEE-me-ah-VAIR-Ah)

WHAT IS PV?

PV is a rare, chronic blood disease in which a person's body makes too many red blood cells, and may also result in too many white blood cells or platelets.



Too many red blood cells can cause the blood to thicken. This can lead to blood clots that block the flow of blood through the arteries and veins. A heart attack or stroke can result.

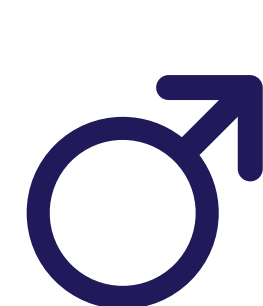
PV IS:

- A specific type of blood cancer called a myeloproliferative neoplasm, or MPN
- A serious, chronic condition
- A progressive disease that develops slowly and will likely get worse over time

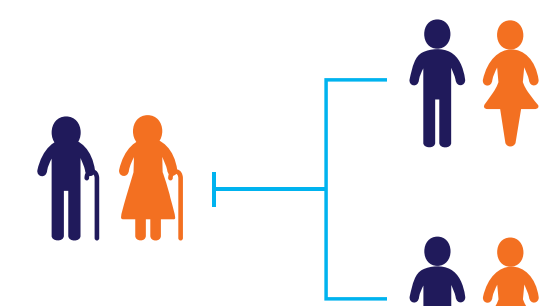
WHO IS AT RISK FOR POLYCYTHEMIA VERA?



Age—Being over age 60

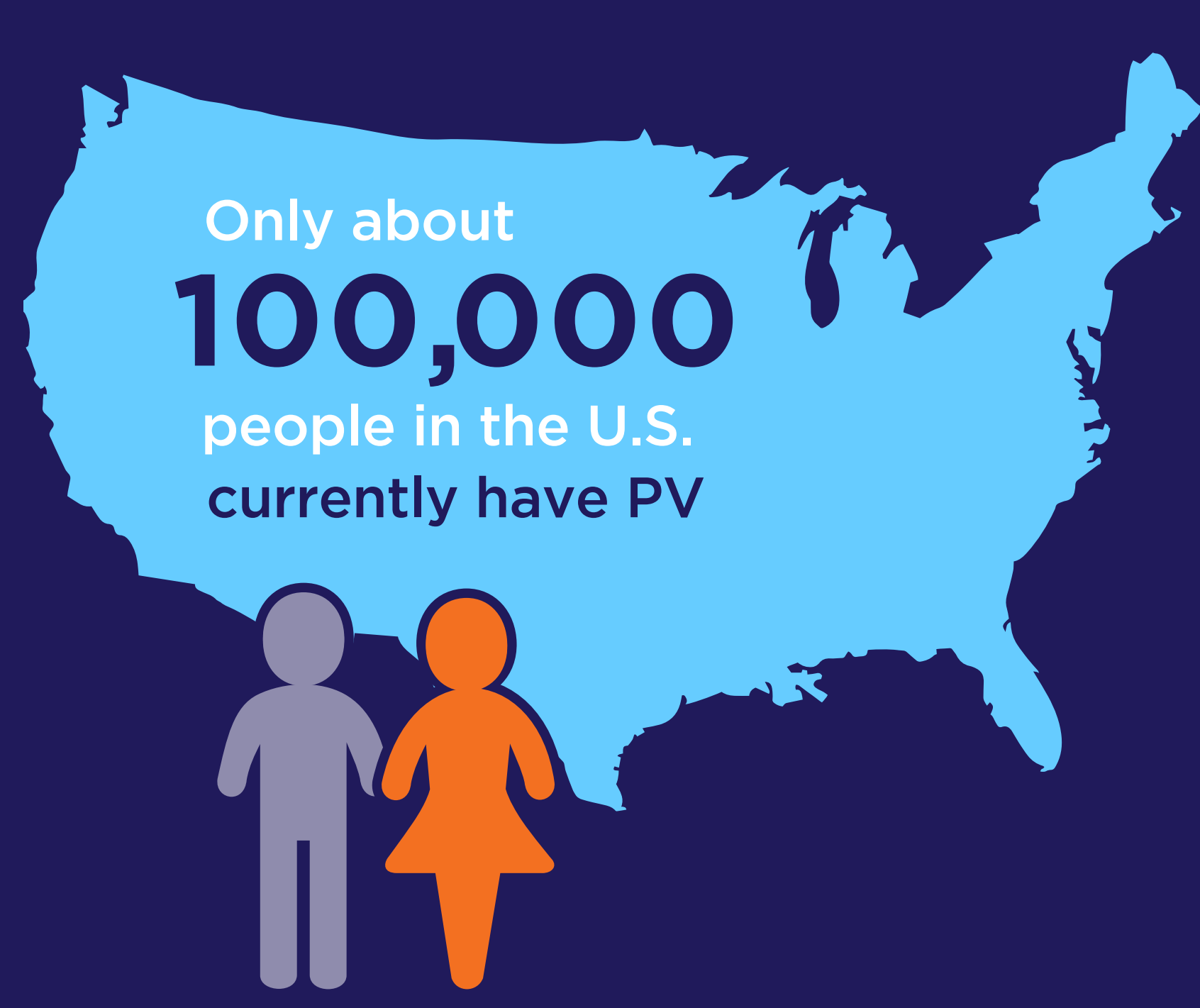


Being male—Men are at slightly higher risk for PV than women



Family history—PV is not considered a genetic disease; however, having close family members with PV can increase a person's chance of having it

HOW COMMON IS PV?



200,000

The National Institutes of Health (NIH) defines a rare disease as one that affects fewer than 200,000 individuals in the United States. To date, the NIH has identified about 7,000 rare diseases.

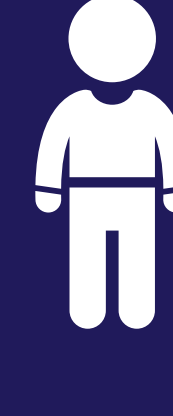
AGE:

0-19

20-39

40-59

60+



PV is uncommon in people under age 30

PV is most common in people older than 60, although it may occur at any age



WHAT CAUSES PV?

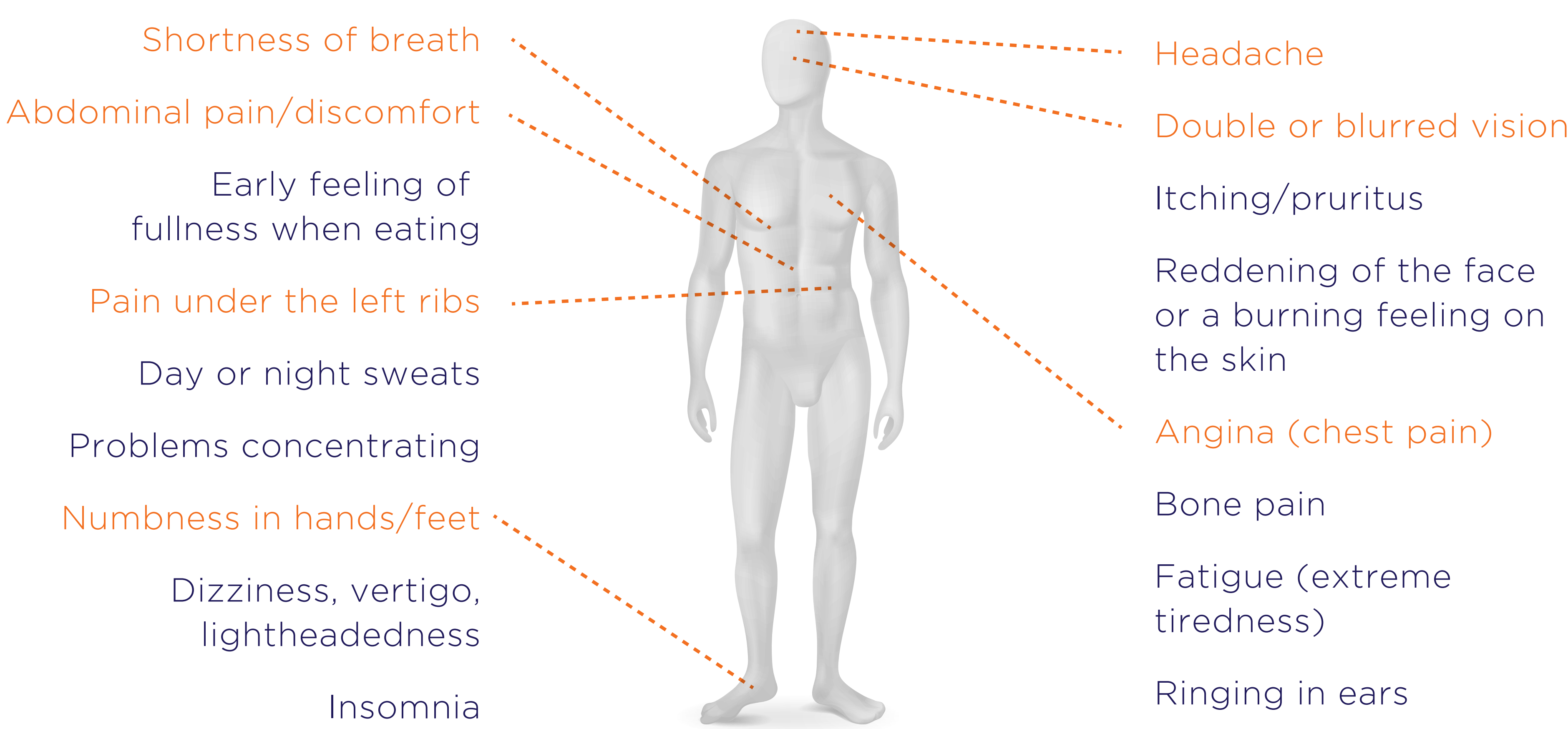


The main cause of PV is a genetic mutation—or change—expressed in a bone marrow cell in the body which results in an overproduction of blood cells

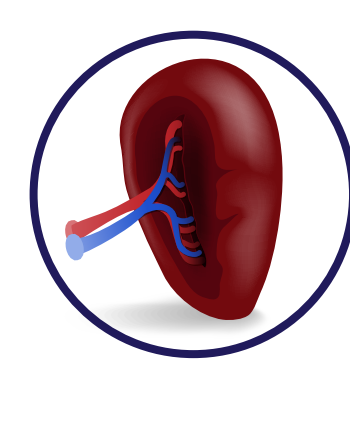
JAK2 MUTATION

95% of people with PV have a specific mutation of the *JAK2* (Janus kinase 2) gene

WHAT ARE THE SIGNS AND SYMPTOMS OF PV?



FROM **30%-40%** of PV patients present with an enlarged spleen



Some symptoms are caused by thickening of the blood, which results in a lack of oxygen to parts of the body

WHAT OTHER HEALTH PROBLEMS CAN PV CAUSE?

- Blood clots leading to heart attack or stroke
- Stomach ulcers, gout, or kidney stones
- Angina (chest pain)
- Progression to leukemia

ABOUT **10% OF PEOPLE** may progress to myelofibrosis, or MF, over 10 years

PV → **MF**

HOW IS PV DIAGNOSED?

With PV, early diagnosis is important. If your doctor suspects you have PV, a blood test can aid in the diagnosis

ABOUT **30%**

OF PV CASES ARE DIAGNOSED AFTER A CARDIOVASCULAR EVENT SUCH AS A HEART ATTACK OR STROKE

WHAT IS THE PROGNOSIS?

Although not curable, PV can be managed effectively over the course of the disease

In people with PV, the median survival approaches or exceeds 20 years.

Each person's risk factors should be evaluated individually

HOW IS PV MONITORED?

Healthcare Professionals monitor PV with periodic blood tests. They also track the symptoms of PV. Regular monitoring and medical care can help detect any changes in the condition. New or worsening symptoms should be reported to a Healthcare Professional.

If you are affected by PV, your symptoms, blood counts, even your feelings can help you identify your **PV STATE OF MINE**—or where you are on your journey with PV.

WHAT IS YOUR PV STATE OF MINE?



To learn more, visit www.VoicesofMPN.com



Voices of MPN is a registered trademark of Incyte Corporation. © 2015, Incyte Corporation. All rights reserved. UPM-1014 08/15