

Approved for the Treatment of Huntington's **Disease (HD) Chorea in Adults**

Please see Important Safety Information, including Boxed Warning, below.

Fast Facts About INGREZZA® (valbenazine) Capsules

- INGREZZA (40 mg, 60 mg, 80 mg) is the only treatment proven to reduce HD chorea that is always one capsule, once daily.1 INGREZZA is also approved by the U.S. Food and Drug Administration (FDA) for the treatment of tardive dyskinesia in adults.
- Unlike other approved treatments for HD chorea, INGREZZA is a vesicular monoamine transporter 2 (VMAT2) inhibitor that selectively targets VMAT2, a protein in the brain. While the mechanism of action in the treatment of HD chorea is unclear, it is thought to reduce the abnormal dopamine signaling that causes HD chorea. 1,* Dopamine is a chemical in the brain that helps control movement.
 - *Based on laboratory tests. This does not imply a treatment advantage
- The Phase 3, randomized, double-blind, placebo-controlled KINECT®-HD clinical study evaluated the efficacy and safety of INGREZZA. The effects of INGREZZA on HD chorea were seen as early as two weeks after starting INGREZZA at the first dose level (40 mg), with greater improvements versus placebo seen at all subsequent visits (average of Weeks 10 and 12).^{1,2}
- In clinical studies in HD, treatment-emergent adverse events included somnolence and sedation, urticaria, rash and insomnia.

What Is HD Chorea?

- ✓ HD is a hereditary progressive neurodegenerative disorder in which gradual breakdown of nerve cells causes motor, cognitive and psychiatric symptoms.3-5
- ✓ Most people with HD experience chorea, an involuntary movement disorder characterized by irregular and unpredictable movements.
- ✓ HD chorea starts gradually with movements in the fingers, hands and face muscles and progresses to larger movements affecting the whole body.^{4,5}



Approximately 90 percent of the 41,000 people in the U.S. diagnosed with HD will develop chorea.^{3-4,6}



As chorea worsens, the ability to function becomes more difficult.7-8

HD chorea can impact all areas of daily life.



HD symptoms including chorea generally appear between the ages of 30 and 50 years.4

Symptoms worsen over a 10- to 25-year period.4

INGREZZA can cause serious side effects in people with Huntington's disease, including: depression, suicidal thoughts, or suicidal actions. Tell your healthcare provider before you start taking INGREZZA if you have Huntington's disease and are depressed (have untreated depression or depression that is not well controlled by medicine) or have suicidal thoughts. Pay close attention to any changes, especially sudden changes, in mood, behaviors, thoughts, or feelings. This is especially important when INGREZZA is started and when the dose is changed. Call your healthcare provider right away if you become depressed, have unusual changes in mood or behavior, or have thoughts of hurting yourself.



INGREZZA is the only treatment option that always offers a one-capsule, once-daily treatment, with no complex dose adjustments. INGREZZA provides rapid, sustained improvement in HD chorea.1



Efficacy and Safety

The FDA approval of INGREZZA for HD chorea is supported by data from the KINECT®-HD Phase 3 study and the ongoing KINECT®-HD2 open-label study of INGREZZA.1,2

- The KINECT-HD study evaluated the efficacy, safety and tolerability of INGREZZA as a treatment for HD chorea. The study enrolled 128 adults 18 to 75 years of age who were diagnosed with motor-manifest HD and who had sufficient chorea symptoms to meet study protocol criteria. The primary endpoint was a reduction in severity of chorea, the hallmark motor feature in HD, as measured by change in the Unified Huntington's Disease Rating Scale (UHDRS) Total Maximal Chorea (TMC) score from screening period baseline to maintenance period (average of Weeks 10 and 12).1,2
 - INGREZZA demonstrated a three-times greater improvement in chorea severity compared to placebo, with a 4.6-point improvement seen with INGREZZA versus a 1.4-point improvement with placebo in the chorea severity score from the start to the end of the 12-week clinical study (least squares mean difference -3.2, 95% CI, -4.4 to -2.0; P < 0.0001). 1,2
 - Improvement was seen at Week 2 as participants completed the lowest study dose (40 mg) with greater improvements compared to placebo in all subsequent visits (Weeks 4 to 12, Figure B). The dose was adjusted from 40 mg to 60 mg and then 80 mg over the course of the 12week study.
 - INGREZZA reduced chorea severity by about 40 percent from baseline to maintenance ($P \le 0.001$).²
 - The KINECT-HD study also met the secondary Clinical Global Impression of Change (CGI-C) and Patient Global Impression of Change (PGI-C) endpoints, with statistically significant differences versus placebo.
 - Data showed 53 percent of patients and 43 percent of healthcare professionals reported overall HD chorea symptoms were "very much improved" or "much improved" at Week 12.
 - In clinical studies in HD, treatment-emergent adverse events included somnolence and sedation, urticaria, rash and insomnia.

The long-term efficacy and safety of INGREZZA for the treatment of HD chorea is being studied in KINECT-HD2, an ongoing open-label extension trial of approximately 150 patients receiving INGREZZA for up to 156 weeks.[†]

†Timing of KINECT-HD2 data reporting depends on when the study is completed.



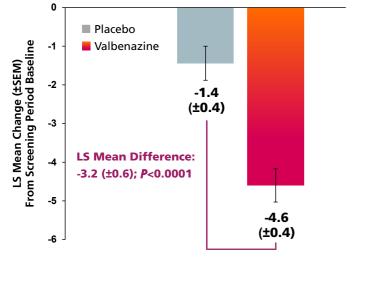
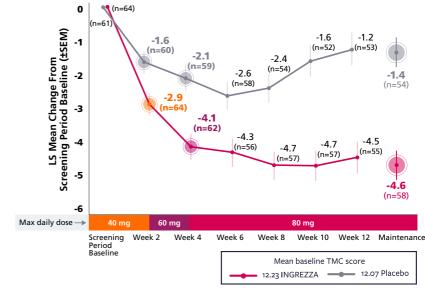


Figure B



Important Information Approved Uses

INGREZZA® (valbenazine) capsules is a prescription medicine used to treat

adults with: • movements in the face, tongue, or other body parts that cannot be

- controlled (tardive dyskinesia). • involuntary movements (chorea) of Huntington's disease. INGREZZA does
- not cure the cause of involuntary movements, and it does not treat other symptoms of Huntington's disease, such as problems with thinking or emotions It is not known if INGREZZA is safe and effective in children.

IMPORTANT SAFETY INFORMATION

INGREZZA can cause serious side effects in people with Huntington's

disease, including: depression, suicidal thoughts, or suicidal actions. Tell your healthcare provider before you start taking INGREZZA if you have Huntington's disease and are depressed (have untreated depression or depression that is not well controlled by medicine) or have suicidal thoughts. Pay close attention to any changes, especially sudden changes, in mood, behaviors, thoughts, or feelings. This is especially important when INGREZZA is started and when the dose is changed. Call your healthcare provider right away if you become depressed, have unusual changes in mood or behavior, or have thoughts of hurting yourself. Do not take INGREZZA if you:

• are allergic to valbenazine, or any of the ingredients in INGREZZA.

INGREZZA may cause serious side effects, including:

• Sudden swelling from an allergic reaction (angioedema). Sudden

swelling has happened after the first dose or after many doses of INGREZZA. Signs and symptoms of angioedema include: swelling of your face, lips, throat, and other areas of your skin, difficulty swallowing or breathing, and raised, red areas on your skin (hives). Swelling in the throat can be life-t and can lead to death. Go to the nearest emergency room right away if you develop these signs and symptoms. Your healthcare provider should stop your treatment with INGREZZA.

• Heart rhythm problems (QT prolongation). INGREZZA may cause a heart problem known as QT prolongation. Symptoms of QT prolongation may include: fast, slow, or irregular heartbeat, dizziness or fainting, or shortness of

Tell your healthcare provider right away if you have a change in your heartbeat (a fast or irregular heartbeat), or if you faint. • Neuroleptic Malignant Syndrome (NMS): NMS is a serious condition that

- can lead to death. Call a healthcare provider right away or go to the nearest emergency room if you develop these symptoms and they do not have another obvious cause: high fever, stiff muscles, problems thinking, very fast or uneven heartbeat, or increased sweating. • Abnormal movements (Parkinson-like). Symptoms include: shaking, body
- stiffness, trouble moving or walking, or keeping your balance. Before taking INGREZZA, tell your healthcare provider about all

of your medical conditions including if you: have liver or heart problems, are pregnant or plan to become pregnant, or are breastfeeding or plan to breastfeed. Tell your healthcare provider about all the medicines you take, including

prescription and over-the-counter medicines, vitamins, and herbal supplements. Sleepiness (sedation) is a common side effect with INGREZZA. While taking INGREZZA, do not drive a car or operate dangerous machinery until you know how INGREZZA affects you. Drinking alcohol and taking other drugs that may also cause sleepiness while you are taking INGREZZA may increase any sleepiness caused by INGREZZA.

The most common side effect of INGREZZA in people with tardive dyskinesia is sleepiness (somnolence). The most common side effects of INGREZZA in people with

Huntington's disease are sleepiness (somnolence), allergic itching, rash, and trouble getting to sleep or staying asleep. These are not all of the possible side effects of INGREZZA. Call your doctor for

medical advice about side effects. You are encouraged to report negative side effects of prescription drugs to the FDA. Visit MedWatch at www.fda.gov/medwatch or call 1-800-FDA-1088 Please see INGREZZA full Prescribing Information, including

Boxed Warning.

the treatment of HD chorea in adults and available resources.

Visit **INGREZZA.com** to learn more about INGREZZA for

REFERENCES:

1. INGREZZA capsules (package insert). San Diego, CA; Neurocrine Biosciences, Inc. 2023 2. Stimming EF, Claassen DO, Kayson E, et al. Safety and efficacy of valbenazine for the treatment of chorea associated with Huntington disease (KINECT-HD): a phase 3, randomised, double-blind, placebo-controlled trial. Lancet Neurol. 2023;22(6):494-504. doi:10.1016/S1474-4422(23)00127-8 3. Nance M, Paulsen JS, Rosenblatt A, Wheelock V. A Physician's Guide to the Management of Huntington's Disease. 3rd ed. Huntington's Disease Society of America; 2011. 4. Roos RA. Huntington's disease: a clinical review. Orphanet J Rare Dis. 2010;5:40. doi:10.1186/1750-1172-5-40 5. Unified Huntington's Disease Rating Scale: reliability and consistency. Huntington Study Group. Mov Disord. 1996;11(2):136-142. doi:10.1002/mds.870110204 6. Huntington's Disease Society of America. Overview of Huntington's disease. Huntington's Disease Society of America website. Published November 6, 2020. Accessed December 21, 2022. https://hdsa.org/what-is-hd/overview-of-huntingtons-disease. 7. Claassen DO, DeCourcy J, Mellor J, Johnston C, Iyer RG. Impact of chorea on self-care activity, employment, and health-care resource use in patients with Huntington's disease. J Health Econ Outcomes Res. 2021;8(1):99-105. doi:10.36469/001c.24620 8. Simpson JA, Lovecky D, Kogan J, Vetter LA, Yohrling GJ. Survey of the Huntington's disease patient and caregiver community reveals most impactful symptoms and treatment needs. J Huntingtons Dis. 2016;5(4):395-403.





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