



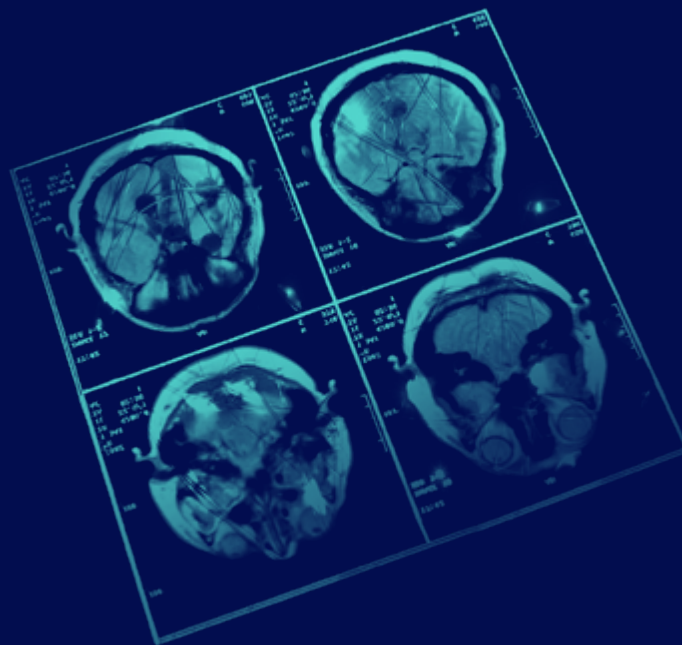
Understanding Amyotrophic Lateral Sclerosis (ALS)

What is ALS?

Amyotrophic lateral sclerosis (ALS), also known as Lou Gehrig's disease, is a nervous system disease that impacts physical function.¹ ALS begins in the **brain and spinal cord** by affecting nerve cells called **motor neurons**, which control voluntary muscle movement such as chewing, walking, breathing and talking.¹

In people with ALS, these motor neurons stop working, resulting in the brain's inability to communicate with the muscles and causing them to become weak and lose functionality.¹

ALS is a **progressive disease**, meaning it involves a gradual onset of symptoms.^{1,2} People with ALS lose their strength and muscle function over time, which can limit their ability to live independent lives.¹ The average life expectancy after diagnosis is two to five years, but progression of the disease can vary significantly.³

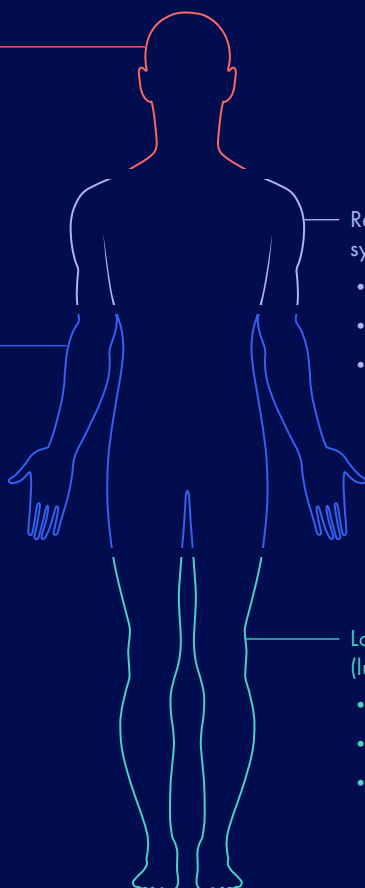


Head and neck symptoms (bulbar)^{4,5}

- Impaired speech
- Excess saliva
- Difficulty swallowing

Upper body symptoms (cervical)^{4,5}

- Hand weakness
- Limited range of motion
- Upper body muscle spasms
- Trouble with dressing/hygiene
- Impaired handwriting
- Difficulty preparing food



Respiratory symptoms^{4,6}

- Shortness of breath
- Restricted breathing
- Difficulty sleeping

Lower body symptoms (lumbar)⁵

- Frequent tripping
- Difficulty on stairs
- Weak feet

Symptoms & Diagnosis

Symptoms vary from person to person and can appear in different regions of the body.¹ The number and degree of symptoms typically increase as the disease gets worse.¹

No one test can provide a definitive diagnosis of ALS.⁷ ALS is primarily diagnosed based on medical history and symptoms observed by a physician along with a series of tests to rule out other mimicking diseases.⁷ However, the presence of upper and lower motor neuron symptoms is a strong indicator of ALS. Initial symptoms can be subtle at first, and it can take 12 to 14 months to be accurately diagnosed with ALS.⁸

Who gets ALS?

ALS is the most common of the motor neuron diseases (MNDs), which is a wider group of disorders that can lead to loss of physical function.¹ It affects people of all ages, races and ethnic backgrounds.¹



An estimated **5,000 people** in the United States (U.S.) are diagnosed with ALS each year.⁹



On average, a new case of ALS is diagnosed every **90 minutes**.⁹

5-10%

of ALS cases are familial, meaning they are due to genetic mutations and are inherited from a family member.⁷

90-95%

of ALS cases are sporadic, meaning the cause(s) of the disease are unknown.⁷



Although ALS can strike at any age, symptoms most commonly develop **between the ages of 40 and 70**, and average age at diagnosis is **55**.⁷



For unknown reasons, **military veterans** are more likely to be diagnosed with the disease than the general public.¹⁰

Treatment & Monitoring

There is no cure for ALS; however, there are treatments available that can help control symptoms, help prevent or delay complications and slow the progression of the disease.⁸ This includes medications approved by the U.S. Food and Drug Administration (FDA), physical and speech therapy, respiratory support and nutritional support.⁸

Several clinical tools that help monitor ALS symptoms and track disease progression have been developed, including:



Function-based questionnaires that ask people with ALS to rate how well different muscle groups are working based on a sliding scale, providing a high-level assessment of overall muscle function. The ALS Functional Rating Scale-Revised (ALSFRS-R) is a validated rating instrument for monitoring disability progression in ALS and widely used in clinical trials.¹¹



Strength measurements to assess muscle weakness and help physicians understand how quickly ALS is progressing. The most common method for this is called handheld dynamometry (HHD), in which the examiner holds a small gauge that the patient pushes against using different muscle groups.¹¹



Respiratory measurements to assess the possibility of respiratory dysfunction, the leading cause of death among people with ALS. The most typical test for this is a forced vital capacity (FVC) test, which measures the maximum amount of air a patient can exhale from their lungs after taking the deepest possible breath.¹

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