

TD may negatively impact patients¹

TD often results in:

- Embarrassment²
- Social isolation²
- Exacerbation of stigma associated with existing mental illness^{2,3}

LIP PUCKERING,
POUTING, SMACKING^{2,4,5}

TONGUE PROTRUSION,
DARTING, "BONBON" SIGN^{2,4,5}

EYE BLINKING OR
SQUINTING^{2,4,5}

JAW BITING, CLENCHING,
LATERAL MOVEMENTS^{2,4,5}

TORSO HYPEREXTENSION,
SHIFTING, ROCKING^{2,4,5}

LIMB MOVEMENTS,
SWAYING, GRABBING^{2,4,5}



TD requires routine screening and may be a disruptive condition.^{2,3}

Not actual patients

 **INGREZZA™**
(valbenazine) capsules

INGREZZA selectively inhibits VMAT2,^a a key component of dopamine signaling¹⁻³

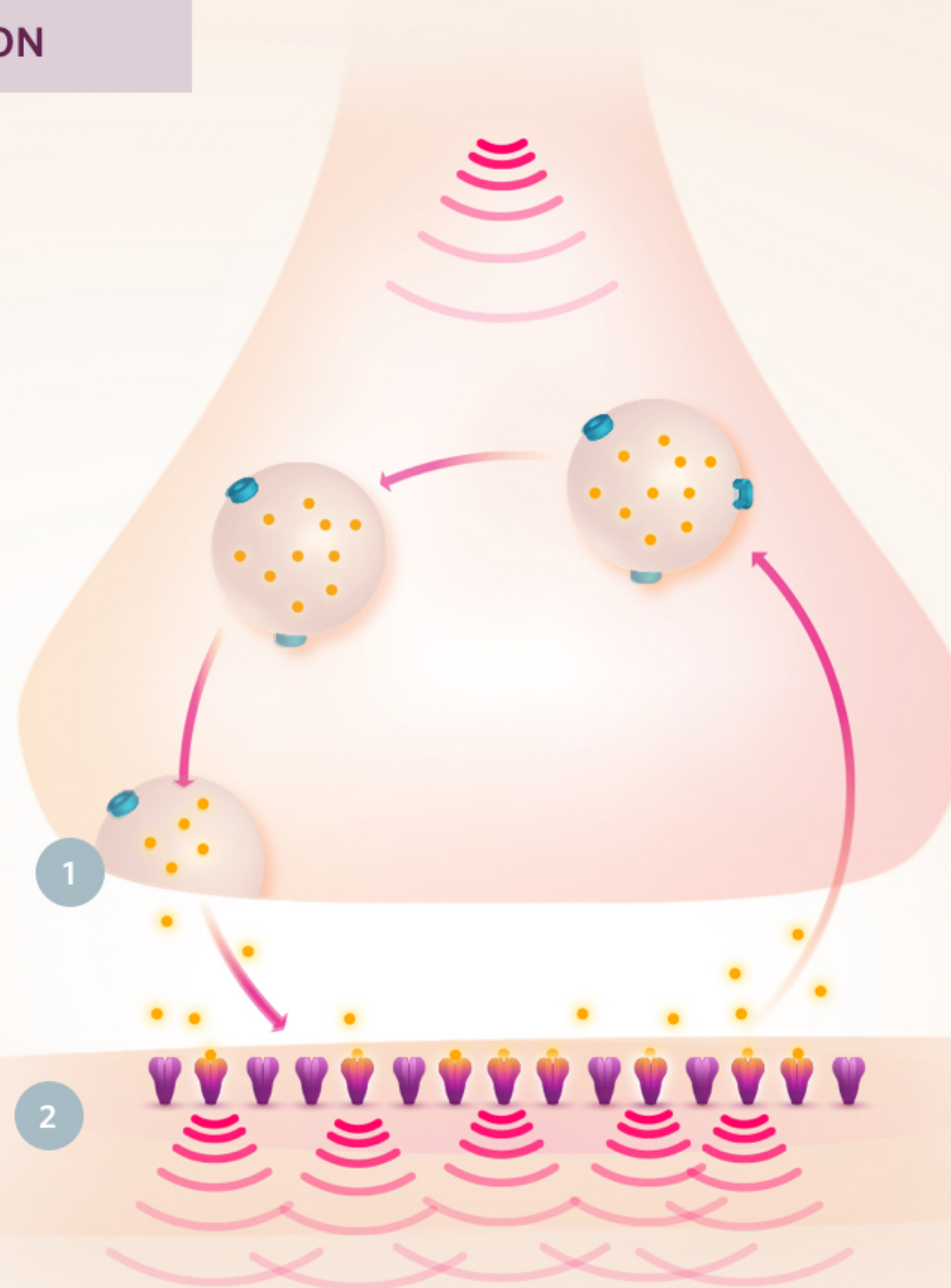
MECHANISM OF DISEASE

Hyperactive dopamine signaling and TD

- 1 TD is associated with prolonged exposure to dopamine receptor blocking agents (DRBAs), including antipsychotics, which may result in hyperactive dopamine signaling^{3,4}
- 2 This is believed to cause hypersensitivity in postsynaptic dopamine D2 receptors in one of the areas of the brain that controls motor function^{3,4}

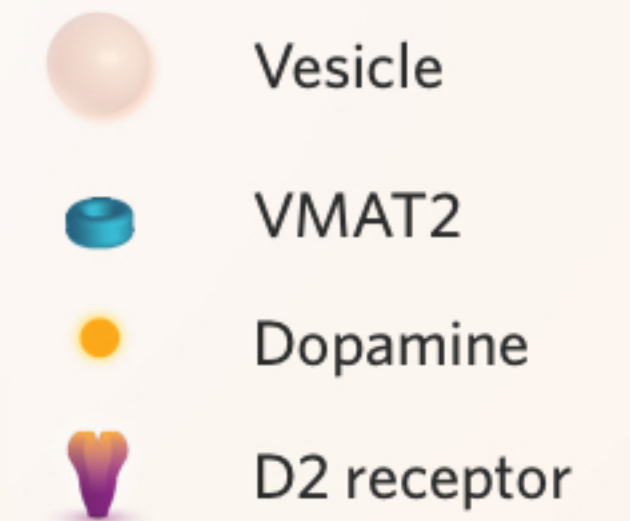
Even after DRBA use has stopped, TD may persist⁵

MECHANISM OF ACTION



VMAT2 plays a key role in dopamine signaling.¹⁻³

- VMAT2 is a transporter protein found in presynaptic neurons of the CNS
- VMAT2 packages monoamines (eg, dopamine) for release into the synaptic cleft



SELECT IMPORTANT SAFETY INFORMATION WARNINGS & PRECAUTIONS

QT Prolongation

INGREZZA may prolong the QT interval, although the degree of QT prolongation is not clinically significant at concentrations expected with recommended dosing. INGREZZA should be avoided in patients with congenital long QT syndrome or with arrhythmias associated with a prolonged QT interval. For patients at increased risk of a prolonged QT interval, assess the QT interval before increasing the dosage.

^a VMAT2, vesicular monoamine transporter 2.

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PRESCRIBING INFORMATION

IMPORTANT SAFETY INFORMATION

REFERENCES





INGREZZA selectively inhibits VMAT2,^a a key component of dopamine signaling¹⁻³

MECHANISM OF DISEASE

MECHANISM OF ACTION

INGREZZA selectively inhibits VMAT2¹


While the MOA is not fully understood, it is believed that:

- 1 It may be mediated through selective inhibition of VMAT2 in presynaptic neurons¹
- 2 INGREZZA provides reversible reductions of dopamine release into the synaptic cleft¹
- 3 INGREZZA reduces the amount of dopamine available to hypersensitive postsynaptic dopamine D2 receptors^{1,3}



INGREZZA selectively inhibits VMAT2, with no appreciable binding affinity for VMAT1, nor¹

- dopaminergic receptors (including D2)
- serotonergic receptors (including 5HT2B)
- adrenergic receptors
- histaminergic receptors
- muscarinic receptors

 INGREZZA

^a VMAT2, vesicular monoamine transporter 2.

SELECT IMPORTANT SAFETY INFORMATION

ADVERSE REACTIONS

The most common adverse reaction ($\geq 5\%$ and twice the rate of placebo) is somnolence. Other adverse reactions ($\geq 2\%$ and $>$ placebo) include: anticholinergic effects, balance disorders/falls, headache, akathisia, vomiting, nausea, and arthralgia.

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PRESCRIBING INFORMATION

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REFERENCES





In clinical trials, INGREZZA was generally well tolerated across a broad range of TD patients^{1,2}

ACROSS 3 KEY STUDIES¹

KINECT 3 ARs BY DOSE²

SAFETY ASSESSMENT SCALES²

Mean psychiatric scale scores generally remained stable across the study period²

Safety assessments of psychiatric disorders from baseline through 6 weeks

Disorder	Mean score increased or worsened	Measure
Schizophrenia	No	PANSS ^a
Mania	No	YMRS ^b
Suicidal ideation/behavior	No	CSSRS ^c
Depression	No	CDSS, ^d MADRS ^e

^a Mean change in Positive and Negative Syndrome Scale (PANSS) total score from baseline at 6 weeks was -0.5 for INGREZZA 40 mg, -0.3 for INGREZZA 80 mg, and ±0.0 for placebo.²

^b Mean change in Young Mania Rating Scale (YMRS) total score from baseline at 6 weeks was -0.4 for INGREZZA 40 mg, -1.4 for INGREZZA 80 mg, and +0.5 for placebo.²

^c Columbia Suicide Severity Rating Scale (CSSRS). Incidence of suicidal ideation or behavior was 5.6% for INGREZZA 40 mg, 2.5% for INGREZZA 80 mg, and 5.3% for placebo.²

^d Mean change in Calgary Depression Scale for Schizophrenia (CDSS) total score from baseline at 6 weeks was -0.5 for INGREZZA 40 mg, -0.4 for INGREZZA 80 mg, and -0.1 for placebo.²

^e Mean change in Montgomery-Asberg Depression Rating Scale (MADRS) total score from baseline at 6 weeks was ±0.0 for INGREZZA 40 mg, -1.5 for INGREZZA 80 mg, and +1.2 for placebo.²

ARs, adverse reactions.

Parkinsonism generally remained stable across the study period²

In one 6-week, phase 3, placebo-controlled study, the mean change from baseline on the Simpson-Angus Scale at 6 weeks was:

- -0.03 for INGREZZA 40 mg
- -0.04 for INGREZZA 80 mg

ADMINISTRATION INFORMATION

DRUG INTERACTIONS



PRESCRIBING INFORMATION

IMPORTANT SAFETY INFORMATION

REFERENCES





Introducing the INBRACE™ Support Program

Support designed to help patients who are prescribed INGREZZA

The program includes:

- Reimbursement assistance (eg, benefits investigation, information about the prior authorization and appeals process)
- Prescription fulfillment
- Product education and adherence support
- Financial assistance

Eligible patients may qualify for a \$0 copay on their INGREZZA prescription.*

INBRACE™
Support that surrounds you with care.

For additional information, visit
www.INBRACESupportProgram.com

You can also call **84-INGREZZA**
(844-647-3992), 8 am - 8 pm ET, M - F

* This offer is valid only for patients who have commercial (nongovernment-funded) insurance. Additional terms and conditions apply.



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