

Jamie-Lynn S. has taken KESIMPTA and has been compensated for her time.

MS, multiple sclerosis; RMS, relapsing multiple sclerosis.

- *Proven to reduce relapses and disability progression in 2 studies vs teriflunomide.
- [†]Once monthly after 3 weekly starter doses.





Important Safety Information

Who should not take KESIMPTA?

Do NOT take KESIMPTA if you:

- Have an active hepatitis B virus (HBV) infection.
- Have had an allergic reaction to ofatumumab or life-threatening injection-related reaction to KESIMPTA.

EXPLORE WHAT'S INSIDE

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I chose KESIMPTA as my first treatment—it fits with my busy life, and I was impressed by the results.*



Unless otherwise indicated, everyone in this guide lives with relapsing MS, has taken KESIMPTA, and has been compensated for their time.

Important Safety Information (cont)

What is the most important information I should know about KESIMPTA? KESIMPTA can cause serious side effects such as:

• Infections. Serious infections, which can be life-threatening or cause death, can happen during treatment with KESIMPTA. If you have an active infection, your health care provider (HCP) should delay your treatment with KESIMPTA until your infection is gone. KESIMPTA taken before or after other medicines that weaken the immune system may increase your risk of getting (cont)

TREATMENT ON YOUR TERMS

KESIMPTA is the only B-cell treatment for RMS you can **take once a month**[†] from the comfort of home.

KESIMPTA offers a powerful combo of benefits:







Proven safety profile,* plus an ongoing safety study^t



Easy-to-use§ prefilled pen



- *In 2 studies vs teriflunomide.
- [†]Once monthly after 3 weekly starter doses.
- [‡]Based on an ongoing extension study. See full details on page 12.
- §As seen in a real-world 30-question survey of 105 patients (aged ≥18) diagnosed with RMS for 1+ years, who took KESIMPTA with the auto-injector pen within the previous 12 months. See full details on page 8.



POWERFUL RESULTS WITH KESIMPTA

Over 1800 people with relapsing MS participated in **2 head-to-head studies comparing KESIMPTA® to teriflunomide**. In the 1 to 2 years leading up to the studies, all of them had experienced a relapse or saw activity on an MRI scan.

PROVEN SUPERIOR

Reducing Relapses Fewer Lesions

Slowing Disability Progression

	STUDY 1 vs teriflunomide	STUDY 2 vs teriflunomide	
Relapses	51% fewer relapses	58% fewer relapses	
Active Lesions (Gd+ T1)	98% fewer lesions 0.01 for KESIMPTA vs 0.46 for teriflunomide on average per MRI scan	94% fewer lesions 0.03 for KESIMPTA vs 0.52 for teriflunomide on average per MRI scan	
New or Enlarging Lesions (T2)	82% fewer lesions 0.72 for KESIMPTA vs 4.00 for teriflunomide per year	85% fewer lesions 0.64 for KESIMPTA vs 4.16 for teriflunomide per year	
Disability Progression	Studies 1 & 2 combined 34% less likely at 3 months* 32% less likely at 6 months*		

Gd+, gadolinium-enhancing; MRI, magnetic resonance imaging.



^{*}Based on whether disability progression was still present 3 and 6 months after disability symptoms started.



Individual results may vary.

Important Safety Information (cont)

infections. Tell your HCP right away if you have any infections or get any symptoms including painful and frequent urination, nasal congestion, runny nose, sore throat, fever, chills, cough, or body aches.

HBV reactivation. If you have ever had HBV infection, it may become active again during or after treatment with KESIMPTA (reactivation). If this happens, it may cause serious liver problems including liver failure or death. Before starting KESIMPTA, your HCP will do a blood test to check for HBV. They will also continue to monitor you during and after treatment with KESIMPTA for HBV. Tell your HCP right away if you get worsening tiredness or yellowing of your skin or the white part of your eyes. (cont)

PEN FEATURES THAT HELP YOU DO IT RIGHT

The KESIMPTA® auto-injector pen has features that help you **use it safely from the comfort of home**. There are plenty of training resources available, but someone from your health care team will show you how to use it first so you'll be ready on treatment day.

YOU CAN'T SEE THE NEEDLE

- It's thinner than a pediatric needle*
- It goes just under skin, not into muscle
- Just press pen against skin to start

IT GUIDES YOU WITH SOUNDS

- You'll hear 1 click when it starts
- You'll hear a 2nd click when it's almost done

AND YOU CAN SEE THE PROGRESS

- Watch as the window fills with **green**
- It stops moving when complete



Ensure the **green** progress indicator fills the window and stops moving before removing the pen.



<u>Click</u> to see Zenovia use the pen, step-by-step.

*KESIMPTA pens come with a staked needle of 29-gauge. Pediatric needles average between 23-gauge and 25-gauge.



HOW KESIMPTA CAN FIT INTO YOUR LIFE

KESIMPTA comes with a convenient schedule: you can **take it yourself once a month.**[†] Here are some other ways it can work with your busy life:

KESIMPTA comes to you:



The pen is delivered right to your door, prefilled, and **ready to go** when you are.[‡]

It's flexible with your schedule:



You can take KESIMPTA when and where works best for vou[§] on treatment day.

It's travel friendly:



If you're traveling on treatment day, don't worry.

The pen can be kept at room temp for up to 7 days,[§] so you can take it with you.

Important Safety Information (cont)

Progressive Multifocal Leukoencephalopathy (PML). PML may happen
with KESIMPTA. PML is a rare, serious brain infection caused by
a virus that may get worse over days or weeks. PML can result in death
or severe disability. Tell your HCP right away if you have any new or
worsening neurologic signs or symptoms. These may include (cont)

[†]Once monthly after 3 weekly starter doses.

[‡]Take the KESIMPTA pen out of the refrigerator 15 to 30 minutes before injecting to allow it to reach room temperature.

[§]KESIMPTA pens must be refrigerated at 2 °C to 8 °C (36 °F to 46 °F). Keep product in the original carton to protect from light until the time of use. Do not freeze. To avoid foaming, do not shake. If necessary, KESIMPTA may be stored at room temperature below 30 °C (86 °F) for up to 7 days and returned to the refrigerator, to be used within the next 7 days. If not used within those 7 days, discard the medicine.

THE PEN IS EASY TO USE*

In a real-world survey,* people described their experience with the auto-injector pen. Here's what they had to say:



- Found the pen easy to use
- Said monthly dosing was convenient

In a separate survey,†



9 OUT OF 10 Nurses & 8 OUT OF 10 Patients

preferred the pen's features.

*Real-world 30-auestion survey of 105 US patients (aaed ≥18) diaanosed with RMS for 1+ vears. who took KESIMPTA® with the auto-injector pen within previous 12 months. On a scale of 1-5, 89.5% of patients rated it a 4 or 5 (5 being most positive) on overall ease of use and ease of monthly dosing schedule. Questionnaire not validated.

[†]Based on a survey of MS nurses (N=50) and patients (N=80) in the US, Germany, France, and Italy. Participants were asked to compare attributes of the KESIMPTA auto-injector pen with those of other disease modifying therapy (DMT) auto-injectors, some of which are not available in the US. The KESIMPTA pen was not injected during the survey, nor were all devices compared against each other by participants. A total of 17 attributes were assessed, with "easy to perform self-injection with the pen," "ease of preparation and set-up," and "ease of training patient in use" among those most preferred.





<u>Click</u> to watch the KESIMPTA Crew share what they love most about the pen.

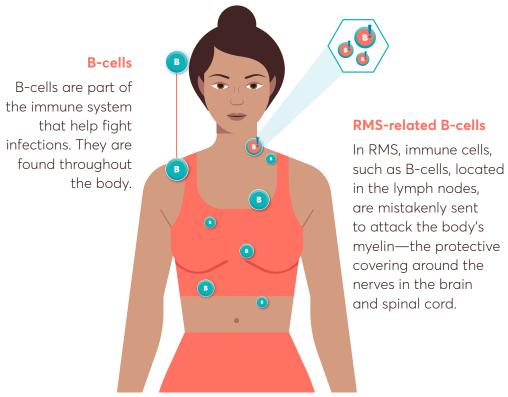
Important Safety Information (cont)

weakness on one side of your body, loss of coordination in arms and legs, vision problems, changes in thinking and memory, which may lead to confusion and personality changes.

 Weakened immune system. KESIMPTA taken before or after other medicines that weaken the immune system could increase your risk of getting infections. (cont)

ROLE OF B-CELLS IN RELAPSING MS

To understand how KESIMPTA® works, it's important to know how B-cells and relapsing MS are connected.



For illustrative purposes only.

Important Safety Information (cont)

Before you take KESIMPTA, tell your HCP about all your medical conditions, including if you:

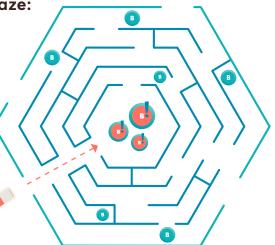
- Have or think you have an infection including HBV or PML.
- Have ever taken, currently take, or plan to take medicines that affect your immune system. These medicines could increase your risk of getting an infection. (cont)

KESIMPTA IS PRECISELY DELIVERED

While it's not fully understood how B-cell treatments work, KESIMPTA is designed to target the B-cells in the lymph nodes believed to play a role in RMS.

Think of your body like a maze:

- As a subcutaneous injection just under the skin, KESIMPTA is thought to target a precise path to RMS-related B-cells in the lymph nodes*
- This targeted delivery is thought to limit the impact on other B-cells your body needs to maintain immune function





Click to watch Candice explain the science behind KESIMPTA.

For illustrative purposes only. *Based on preclinical studies.



PROVEN SAFETY PROFILE

Before you start any treatment, it's important to understand the safety profile and possible side effects.

KESIMPTA® was studied in 2 head-to-head studies vs teriflunomide.

- √ Few people stopped treatment due to side effects
 (comparable to teriflunomide: 5.7% for KESIMPTA, 5.2% for teriflunomide)
- ✓ Mild to moderate injection-related reactions 99.8% of injection-related reactions were mild to moderate. They were most common in the 1st injection and decreased to less than 3% after the 3rd dose



KESIMPTA has a proven safety profile, and has been studied for 7 years and counting.

Because safety is so important, KESIMPTA continues to be studied in an ongoing, open-label* extension study.



^{*}A type of study where participants are aware of the type of treatment they're being given. Interpreting results from open-label studies can be uncertain. They are not considered representative results, since participants chose whether to stay in the trial.

[†]After the original KESIMPTA studies, over 1700 people continued to participate for further evaluation, where they all took KESIMPTA. The goal of this extended study was to learn about the safety and tolerability of KESIMPTA in the long term, with a focus on injection-related reactions, malignancies, and serious infections for up to 7 years. No conclusions of clinical outcomes can be drawn. (September 25, 2024 data cut-off date.)



Important Safety Information (cont)

- Have a history of liver problems.
- Have had a recent vaccination or are scheduled to receive any vaccinations.
 - You should receive any required 'live' or 'live-attenuated' vaccines at least 4 weeks before you start treatment with KESIMPTA. You should not receive 'live' or 'live-attenuated' vaccines while you are being treated with KESIMPTA and until your HCP tells you that your immune system is no longer weakened. (cont)

POSSIBLE SIDE EFFECTS

KESIMPTA® could increase the risk of serious, including life-threatening or fatal, infections:

Hepatitis B virus (HBV) reactivation: Before starting KESIMPTA, you'll get a blood test for HBV. If you've ever had HBV infection, it may become active again during or after treatment with KESIMPTA.

Progressive multifocal leukoencephalopathy (PML): PML may happen with KESIMPTA. PML is a rare, serious brain infection caused by a virus that may get worse over days or weeks, and can result in death or severe disability. While no cases of PML were reported in RMS clinical trials with KESIMPTA, it could happen.

Other serious side effects are:

Local injection-site reactions: Symptoms include redness, pain, itching, and swelling.

Injection-related reactions:

Symptoms include fever, headache, pain in the muscles, chills, tiredness, rash, hives, trouble breathing, swelling of the face, eyelids, lips, mouth, tongue and throat, and feeling faint, or chest tightness.

Low immunoglobulins:

KESIMPTA may decrease some types of antibodies.

Liver damage:

B-cell therapies including KESIMPTA may cause liver damage. Symptoms may include yellowing of the skin and eyes, nausea, vomiting, unusual darkness of urine, and feeling tired or weak.

Your doctor will do blood tests to check your immunoglobulin levels and liver before you start KESIMPTA and while you take it, if needed.

HERE'S WHAT'S MOST COMMON



Upper respiratory tract infections

Symptoms include sore throat, runny nose, and headache.



Headache

Before you take KESIMPTA, tell your doctor if you have any infections. It's also important to tell your doctor if you:

- Have or think you have HBV or PML
- Have taken or plan to take medication that affects your immune system
- Have a history of liver problems
- Had a recent vaccination or have one scheduled
- Are pregnant, think you may be, or are planning to be
- Are breastfeeding or plan to

Click to review the full Medication Guide.



CHOOSING YOUR RMS TREATMENT

Each B-cell treatment* comes with different requirements to take them, and they all factor into what your treatment day might look like.

Things to Consider

KESIMPTA®	Take it yourself	Take it at home or bring with you	No premeds required†	No post-dose observation
Other B-cell treatments*	Administered by a health care provider	Taken mainly in a medical facility, travel required	Premeds required	Post-dose observation



Be sure to share your preferences and ask your doctor what's involved to find the treatment that fits your lifestyle.

Steps for injecting KESIMPTA[‡]:

- Remove from fridge 15-30 mins to get to room temp
- Visually inspect for expiration date and liquid clarity
- Choose and clean the injection site
- Twist off cap only when ready to use. Discard cap, use within 5 mins
- Press firmly against skin at 90°.
 After the second click, the green indicator will stop moving.
 Remove pen
- Dispose in an FDA-cleared sharps container

Important Safety Information (cont)

- Whenever possible, you should receive any 'non-live' vaccines at least
 2 weeks before you start treatment with KESIMPTA.
- Talk to your HCP about vaccinations for your baby if you used KESIMPTA during your pregnancy. (cont)

PICTURE YOUR TREATMENT TIME

Administration Times & Methods*

KESIMPTA®	3-4 secs avg § auto-injection	1x monthly ¹ at home or on the go
Ocrevus® (ocrelizumab)	2-4 hrs infusion	2x yearly at a medical facility
Ocrevus® Zunovo™ (ocrelizumab and hyaluronidase-ocsq)	10 mins injection	2x yearly at a medical facility
Briumvi® (ublituximab-xiiy)	1-4 hrs# infusion	2x yearly at a medical facility

This is not a complete list of all the available treatments for RMS.*

The comparison pertains only to differences in dosing and administration and should not be considered a comparison of efficacy or safety.

Click to see what your dosing schedule could look like with KESIMPTA.

- *B-cell treatments for RMS include: KESIMPTA, Ocrevus (ocrelizumab), Ocrevus Zunovo™ (ocrelizumab and hyaluronidase-ocsq), and Briumvi (ublituximab-xiiy). Please see each product's respective prescribing information for additional information, including indication, dosing, administration, and safety. Trademarks are the property of their respective owners.
- *Only limited benefit of premedication was observed in relapsina MS clinical studies.
- [‡]These are not the full instructions for use (IFU). Please see IFU for more information.
- §Typical administration time when ready to inject.
- Once monthly after 3 weekly starter doses.
- *The 1st infusion of Briumvi takes 4 hrs. Subsequent infusions take 1 hr.



THE KESIMPTA CREW IS HERE FOR YOU

More and more people are making their choice to treat with KESIMPTA® and join the Crew. Whenever you're ready, you've got their support.

As people living with RMS, we've been there and learned a lot along the way.



Candice W.

Medical Education
Coordinator



Like you, we each have unique stories, but we all found our fit with KESIMPTA."

We love sharing our different experiences to help you navigate yours.



Kamryn R. Mom, Entrepreneur



The important thing is not to give up.
You can take charge—we got you!

Important Safety Information (cont)

 Are pregnant, think that you might be pregnant, or plan to become pregnant. It is not known if KESIMPTA will harm your unborn baby.
 Females who can become pregnant should use birth control (contraception) during treatment with KESIMPTA and for 6 months after your last treatment. Talk with your HCP about what birth control method is right for you during this time. (cont)



The KESIMPTA Crew is speaking up about their first-hand experiences with:



Being your own advocate

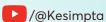


Juggling family, work, and dating with RMS



Deciding on KESIMPTA

Click to watch their stories on YouTube:





SUPPORT AVAILABLE TO YOU

A KESIMPTA® prescription comes with membership to patient support services. You'll get access to:

- ✓ Your own Coordinator a real person who will get to know you
 and be there to answer questions.
- ✓ Assistance starting as soon as possible get KESIMPTA delivered right to your door.
- ✓ Help securing insurance coverage eligible patients with commercial insurance get KESIMPTA for free while we work with your health care provider to get it covered.
- ✓ Co-pay assistance 97% of all prescriptions filled have a \$0 out of pocket cost when used with the Access Card.*†
- ✓ Helpful resources like step-by-step videos and more.

†2023 data on file.

Important Safety Information (cont)

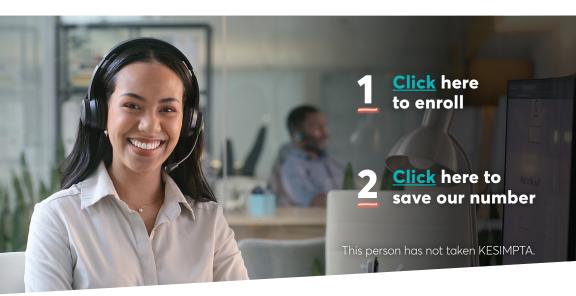
 Are breastfeeding or plan to breastfeed. It is not known if KESIMPTA passes into your breast milk. Talk to your HCP about the best way to feed your baby if you take KESIMPTA.

Tell your HCP about all the medicines you take, including prescription and over-the-counter medicines, vitamins, and herbal supplements. (cont)

^{*}Limitations apply. Offer not valid under Medicare, Medicaid, or any other federal or state health insurance program. Patients with commercial insurance who are initially denied coverage may receive free KESIMPTA for up to 12 months while seeking coverage. Patients with commercial insurance who have coverage for KESIMPTA may receive up to \$18,000 in annual co-pay benefits. Novartis reserves the right to rescind, revoke, or amend this program without notice. Additional limitations may apply. See complete Terms & Conditions at start.kesimpta.com.

EASY TO GET STARTED

Have a KESIMPTA prescription but aren't a member yet? **It's easy to get started.**



Once enrolled you can always reach us here:

1-855-KESIMPTA (1-855-537-4678), 8:00 AM-8:00 PM ET, Mon-Fri

- Press Option 2 for insurance and financial support
- Press Option 3 for ongoing support

"My coordinator helped me get started and provides the support I need to stay on treatment."

Please see full Important Safety Information throughout this brochure. Click here for full <u>Prescribing Information</u> including Medication Guide.



Luis G.

Indication

What is KESIMPTA® (ofatumumab) injection?

KESIMPTA is a prescription medicine used to treat adults with relapsing forms of multiple sclerosis (MS) including clinically isolated syndrome (CIS), relapsing-remitting disease, and active secondary progressive disease.

It is not known if KESIMPTA is safe or effective in children.

Important Safety Information

Who should not take KESIMPTA?

Do NOT take KESIMPTA if you:

- Have an active hepatitis B virus (HBV) infection.
- Have had an allergic reaction to ofatumumab or life-threatening injection-related reaction to KESIMPTA.

What is the most important information I should know about KESIMPTA?

KESIMPTA can cause serious side effects such as:

- Infections. Serious infections, which can be life-threatening or cause death, can happen during treatment with KESIMPTA. If you have an active infection, your health care provider (HCP) should delay your treatment with KESIMPTA until your infection is gone. KESIMPTA taken before or after other medicines that weaken the immune system may increase your risk of getting infections. Tell your HCP right away if you have any infections or get any symptoms including painful and frequent urination, nasal congestion, runny nose, sore throat, fever, chills, cough, or body aches.
- HBV reactivation. If you have ever had HBV infection, it may become active again during or after treatment with KESIMPTA (reactivation). If this happens, it may cause serious liver problems including liver failure or death. Before starting KESIMPTA, your HCP will do a blood test to check for HBV. They will also continue to monitor you during and after treatment with KESIMPTA for HBV. Tell your HCP right away if you get worsening tiredness or yellowing of your skin or the white part of your eyes.

- Progressive Multifocal Leukoencephalopathy (PML). PML may happen
 with KESIMPTA. PML is a rare, serious brain infection caused by a virus
 that may get worse over days or weeks. PML can result in death or severe
 disability. Tell your HCP right away if you have any new or worsening
 neurologic signs or symptoms. These may include weakness on one side of
 your body, loss of coordination in arms and legs, vision problems, changes
 in thinking and memory, which may lead to confusion and personality
 changes.
- Weakened immune system. KESIMPTA taken before or after other medicines that weaken the immune system could increase your risk of getting infections.

Before you take KESIMPTA, tell your HCP about all your medical conditions, including if you:

- Have or think you have an infection including HBV or PML.
- Have ever taken, currently take, or plan to take medicines that affect your immune system. These medicines could increase your risk of getting an infection.
- Have a history of liver problems.
- Have had a recent vaccination or are scheduled to receive any vaccinations.
 - You should receive any required 'live' or 'live-attenuated' vaccines at least 4 weeks before you start treatment with KESIMPTA. You should not receive 'live' or 'live-attenuated' vaccines while you are being treated with KESIMPTA and until your HCP tells you that your immune system is no longer weakened.
 - Whenever possible, you should receive any 'non-live' vaccines at least 2 weeks before you start treatment with KESIMPTA.
 - Talk to your HCP about vaccinations for your baby if you used KESIMPTA during your pregnancy.



Important Safety Information (cont)

- Are pregnant, think that you might be pregnant, or plan to become pregnant. It is not known if KESIMPTA® will harm your unborn baby.
 Females who can become pregnant should use birth control (contraception) during treatment with KESIMPTA and for 6 months after your last treatment. Talk with your HCP about what birth control method is right for you during this time.
- Are breastfeeding or plan to breastfeed. It is not known if KESIMPTA passes into your breast milk. Talk to your HCP about the best way to feed your baby if you take KESIMPTA.

Tell your HCP about all the medicines you take, including prescription and over-the-counter medicines, vitamins, and herbal supplements.

How should I use KESIMPTA?

See the detailed Instructions for Use that comes with KESIMPTA for information about how to prepare and inject a dose of KESIMPTA and how to properly throw away (dispose of) used KESIMPTA Sensoready® pens or prefilled syringes.

- Use KESIMPTA exactly as your HCP tells you to use it.
- Your HCP will show you how to prepare and inject KESIMPTA the right way before you use it for the first time.
- **Do not** inject into areas where the skin is tender, bruised, red, scaly or hard. Avoid areas with moles, scars, or stretch marks.

KESIMPTA may cause serious side effects including:

• Injection-related reactions. Injection-related reactions are a common side effect of KESIMPTA. Injecting KESIMPTA can cause injection-related reactions that can happen within 24 hours (1 day) following the first injections and with later injections. There are two kinds of reactions:

- At or near the injection site: redness of the skin, swelling, itching, and pain. Talk to your HCP if you have any of these signs and symptoms.
- That may happen when certain substances are released in your body: fever, headache, pain in the muscles, chills, tiredness, rash, hives, trouble breathing, swelling of the face, eyelids, lips, mouth, tongue and throat, and feeling faint, or chest tightness. Contact your HCP right away if you experience any of these signs and symptoms, especially if they become worse or you have new severe signs of reactions after subsequent injections. It could be a sign of an allergic reaction, which can be serious.
- Low immunoglobulins. KESIMPTA may cause a decrease in some types of antibodies. Your HCP will do blood tests to check your blood immunoglobulin levels.
- Liver damage. KESIMPTA may cause liver damage. Your HCP will do blood tests to check your liver before you start KESIMPTA and while you take KESIMPTA if needed. Tell your HCP right away if you have any symptoms of liver damage such as:
 - yellowing of the skin and eyes (jaundice)
 - nausea
 - vomiting
 - unusual darkening of the urine
 - feeling tired or weak

The most common side effects of KESIMPTA include:

- Upper respiratory tract infection, with symptoms such as sore throat and runny nose, and headache.
- Headache.

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.



YOUR CHOICE, YOUR VOICE: DECIDING IF KESIMPTA IS RIGHT FOR YOU

It's okay if you're feeling unsure about where to start. The KESIMPTA® Crew has been there too. They asked their doctors the important questions and put what they learned into a **Decision Guide to help you talk treatment with your doctor**.



Click to download the RMS Treatment Decision Guide









Please see full Important Safety Information throughout this brochure. Click here for full Prescribing Information including Medication Guide.

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