For adults with anti-aquaporin-4 (AQP4) antibody-positive neuromyelitis optica spectrum disorder (NMOSD).
It is not known if ULTOMIRIS is safe and effective for the treatment of NMOSD in children.

ULTOMIRIS®
(ravulizumab-cwvz)
injection for intravenous use
300 mg/3 mL vial

People taking ULTOMIRIS® had ZERO relapses during the clinical trial. ULTOMIRIS reduced the risk of a relapse by 98.6% compared to placebo.

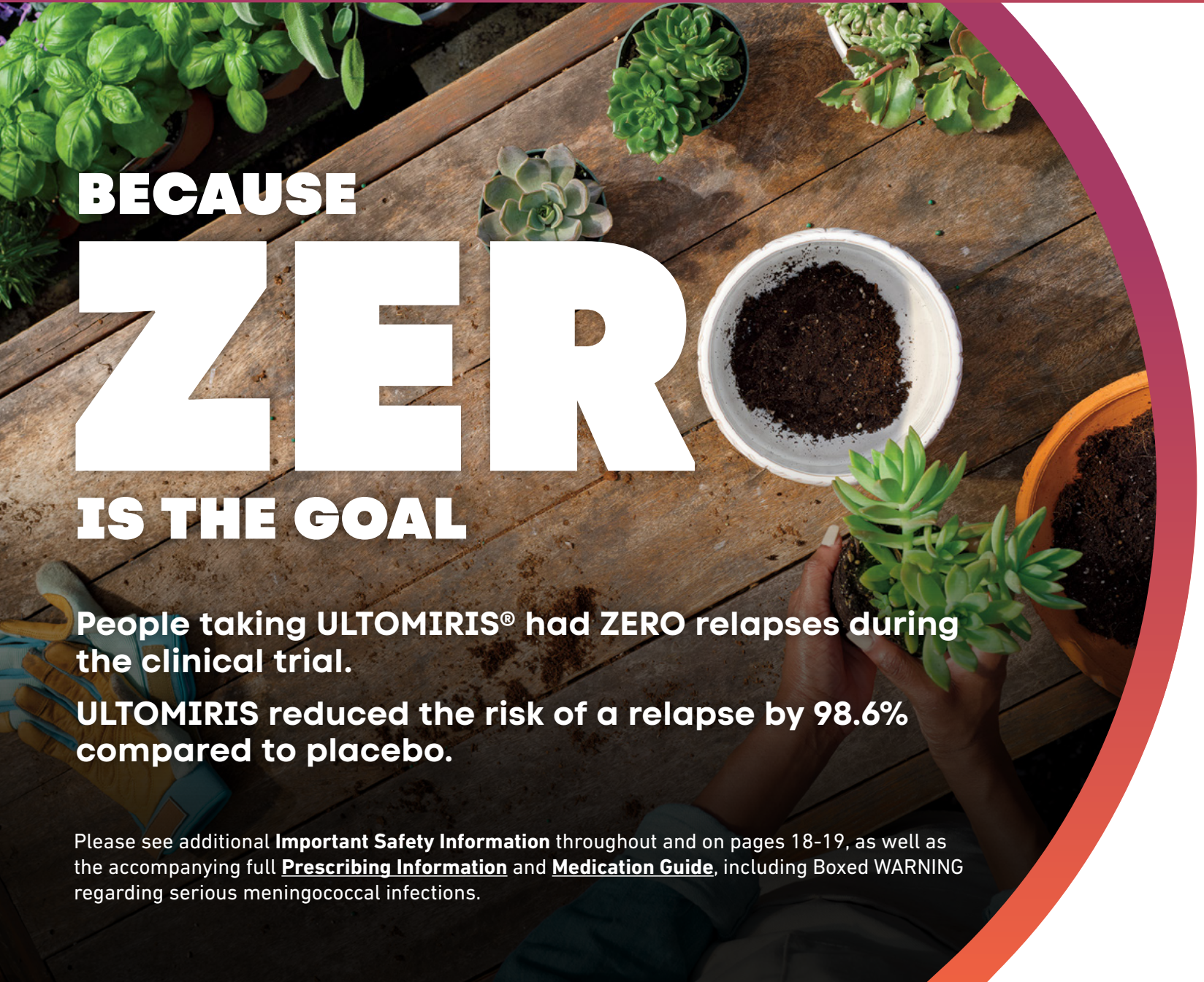
Images are not of actual patients.

IMPORTANT SAFETY INFORMATION

What is the most important information I should know about ULTOMIRIS?
ULTOMIRIS is a medicine that affects your immune system and may lower the ability of your immune system to fight infections.

- **ULTOMIRIS increases your chance of getting serious meningococcal infections that may quickly become life-threatening or cause death if not recognized and treated early.**

Please see additional **Important Safety Information** throughout and on pages 18-19, as well as the accompanying full **Prescribing Information** and **Medication Guide for ULTOMIRIS**, including Boxed WARNING regarding serious meningococcal infections.


BECAUSE
ZERO
IS THE GOAL
People taking ULTOMIRIS® had ZERO relapses during the clinical trial.
ULTOMIRIS reduced the risk of a relapse by 98.6% compared to placebo.
Please see additional **Important Safety Information** throughout and on pages 18-19, as well as the accompanying full **Prescribing Information** and **Medication Guide**, including Boxed WARNING regarding serious meningococcal infections.

THE EFFICACY & SAFETY OF ULTOMIRIS WERE STUDIED IN A CLINICAL TRIAL

The trial included 58 people treated with ULTOMIRIS and 47 people on placebo*†

The people enrolled in the clinical trial had the following‡:

- Anti-AQP4 antibody positive NMOSD
- At least 1 relapse in the 12 months before the trial

The primary goal of the clinical trial was to measure the time it took participants to have their next attack as determined by a panel of experts

People were observed for a median of **73.5 weeks**.§

In the clinical trial, people taking ULTOMIRIS could continue with certain immunosuppressant therapies (48.3%).

*Placebo is an inactive substance or treatment that looks the same as, and is given in the same way as, the investigational medication being studied.
†As there are FDA-approved therapies available, the placebo group data were collected as part of a previously conducted trial.
‡An Expanded Disability Status Scale (EDSS) score of ≤7 was also an inclusion requirement.
§The median is the middle value in a set of data.

Important Safety Information (continued)

What is the most important information I should know about ULTOMIRIS? (continued)

1. You must complete or update meningococcal vaccine(s) at least 2 weeks before your first dose of ULTOMIRIS.
2. If you have not completed your meningococcal vaccines and ULTOMIRIS must be started right away, you should receive the required vaccine(s) as soon as possible.

HOW ULTOMIRIS® WORKS

ULTOMIRIS IS A TARGETED TREATMENT OPTION

TARGETS A PROTEIN THAT PLAYS AN IMPORTANT ROLE IN THE DAMAGE THAT OCCURS IN THE BODY

A part of the immune system called "complement" normally helps destroy harmful invading cells, like some bacteria. In anti-AQP4 antibody-positive NMOSD, the anti-AQP4 antibody activates the complement system and is thought to incorrectly attack and damage the cells in the central nervous system (CNS), which includes the brain, spinal cord, and eyes.

TARGETS

ULTOMIRIS **targets a part of the complement system**.

BLOCKS

ULTOMIRIS **blocks a protein called C5 in the complement system**, which plays a vital role in activating other complement proteins.

PREVENTS

ULTOMIRIS **is thought to prevent incorrect activation of other complement proteins** that may cause damage in NMOSD.

Though the exact manner in which it works as a treatment for NMOSD is **unknown**, ULTOMIRIS binds to and blocks C5, which is part of the complement system that contributes to damaging cells in the brain, spinal cord, and eyes in NMOSD.

Important Safety Information (continued)

What is the most important information I should know about ULTOMIRIS? (continued)

3. If you have not been vaccinated and ULTOMIRIS must be started right away, you should also receive antibiotics for as long as your healthcare provider tells you.
4. If you had a meningococcal vaccine in the past, you might need additional vaccines before starting ULTOMIRIS. Your healthcare provider will decide if you need additional meningococcal vaccines.

Please see additional **Important Safety Information** throughout and on pages 18-19, as well as the accompanying full **Prescribing Information** and **Medication Guide**, including Boxed WARNING regarding serious meningococcal infections.

SAFETY INFORMATION

BE INFORMED ABOUT THE SAFETY OF YOUR TREATMENT CHOICE

The safety of ULTOMIRIS® in people with NMOSD is consistent with the established safety profile of ULTOMIRIS in clinical trials of other conditions

The most common side effects (≥10%) of ULTOMIRIS during the clinical trial for NMOSD were*:

- headache (24%)
- COVID-19 infection (24%)
- back pain (12%)
- joint pain (10%)
- urinary tract infection (10%)

Serious adverse reactions were reported in 8 (13.8%) adults with NMOSD receiving ULTOMIRIS. The most common serious adverse events were infections, reported in 5 (8.6%) adults.

*The trial was conducted during the COVID-19 pandemic (Dec 2019-Mar 2022), before approved vaccinations. Please talk to your doctor about any concerns you may have.

COVID-19, coronavirus disease 2019.

Important Safety Information (continued)

What is the most important information I should know about ULTOMIRIS? (continued)

5. Meningococcal vaccines do not prevent all meningococcal infections. **Call your healthcare provider or get emergency medical care right away if you get any of these signs and symptoms of a meningococcal infection**: fever, fever with high heart rate, headache and fever, confusion, muscle aches with flu-like symptoms, fever and a rash, headache with nausea or vomiting, headache with a stiff neck or stiff back, or eyes sensitive to light.

TALK TO YOUR DOCTOR ABOUT GETTING STARTED ON ULTOMIRIS

Please see additional **Important Safety Information** throughout and on pages 18-19, as well as the accompanying full **Prescribing Information** and **Medication Guide**, including Boxed WARNING regarding serious meningococcal infections.

BEFORE TAKING ULTOMIRIS®

HELP PROTECT YOURSELF FROM THE RISK OF SERIOUS MENINGOCOCCAL INFECTION

ULTOMIRIS may lower the ability of your immune system to fight infections. Before taking ULTOMIRIS, you must receive 2 types of vaccination against meningococcal infection, which may quickly become life-threatening or cause death if not recognized and treated early.

If your doctor decides that you need urgent treatment with ULTOMIRIS, you should receive meningococcal vaccines as soon as possible. If you have not been vaccinated, and ULTOMIRIS must be started immediately, you should also receive antibiotics for as long as your doctor tells you.

If you had a meningococcal vaccine in the past, talk to your doctor about whether you may need additional vaccines before starting ULTOMIRIS.

YOU MUST COMPLETE OR UPDATE YOUR MENINGOCOCCAL VACCINE(S) AT LEAST 2 WEEKS BEFORE YOUR FIRST DOSE OF ULTOMIRIS

Important Safety Information (continued)

Your healthcare provider will give you a Patient Safety Card about the risk of serious meningococcal infection. Carry it with you at all times during treatment and for 8 months after your last ULTOMIRIS dose. Your risk of meningococcal infection may continue for several months after your last dose of ULTOMIRIS. It is important to show this card to any healthcare provider who treats you. This will help them diagnose and treat you quickly.

Please see additional **Important Safety Information** throughout and on pages 18-19, as well as the accompanying full **Prescribing Information** and **Medication Guide**, including Boxed WARNING regarding serious meningococcal infections.

Meningococcal vaccines do not prevent all meningococcal infections. Call your healthcare provider or get emergency medical care right away if you get any of these signs and symptoms of a serious meningococcal infection:

- fever
- fever with high heart rate
- headache and fever
- confusion
- muscle aches with flu-like symptoms
- fever and a rash
- headache with nausea or vomiting
- headache with stiff neck or stiff back
- eyes sensitive to light

Patient Safety Card

- **Your healthcare provider will give you a Patient Safety Card about the risk of serious meningococcal infection**
- Carry it with you at all times during treatment and for 8 months after your last ULTOMIRIS dose
- Your risk of meningococcal infection may continue for several months after your last dose of ULTOMIRIS
- It is important to show this card to any healthcare provider who treats you. This will help them diagnose and treat you quickly

ULTOMIRIS is only available through the ULTOMIRIS and SOLIRIS® Risk Evaluation and Mitigation Strategy (REMS) program

Before you can receive ULTOMIRIS, your healthcare provider must:

- enroll in the ULTOMIRIS and SOLIRIS REMS program
- counsel you about the risk of serious meningococcal infection
- give you information about the signs and symptoms of serious meningococcal infection

Important Safety Information (continued)

ULTOMIRIS is only available through a program called the ULTOMIRIS and SOLIRIS Risk Evaluation and Mitigation Strategy (REMS). Before you can receive ULTOMIRIS, your healthcare provider must: enroll in the REMS program; counsel you about the risk of serious meningococcal infections; give you information about the signs and symptoms of serious meningococcal infection; make sure that you are vaccinated against serious infections caused by meningococcal bacteria, and that you receive antibiotics if you need to start ULTOMIRIS right away and are not up to date on your vaccines; give you a **Patient Safety Card** about your risk of meningococcal infection.

STARTING ULTOMIRIS®

LIFE CAN BE A LITTLE MORE PREDICTABLE WITH ULTOMIRIS DOSING

- ULTOMIRIS is given through an intravenous (IV) infusion directly into your vein*
- ULTOMIRIS can be administered by a healthcare provider at an infusion location or doctor's office
- You may be eligible for an at-home infusion option
- Your insurance and where you live can influence where you get ULTOMIRIS. Contact an Alexion OneSource™ team member to understand your infusion options

Please see additional **Important Safety Information** throughout and on pages 18-19, as well as the accompanying full **Prescribing Information** and **Medication Guide**, including Boxed WARNING regarding serious meningococcal infections.

ULTOMIRIS offers a less than 1-HOUR infusion once every 8 WEEKS, 2 weeks after an initial loading dose; that's 6-7 TIMES a year*

*Minimum infusion times for ULTOMIRIS 100 mg/mL maintenance doses range from 30 minutes to less than 1 hour for most people, depending on body weight. If a side effect occurs during the infusion of ULTOMIRIS, the infusion may be slowed or stopped by the healthcare provider. After your infusion, your care team will monitor you for at least 1 additional hour for infusion-related reactions.

ULTOMIRIS®
(ravulizumab-cwvz)
injection for intravenous use
300 mg/3 mL vial

8 WEEKS OF FREEDOM BETWEEN DOSES, STARTING 2 WEEKS AFTER A LOADING DOSE

Important Safety Information (continued)
ULTOMIRIS may also increase the risk of other types of serious infections, including *Streptococcus pneumoniae, Haemophilus influenzae,* and *Neisseria gonorrhoeae*. Certain people may be at risk of serious infections with gonorrhea.

Who should not receive ULTOMIRIS?
Do not receive ULTOMIRIS if you have a serious meningococcal infection when you are starting ULTOMIRIS.


YOU DESERVE
TO FEEL
SUPPORTED
ON YOUR NMOSD
JOURNEY

SUPPORT

WE'RE HERE TO HELP YOU

Alexion OneSource™

OneSource is a free, personalized patient support program offered by Alexion. Whether you're newly diagnosed or have had your condition for years, our specialists will be by your side.

ONESOURCE®
Personalized Patient Support from Alexion

Contact a Patient Education Manager (PEM) near you to help you learn more about your condition through local and community education sessions and events.

AlexionOneSource.com

1-888-765-4747
Monday-Friday, 8:30 AM-8 PM ET

Important Safety Information (continued)

Before you receive ULTOMIRIS, tell your healthcare provider about all of your medical conditions, including if you: have an infection or fever, are pregnant or plan to become pregnant, and are breastfeeding or plan to breastfeed. It is not known if ULTOMIRIS will harm your unborn baby or if it passes into your breast milk. You should not breastfeed during treatment and for 8 months after your final dose of ULTOMIRIS.

Please see additional **Important Safety Information** throughout and on pages 18-19, as well as the accompanying full **Prescribing Information** and **Medication Guide**, including Boxed WARNING regarding serious meningococcal infections.

FREQUENTLY ASKED QUESTIONS

What should I tell my doctor before starting ULTOMIRIS®?

Before you receive ULTOMIRIS, tell your doctor about all of your medical conditions, including if you:

- have an infection or fever
- are pregnant or plan to become pregnant. It is not known if ULTOMIRIS will harm your unborn baby
- are breastfeeding or plan to breastfeed. It is not known if ULTOMIRIS passes into your breast milk. You should not breastfeed during treatment and for 8 months after your final dose of ULTOMIRIS

Tell your doctor about all the medicines you take, including prescription and over-the-counter medicines, vitamins, and herbal supplements. ULTOMIRIS and other medicines can affect each other. Know the medicines you take and the vaccines you receive. Keep a list of them to show your doctor and pharmacist when you get a new medicine.

If I received the meningococcal vaccines already, do I need to receive them again?

If you had a meningococcal vaccine in the past, you might need additional vaccines before starting ULTOMIRIS. Your healthcare provider will decide if you need additional meningococcal vaccines.

How long will I be on therapy?

NMOSD is a chronic disease, and there is no known cure. Speak with your physician about your need for ongoing therapy.

Important Safety Information (continued)

Tell your healthcare provider about all the vaccines you receive and medicines you take, including prescription and over-the-counter medicines, vitamins, and herbal supplements which could affect your treatment.

Can I take my other medications with ULTOMIRIS?

In the clinical trial 48.3% of people taking ULTOMIRIS continued certain immunosuppressant therapies. Talk to your doctor about any medication you are currently taking and whether they may need to adjust your dose.

Where can I get more information about ULTOMIRIS?

- To find additional information about ULTOMIRIS in NMOSD, please visit **ULTOMIRIS.com/nmosd**
- On this site, you can find a link to the Medication Guide
- You can also connect with your local Patient Education Manager through Alexion OneSource™
- Please check back in with OneSource frequently as new information becomes available
- Your healthcare team is the best resource for decisions about your treatment

EXPLORE MORE FREQUENTLY ASKED QUESTIONS AT ULTOMIRIS.COM/NMOSD

Please see additional **Important Safety Information** throughout and on pages 18-19, as well as the accompanying full **Prescribing Information** and **Medication Guide**, including Boxed WARNING regarding serious meningococcal infections.

NOTES

Please see additional **Important Safety Information** throughout and on pages 18-19, as well as the accompanying full **Prescribing Information** and **Medication Guide**, including Boxed WARNING regarding serious meningococcal infections.

TELL YOUR DOCTOR ABOUT ANY QUESTIONS OR CONCERNS YOU HAVE WITH ULTOMIRIS®

INDICATION & IMPORTANT SAFETY INFORMATION

INDICATION

What is ULTOMIRIS?

ULTOMIRIS is a prescription medicine used to treat adults with a disease called Neuromyelitis Optica Spectrum Disorder (NMOSD) who are anti-aquaporin 4 (AQP4) antibody positive. It is not known if ULTOMIRIS is safe and effective for the treatment of NMOSD in children.

IMPORTANT SAFETY INFORMATION

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

ULTOMIRIS is a medicine that affects your immune system and may lower the ability of your immune system to fight infections.

- **ULTOMIRIS increases your chance of getting serious meningococcal infections that may quickly become life-threatening or cause death if not recognized and treated early.**

1. You must complete or update meningococcal vaccine(s) at least 2 weeks before your first dose of ULTOMIRIS.
2. If you have not completed your meningococcal vaccines and ULTOMIRIS must be started right away, you should receive the required vaccine(s) as soon as possible.
3. If you have not been vaccinated and ULTOMIRIS must be started right away, you should also receive antibiotics for as long as your healthcare provider tells you.
4. If you had a meningococcal vaccine in the past, you might need additional vaccines before starting ULTOMIRIS. Your healthcare provider will decide if you need additional meningococcal vaccines.
5. Meningococcal vaccines do not prevent all meningococcal infections. **Call your healthcare provider or get emergency medical care right away if you get any of these signs and symptoms of a meningococcal infection**: fever, fever with high heart rate, headache and fever, confusion, muscle aches with flu-like symptoms, fever and a rash, headache with nausea or vomiting, headache with a stiff neck or stiff back, or eyes sensitive to light.

Your healthcare provider will give you a Patient Safety Card about the risk of serious meningococcal infection. Carry it with you at all times during treatment and for 8 months after your last ULTOMIRIS dose. Your risk of meningococcal infection may continue for several months after your last dose of ULTOMIRIS. It is important to show this card to any healthcare provider who treats you. This will help them diagnose and treat you quickly.

ULTOMIRIS is only available through a program called the ULTOMIRIS and SOLIRIS Risk Evaluation and Mitigation Strategy (REMS). Before you can receive ULTOMIRIS, your healthcare provider must: enroll in the REMS program; counsel you about the risk of serious meningococcal infections; give you information about the signs and symptoms of serious meningococcal infection; make sure that you are vaccinated against serious infections caused by meningococcal bacteria, and that you receive antibiotics if you need to start ULTOMIRIS right away and are not up to date on your vaccines; give you a **Patient Safety Card** about your risk of meningococcal infection.

ULTOMIRIS may also increase the risk of other types of serious infections, including *Streptococcus pneumoniae, Haemophilus influenzae,* and *Neisseria gonorrhoeae*. Certain people may be at risk of serious infections with gonorrhea.

Who should not receive ULTOMIRIS?
Do not receive ULTOMIRIS if you have a serious meningococcal infection when you are starting ULTOMIRIS.

Before you receive ULTOMIRIS, tell your healthcare provider about all of your medical conditions, including if you: have an infection or fever, are pregnant or plan to become pregnant, and are breastfeeding or plan to breastfeed. It is not known if ULTOMIRIS will harm your unborn baby or if it passes into your breast milk. You should not breastfeed during treatment and for 8 months after your final dose of ULTOMIRIS.

Tell your healthcare provider about all the vaccines you receive and medicines you take, including prescription and over-the-counter medicines, vitamins, and herbal supplements which could affect your treatment.

What are the possible side effects of ULTOMIRIS?
ULTOMIRIS can cause serious side effects including infusion-related reactions. Symptoms of an infusion-related reaction with ULTOMIRIS may include lower back pain, abdominal pain, muscle spasms, changes in blood pressure, tiredness, feeling faint, shaking chills (rigors), discomfort in your arms or legs, bad taste, or drowsiness. Stop treatment of ULTOMIRIS and tell your healthcare provider right away if you develop these symptoms, or any other symptoms during your ULTOMIRIS infusion that may mean you are having a serious infusion-related reaction, including: chest pain, trouble breathing or shortness of breath, swelling of your face, tongue, or throat, and feel faint or pass out.

The most common side effects of ULTOMIRIS in people with NMOSD are COVID-19 infection, headache, back pain, urinary tract infection, and joint pain (arthralgia).

Tell your healthcare provider about any side effect that bothers you or that does not go away. These are not all the possible side effects of ULTOMIRIS. For more information, ask your healthcare provider or pharmacist. Call your healthcare provider right away if you miss an ULTOMIRIS infusion or for medical advice about side effects. You may report side effects to FDA at 1-800-FDA-1088.

Please see the accompanying full Prescribing Information and Medication Guide for ULTOMIRIS, including Boxed WARNING regarding serious meningococcal infections.

WHO KNEW ZERO COULD MEAN SO MUCH?

ASK your healthcare provider if ULTOMIRIS® could be a good option for you

VISIT ULTOMIRIS.com/nmosd for more information

TAKE THE NEXT STEP

Considering ULTOMIRIS? Hear from a Patient Education Manager about how to start ULTOMIRIS and download your own personalized discussion guide for talking to your doctor

Important Safety Information

What is the most important information I should know about ULTOMIRIS?
ULTOMIRIS is a medicine that affects your immune system and may lower the ability of your immune system to fight infections.

- **ULTOMIRIS increases your chance of getting serious meningococcal infections that may quickly become life-threatening or cause death if not recognized and treated early.**

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ALEXION®
AstraZeneca Rare Disease