

Flexible dosing options based on your patients' needs



TRYNGOLZA is approved for adults with severe hypertriglyceridemia (sHTG; TGs ≥ 500 mg/dL) and adults with familial chylomicronemia syndrome (FCS) as an adjunct to diet. TRYNGOLZA is a monthly subcutaneous injection that can be self-administered via a convenient autoinjector.^{1,2}

In adults with sHTG¹



TRYNGOLZA 50 mg

- The recommended dosage of TRYNGOLZA is **50 mg** injected subcutaneously once monthly with a low-fat diet
- Assess TGs when clinically appropriate. The TG-lowering effect of TRYNGOLZA may be measured within 3 months after initiation
- For patients who tolerate the **50 mg** dosage and additional TG reduction is clinically indicated, the dosage may be increased to **80 mg** injected subcutaneously once monthly



TRYNGOLZA 80 mg

In adults with FCS¹



TRYNGOLZA 80 mg

- The recommended dosage of TRYNGOLZA is **80 mg** once monthly with a low-fat diet of ≤ 20 grams fat per day

TG=triglyceride.

INDICATIONS

Familial Chylomicronemia Syndrome (FCS)

TRYNGOLZA (olezarsen) is indicated as an adjunct to diet to reduce triglycerides (TG) in adults with familial chylomicronemia syndrome (FCS).

Severe Hypertriglyceridemia (sHTG)

TRYNGOLZA is indicated as an adjunct to diet to reduce TG and the risk of acute pancreatitis in adults with severe hypertriglyceridemia (sHTG: TG ≥ 500 mg/dL).

SELECT IMPORTANT SAFETY INFORMATION

CONTRAINDICATIONS

TRYNGOLZA is contraindicated in patients with a history of serious hypersensitivity to TRYNGOLZA or any of the excipients in TRYNGOLZA. Hypersensitivity reactions requiring medical treatment have occurred.

WARNINGS AND PRECAUTIONS

Hypersensitivity Reactions

Hypersensitivity reactions (including symptoms of bronchospasm, diffuse erythema, facial swelling, urticaria, chills, and myalgias) have been reported in patients treated with TRYNGOLZA. Advise patients on the signs and symptoms of hypersensitivity reactions and instruct patients to promptly seek medical attention and discontinue use of TRYNGOLZA if hypersensitivity reactions occur.

Please see Important Safety Information throughout and full [Prescribing Information](#) for TRYNGOLZA, also available at [TRYNGOLZA.HCP.com](#).

How to prescribe



TRYNGOLZA can be prescribed using 1 of the 2 following options:

Electronically through your EHR



e-Prescribe TRYNGOLZA through your electronic health record (EHR) system to an in-network pharmacy*

OR

Fax the completed Start Form



Download the **TRYNGOLZA Start Form** or use the **Tear Pad** from your Account Specialist, then fax the completed form to an in-network pharmacy*

*Confirm if use of a specific specialty pharmacy is required by the patient's health insurance plan.

TRYNGOLZA is available through a select pharmacy network

Use of a specific pharmacy may be required by some insurance plans or pharmacy benefit managers (PBMs), so it is important to confirm with the patient's plan prior to sending the prescription.

Pharmacy	Phone number	Fax number	Website	Common payer/ PBM affiliations
Accredo	1-844-516-3319	1-888-302-1028	accredo.com/prescribers	Cigna, Express Scripts, Prime Therapeutics
BlinkRx	1-844-926-2480	1-866-585-4631	blinkrx.com/providers	Independent health plans
CVS Specialty	1-800-237-2767	1-800-323-2445	cvsspecialty.com	Aetna, CVS Health
Optum Specialty Pharmacy	1-855-427-4682	1-877-342-4596	specialty.optumrx.com	Optum Rx, UnitedHealthcare

Start your patient on TRYNGOLZA



For full details on administration and storage, see the [Instructions for Use](#) for TRYNGOLZA.

SELECT IMPORTANT SAFETY INFORMATION

WARNINGS AND PRECAUTIONS

Liver Enzyme Abnormalities

TRYNGOLZA can cause increases in liver enzymes and hepatic fat in adults. Increases in liver enzymes were more frequently reported with the 80 mg dose as compared with the 50 mg dose. Consider liver enzyme testing before TRYNGOLZA initiation or an increase in dosage and when clinically indicated thereafter. If persistent elevations in liver enzymes occur, consider dose interruption and/or dose reduction. If serious hepatic injury with clinical symptoms and/or hyperbilirubinemia or jaundice occurs, promptly discontinue TRYNGOLZA.

ADVERSE REACTIONS

Adverse Reactions for FCS

Most common adverse reactions in patients with FCS (incidence >5% of TRYNGOLZA-treated patients and >3% higher frequency than placebo) were injection site reactions, decreased platelet count, and arthralgia.

Adverse Reactions for sHTG

Most common adverse reactions in patients with sHTG (incidence ≥2% higher than placebo) were injection site reactions and liver enzyme increases.

Please see Important Safety Information throughout and full [Prescribing Information](#) for TRYNGOLZA, also available at [TRYNGOLZAHCP.com](https://tryngolzahcp.com).

References: 1. TRYNGOLZA. Prescribing information. Ionis Pharmaceuticals. 2. Data on file. REF-01291. Ionis Pharmaceuticals; 2024.

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US-OLZ-2600297 v1.0 06/2026

