

Actor portrayal



INBRIJA<sup>™</sup> is a prescription medicine used when needed for OFF episodes in adults with Parkinson's treated with regular carbidopa/ levodopa medicine.

**Do not use** INBRIJA if you take or have taken a nonselective monoamine oxidase inhibitor such as phenelzine or tranylcypromine within the last 2 weeks.

Please see additional Important Safety Information on pages 10–11.

## Do Parkinson's symptoms interrupt your day?

When Parkinson's symptoms return between your regular doses of medication, it is known as an "OFF period."

In an online survey of more than 3000 people with Parkinson's conducted by the **Michael J. Fox Foundation**,

~70%

of respondents said they experienced at least 2 OFF periods a day

OFF periods can occur even when you're taking your Parkinson's medication regularly.



## Recognizing when Parkinson's symptoms start to return

Symptoms can vary from person to person and from OFF period to OFF period.

Look at the list below to see if you experience any of these symptoms, and talk to your doctor if symptoms return between doses of your regular Parkinson's medication.

#### Motor symptoms

- □ Shaking or tremor
- □ Slowness of movement
- Problems with balance
- Challenges with hand movements
- □ Speech difficulties
- □ Stiffness
- Difficulty getting out of a chair

### Nonmotor symptoms\*

- □ Anxiety/panic attacks
- Drenching sweats
- Difficulty thinking
- □ Fatigue or drowsiness
- Restlessness
- □ Irritability
- Sleep disturbances

\*The effect of INBRIJA on nonmotor symptoms of OFF periods is unknown.



## The only orally inhaled levodopa

INBRIJA is an inhaled form of the levodopa from your regular Parkinson's medication. INBRIJA does not replace your regular carbidopa/levodopa medicine.

Use INBRIJA as soon as you feel Parkinson's symptoms start to return (1 dose per OFF period, no more than 5 doses per day).

### INBRIJA may start to work in as soon as 10 minutes



### Use INBRIJA as needed when symptoms start to return

### Load, Breathe, & Repeat

The dose of INBRIJA is 2 capsules. Do not orally inhale more than 1 dose (2 capsules) for any OFF period. Do not take more than 5 doses (10 capsules) in a day.

- 1. Insert 1 capsule into the inhaler; when you push down and hear the click, your inhaler is ready to use.
- 2. Inhale INBRIJA, hold for 5 seconds.
- **3.** Remove the first capsule. Repeat with a second capsule.

Please see the Instructions For Use by visiting https://www.inbrija.com/inbrija-instructionsfor-use.pdf

**99.8**<sup>%</sup>

Prijaasia pondat of 629 people in 2 clinical studies were able to use INBRIJA during an OFF period after instruction

### **Selected Important Safety Information**

Tell your healthcare provider if you take:

- MAO-B inhibitors
- dopamine (D2) antagonists (including phenothiazines, butyrophenones, risperidone, metoclopramide)
- isoniazid
- iron salts or multivitamins that contain iron salts

**Do not** drive, operate machinery, or do other activities until you know how INBRIJA affects you. Sleepiness and falling asleep suddenly can happen as late as a year after treatment is started.

#### Please see additional Important Safety Information on pages 10–11.



## INBRIJA offers a unique inhaled delivery



INBRIJA may start to work in as soon as 10 minutes. In a large study, significant improvement in motor symptoms was seen 30 minutes after taking INBRIJA.



## INBRIJA is orally inhaled.

INBRIJA allows levodopa to enter the lungs with deep, comfortable breaths. From the lungs, levodopa gets into the blood and then to the brain. INBRIJA does not depend on the digestive tract to be absorbed.

- Before using INBRIJA, tell your healthcare provider if you have asthma, chronic obstructive pulmonary disease (COPD), or any chronic lung disease.
- Tell your healthcare provider if you experience bronchospasm. People with asthma, COPD, or other lung diseases may wheeze or have difficulty breathing after inhaling INBRIJA. If this occurs, stop taking INBRIJA and seek immediate medical attention.



## INBRIJA is for use as needed.

Take it as prescribed when your Parkinson's symptoms start to return (1 dose per OFF period, no more than 5 doses per day).

• Do not stop taking your daily Parkinson's medicine. INBRIJA does not replace your regular carbidopa/ levodopa medicine.

# INBRIJA is lightweight and portable.

INBRIJA is easy to carry with you. Store your INBRIJA at room temperature, 68°F to 77°F (20°C to 25°C), in a dry place.

• Keep the capsules in their foil (blister) packages until just before you're ready to use them.

#### **Selected Important Safety Information**

Before using INBRIJA, tell your healthcare provider about any other medical conditions, including:

- daytime sleepiness, sleep disorders, sleepiness/ drowsiness without warning, or use of medicine that increases sleepiness, including antidepressants or antipsychotics
- dizziness, nausea, sweating, or fainting when standing up
- abnormal movement (dyskinesia)
- mental health problems such as hallucinations or psychosis
- uncontrollable urges like gambling, sexual urges, spending money, or binge eating
- glaucoma
- pregnancy or plans to become pregnant. It is unknown if INBRIJA will harm an unborn baby.
- breastfeeding or plans to breastfeed. Levodopa can pass into breastmilk and it is unknown if it can harm the baby.

Please see additional Important Safety Information on pages 10-11.



### Ask your doctor about INBRIJA

Before starting INBRIJA, you must be on a carbidopa/ levodopa Parkinson's medication. INBRIJA does not replace this medication.

Symptoms can vary from person to person and from OFF period to OFF period. Nobody knows your OFF periods better than you.

Tell your doctor about your OFF periods and ask if adding INBRIJA may be right for you.

## Have questions about INBRIJA?

When it comes to getting INBRIJA, **Prescription Support Services** can help.

If you have questions about how to use INBRIJA or need assistance with understanding your insurance coverage, you can talk to a Prescription Support Services specialist to get answers.



Watch the Demonstration Video Online at HowToUseINBRIJA.com

#### **Selected Important Safety Information**

The most common side effects of INBRIJA are cough, upper respiratory tract infection, nausea, and change in the color of saliva or spit.

Please see additional Important Safety Information on pages 10–11.



Call toll-free:

### 1-888-887-3447

Toll-free 8 AM to 8 PM Eastern Time, Monday through Friday





### Important Safety Information

Do not use INBRIJA if you take or have taken a nonselective monoamine oxidase inhibitor such as phenelzine or tranylcypromine within the last 2 weeks.

Before using INBRIJA, tell your healthcare provider about your medical conditions, including:

- asthma, chronic obstructive pulmonary disease (COPD), or any chronic lung disease
- daytime sleepiness, sleep disorders, sleepiness/ drowsiness without warning, or use of medicine that increases sleepiness, including antidepressants or antipsychotics
- dizziness, nausea, sweating, or fainting when standing up
- abnormal movement (dyskinesia)
- mental health problems such as hallucinations or psychosis
- uncontrollable urges like gambling, sexual urges, spending money, or binge eating
- glaucoma
- pregnancy or plans to become pregnant. It is unknown if INBRIJA will harm an unborn baby.
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Tell your healthcare provider if you take:

- MAO-B inhibitors
- dopamine (D2) antagonists (including phenothiazines, butyrophenones, risperidone, metoclopramide)
- isoniazid
- iron salts or multivitamins that contain iron salts

**Do not** drive, operate machinery, or do other activities until you know how INBRIJA affects you. Sleepiness and falling asleep suddenly can happen as late as a year after treatment is started. Tell your healthcare provider if you experience the following side effects:

- falling asleep during normal daily activities with or without warning. If you become drowsy, do not drive or do activities where you need to be alert. Chances of falling asleep during normal activities increases if you take medicine that cause sleepiness.
- withdrawal-emergent hyperpyrexia and confusion (fever, stiff muscles, or changes in breathing and heartbeat) if you suddenly stop using INBRIJA or carbidopa/levodopa, or suddenly lower your dose of carbidopa/levodopa.
- **low blood pressure** when standing up (that may be with dizziness, fainting, nausea, and sweating). Get up slowly after sitting/lying down.
- hallucinations and other psychosis INBRIJA may cause or worsen seeing/hearing/believing things that are not real; confusion, disorientation, or disorganized thinking; trouble sleeping; dreaming a lot; being overly suspicious or feeling people want to harm you; acting aggressive; and feeling agitated/ restless.
- unusual uncontrollable urges such as gambling, binge eating, shopping, and sexual urges has occurred in some people using medicine like INBRIJA.
- uncontrolled, sudden body movements (dyskinesia) may be caused or worsened by INBRIJA. INBRIJA may need to be stopped or other Parkinson's medicines may need to be changed.
- bronchospasm people with asthma, COPD, or other lung diseases may wheeze or have difficulty breathing after inhaling INBRIJA. If this occurs, stop taking INBRIJA and seek immediate medical attention.
- **increased eye pressure** in patients with glaucoma. Your healthcare provider should monitor this.
- changes in certain lab values including liver tests

The most common side effects of INBRIJA are cough, upper respiratory tract infection, nausea, and change in the color of saliva or spit.

Do not orally inhale more than 1 dose (2 capsules) for any OFF period. Do not take more than 5 doses (10 capsules) in a day.

Please see Patient Information Leaflet by visiting https://www.inbrija.com/patient-information.pdf





### Don't take your Parkinson's symptoms sitting down

Tell your doctor about your OFF periods and ask if adding INBRIJA may be right for you.

#### Learn more at INBRIJA.com

#### **Selected Important Safety Information**

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#### Please see additional Important Safety Information on pages 10–11.



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