

YOU ARE INVITED TO A PRESENTATION ON:

A New First-in-Class Option for The Treatment of Platinum-Resistant Ovarian Cancer

Tuesday, October 13, 2026
6:15 PM Eastern Time

PRESENTED BY:

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LOCATION:

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HOSTED BY:

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INDICATIONS & USAGE

LIFYORLI is indicated in combination with nab-paclitaxel for the treatment of adults with platinum-resistant epithelial ovarian, fallopian tube, or primary peritoneal cancer who have received 1-3 prior systemic treatment regimens, at least one of which included bevacizumab.

IMPORTANT SAFETY INFORMATION

Contraindications: LIFYORLI is contraindicated in patients receiving systemic glucocorticoids for lifesaving purposes (e.g., immunosuppression after organ transplantation) because LIFYORLI antagonizes the effect of glucocorticoids.

Warnings and Precautions:

Neutropenia and Severe Infections: LIFYORLI in combination with nab-paclitaxel can cause neutropenia, including febrile neutropenia and severe infections. There was one fatal event of septic shock with febrile neutropenia. Monitor complete blood counts prior to each weekly treatment with LIFYORLI in combination with nab-paclitaxel and as clinically indicated. Withhold dose, reduce dose, or permanently discontinue LIFYORLI based on severity.

Adrenal Insufficiency: LIFYORLI can cause adrenal insufficiency. Adrenal insufficiency can occur at any time during treatment with LIFYORLI. Monitor for signs and symptoms of adrenal insufficiency. Withhold LIFYORLI and administer glucocorticoid therapy if adrenal insufficiency is suspected. After resolution of adrenal insufficiency, resume previous dose, reduce dose, or permanently discontinue LIFYORLI based on severity.

Please see additional Important Safety Information on next page.

TWO WAYS TO REGISTER

1. Click button to register

REGISTER NOW

2. Open the Camera app on your mobile device and hold your device over the QR code. Tap the notification to open the link to register.

The information you provide will be used only to facilitate your attendance at the program. We look forward to your participation in this informative discussion.

Please note this program is intended for healthcare professionals (HCPs) only.



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IMPORTANT SAFETY INFORMATION (cont'd)

Exacerbation of Conditions Treated with Glucocorticoids: Use of LIFYORLI in patients taking systemic glucocorticoids for other conditions (e.g., autoimmune disorders) may exacerbate these conditions. LIFYORLI may make systemic glucocorticoids less effective and coadministration of systemic glucocorticoids may make LIFYORLI less effective. Monitor patients for reduced effectiveness of LIFYORLI and glucocorticoids in patients receiving both.

Embryo-Fetal Toxicity

LIFYORLI can cause fetal harm when administered to a pregnant woman. Advise females of reproductive potential of the risk to a fetus and to use effective contraception.

Adverse Reactions:

Serious adverse reactions ($\geq 2\%$) in patients who received LIFYORLI plus nab-paclitaxel were neutropenia, pneumonia, pleural effusion, febrile neutropenia, and fatigue. Fatal adverse reactions (2.1%) were septic shock, cardiac arrest, ischemic stroke, and intestinal perforation.

The adverse reaction ($>2\%$) that resulted in permanent discontinuation of LIFYORLI in patients was intestinal obstruction. Adverse reactions ($\geq 5\%$) that required dosage interruptions of LIFYORLI in combination with nab-paclitaxel in patients included neutropenia, anemia, and fatigue.

Adverse reactions requiring dose reductions of LIFYORLI included fatigue, decreased appetite, abdominal pain, neutropenia, edema, and sciatica.

The most common adverse reactions ($>20\%$) in patients who received LIFYORLI plus nab-paclitaxel, including laboratory abnormalities, were decreased hemoglobin, decreased neutrophils, fatigue, nausea, diarrhea, decreased platelets, rash, and decreased appetite.

Drug Interactions:

- **Strong CYP3A Inducers:** Avoid coadministration of LIFYORLI plus nab-paclitaxel with strong CYP3A inducers.
- **CYP2C8 Inducers and Moderate CYP3A Inducers:** Monitor for reduced effectiveness of LIFYORLI plus nab-paclitaxel with CYP2C8 inducers and moderate CYP3A inducers.
- **CYP2C8 Inhibitors:** Monitor for increased adverse reactions and modify the dosage for adverse reactions as recommended.
- **CYP3A Substrates:** Avoid concomitant use unless otherwise recommended in the Prescribing Information for CYP3A substrates.
- **Certain CYP2C8 Substrates:** Avoid concomitant use unless otherwise recommended in the Prescribing Information for CYP2C8 substrates.

Use in Specific Populations:

- **Lactation:** Advise women not to breastfeed during treatment with LIFYORLI and for 1 week after the last dose.
- **Geriatric Use:** A higher incidence of grade 3-4 adverse events and dosage modification occurred in patients aged ≥ 65 years compared to younger adult patients.
- **Hepatic Impairment:** Avoid LIFYORLI in combination with nab-paclitaxel in patients with moderate or severe hepatic impairment.

Please see the full [Prescribing Information](#) for additional Important Safety Information.



Corcept complies with the PhRMA Code on Interactions with Healthcare Professionals. In accordance with these standards, Corcept may provide modest meals only to participating HCPs for bona fide educational or promotional discussions. Corcept is not permitted to pay for meals for spouses or guests, and such individuals may not attend company sponsored events. Corcept also does not provide or fund alcohol in connection with speaker programs.

Several states impose additional legal restrictions on meals and other items of value. For example, Vermont generally prohibits manufacturers from providing meals to HCPs; Minnesota imposes an annual dollar cap. DoD and VA policies similarly restrict gifts and meals to federal personnel. If you are licensed in one of these jurisdictions or affiliated with a government agency subject to these rules, please be aware that Corcept will comply with all applicable laws and limitations.

You may access our price disclosures on our [website](#).

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