AUBAGIO® (teriflunomide) is a prescription medicine used to treat relapsing forms of multiple sclerosis (MS), to include clinically isolated syndrome, relapsing-remitting disease, and active secondary progressive disease, in adults.

IMPORTANT SAFETY INFORMATION

Do not take AUBAGIO if you have severe liver problems, are pregnant or of childbearing potential and not using effective birth control, have had an allergic reaction to AUBAGIO or leflunomide, or are taking a medicine called leflunomide for rheumatoid arthritis.

Please see Important Safety Information on pages 34 and 35 and accompanying full Prescribing Information, including boxed WARNING and Medication Guide, enclosed.
Each person’s relapsing MS is unique to them. But thinking about effectiveness, side effects, and how you take your medication are all things to consider when choosing a relapsing MS treatment. So, whether you’re looking to change your relapsing MS treatment, or newly diagnosed, AUBAGIO may be right for you.  

Do not take AUBAGIO if you have severe liver problems. AUBAGIO may cause serious liver problems, including liver failure that can be life-threatening and may require a liver transplant.

Please see Important Safety Information on pages 34 and 35 and accompanying full Prescribing Information, including boxed WARNING and Medication Guide, enclosed.

Since launch in the U.S., AUBAGIO has been prescribed to more than 75,000 people and counting.  

AUBAGIO is an option for people living with relapsing MS who are:  

- Newly diagnosed or have never used treatment  
- Changing therapies because of side effects from current relapsing MS medication  
- Switching therapies due to disease activity  
- Dissatisfied with their current treatment  

Your risk may be higher if you already have liver problems or take other medicines that affect your liver. Your healthcare provider should do blood tests to check your liver within 6 months before you start AUBAGIO and monthly for 6 months after starting AUBAGIO. Tell your healthcare provider right away if you develop any of these symptoms of liver problems: nausea, vomiting, stomach pain, loss of appetite, tiredness, yellowing of your skin or whites of your eyes, or dark urine.
IF YOU'RE **STARTING** TREATMENT

5 evaluation questions to ask yourself

1. **HOW DO I WANT TO TAKE MY RELAPSING MS TREATMENT?**
   - TURN TO PAGE 7

2. **IS A LONG-TERM SAFETY PROFILE IMPORTANT TO ME?**
   - TURN TO PAGES 10-11

3. **DO I KNOW THE EFFECTIVENESS OF OPTIONS I'M CONSIDERING?**
   - TURN TO PAGES 14-23

4. **AM I READY TO BEGIN A RELAPSING MS TREATMENT?**
   - TURN TO PAGE 25

5. **WHAT SIDE EFFECTS ARE DEAL BREAKERS FOR ME?**
   - TURN TO PAGES 26-28

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IF YOU'RE **CONSIDERING** CHANGING TREATMENT

5 reevaluation questions to ask yourself

1. **AM I HAPPY WITH THE WAY I TAKE MY CURRENT MEDICATION?**
   - TURN TO PAGE 7

2. **IS A LONG-TERM SAFETY PROFILE IMPORTANT TO ME?**
   - TURN TO PAGES 10-11

3. **WHAT IS THE AUBAGIO DATA ON RELAPSES AND LESIONS?**
   - TURN TO PAGES 14-19

4. **HAVE I NOTICED ANY CHANGES IN MY ABILITIES?**
   - TURN TO PAGES 20-23

5. **WILL I EXPERIENCE THE SAME POTENTIAL SIDE EFFECTS?**
   - TURN TO PAGES 26-29

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Please see Important Safety Information on pages 34 and 35 and accompanying full Prescribing Information, including boxed **WARNING** and Medication Guide, enclosed.
CONSIDER AUBAGIO, A PILL THAT MAY HELP PUT RELAPSING MS IN THE BACKGROUND¹

FIND OUT WHAT ONE PILL, ONCE A DAY CAN DO¹

AUBAGIO 14 mg is a once-daily pill that’s been proven to treat relapsing MS in 3 key ways, and it has a well-established safety profile.¹³⁻⁷

You can take AUBAGIO any time of day, with or without food. Ask your healthcare provider if AUBAGIO may help put your relapsing MS in the background.¹ Your healthcare provider will run certain tests before you start treatment. Once on AUBAGIO, your healthcare provider will monitor your liver enzyme levels monthly for the first 6 months and conduct periodic blood pressure checks.¹

Do not take AUBAGIO if you are pregnant. AUBAGIO may harm an unborn baby. You should have a pregnancy test before starting AUBAGIO. After stopping AUBAGIO, continue to use effective birth control until you have made sure your blood levels of AUBAGIO are lowered. If you become pregnant while taking AUBAGIO or within 2 years after stopping, tell your healthcare provider right away and enroll in the AUBAGIO Pregnancy Registry at 1-800-745-4447, option 2.

Please see Important Safety Information on pages 34 and 35 and accompanying full Prescribing Information, including boxed WARNING and Medication Guide, enclosed.
AUBAGIO HAS A WELL-ESTABLISHED HISTORY OF SAFETY IN TREATING RELAPSING MS¹-⁷

Talk to your healthcare provider about AUBAGIO’s long-term safety profile supported by more than 15 years of combined clinical trial and real-world experience.¹-⁷

AUBAGIO’S 15-YEAR SAFETY HISTORY INCLUDES CLINICAL TRIAL DATA AND REAL-WORLD EXPERIENCE¹-⁷

15+ YEARS

CLINICAL TRIAL DATA

REAL-WORLD EXPERIENCE

2004¹

2012 FDA APPROVAL¹

2019¹

Of ongoing clinical studies and real-world experience¹-⁷

Do not take AUBAGIO if you are of childbearing potential and not using effective birth control. It is not known if AUBAGIO passes into breast milk. Your healthcare provider can help you decide if you should take AUBAGIO or breastfeed – you should not do both at the same time.

Please see Important Safety Information on pages 34 and 35 and accompanying full Prescribing Information, including boxed WARNING and Medication Guide, enclosed.
ABOUT AUBAGIO

1. What’s an appropriate treatment option for where I am today?
2. Will I take it as prescribed?
3. Am I doing what I can to reduce relapses and slow my disability progression?
4. Am I confident in the safety profile?
5. Are side effects something that I’m concerned about?

A lot of questions occur when considering treatment options. Here are a few things to think about and to discuss with your healthcare team.

WHEN YOU ASK QUESTIONS, YOU GET ANSWERS

REEVALUATION IS PART OF LIFE

We do it every day. For anyone considering a treatment change, use all you’ve learned about your relapsing MS to reevaluate your needs today.

And if you are looking to start your first treatment, keep reading to learn about a once-daily pill that may help put relapsing MS in the background.

*A healthcare provider measures disability progression using a test called the Expanded Disability Status Scale, or EDSS. Your first score—or your “baseline”—will determine how your disability is gauged moving forward. If your baseline score is ≤5.5, you’re considered to have sustained disability progression if that score goes up by one point (lasting at least 12 weeks). If your baseline score is >5.5, you’re considered to have sustained disability progression if that score goes up by at least 0.5 points (lasting at least 12 weeks).†

†14 mg only.

If you are a man whose partner plans to become pregnant, you should stop taking AUBAGIO and talk with your healthcare provider about reducing the levels of AUBAGIO in your blood. If your partner does not plan to become pregnant, use effective birth control while taking AUBAGIO.

If you are a man whose partner plans to become pregnant, you should stop taking AUBAGIO and talk with your healthcare provider about reducing the levels of AUBAGIO in your blood. If your partner does not plan to become pregnant, use effective birth control while taking AUBAGIO.

AUBAGIO 14 mg WAS EFFECTIVE IN Treating RELAPSING MS IN 3 WAYS

1. AUBAGIO REDUCED RELAPSES
The majority of people taking AUBAGIO did not experience a relapse during original clinical studies.

2. AUBAGIO DECREASED THE NUMBER OF NEW LESIONS
AUBAGIO 14 mg decreased the number of new brain lesions by 80% vs. placebo.

3. AUBAGIO SLOWED DISABILITY PROGRESSION
80% and 84% of people taking AUBAGIO experienced no disability progression over 2 years during Clinical Trials 1 and 2, respectively.

When you ask questions, you get answers.

Reevaluation is part of life.

AUBAGIO 14 mg was effective in treating relapsing MS in 3 ways:

1. AUBAGIO reduced relapses
The majority of people taking AUBAGIO did not experience a relapse during original clinical studies.

2. AUBAGIO decreased the number of new lesions
AUBAGIO 14 mg decreased the number of new brain lesions by 80% vs. placebo.

3. AUBAGIO slowed disability progression
80% and 84% of people taking AUBAGIO experienced no disability progression over 2 years during Clinical Trials 1 and 2, respectively.

If you are a man whose partner plans to become pregnant, you should stop taking AUBAGIO and talk with your healthcare provider about reducing the levels of AUBAGIO in your blood. If your partner does not plan to become pregnant, use effective birth control while taking AUBAGIO.

*Healthcare providers measure disability progression using a test called the Expanded Disability Status Scale, or EDSS. Your first score—or your “baseline”—will determine how your disability is gauged moving forward. If your baseline score is ≤5.5, you’re considered to have sustained disability progression if that score goes up by one point (lasting at least 12 weeks). If your baseline score is >5.5, you’re considered to have sustained disability progression if that score goes up by at least 0.5 points (lasting at least 12 weeks).†

†14 mg only.

Patient Portrayal

Please see Important Safety Information on pages 34 and 35 and accompanying full Prescribing Information, including boxed WARNING and Medication Guide, enclosed.
AUBAGIO HAS BEEN STUDIED IN THREE PHASE 3 TRIALS

In three Phase 3 clinical trials, AUBAGIO 14 mg was effective against placebo (pills with no medicine) in 3 key measures: reduced relapses, decreased number of new lesions, and slowed disability progression. AUBAGIO 7 mg was effective against placebo in 2 of the 3 key measures—reduced relapses and decreased number of new lesions.

AUBAGIO WAS STUDIED VS. PLACEBO

In 3 CLINICAL TRIALS
With more than 2,800 PEOPLE
For up to 108 WEEKS
In doses of 14 mg & 7 mg

Patient Portrayal

Please see Important Safety Information on pages 34 and 35 and accompanying full Prescribing Information, including boxed WARNING and Medication Guide, enclosed.

CLINICAL TRIAL 1
TEMSO1,6
1,088 PEOPLE
who had at least 1 relapse during 1 year prior to trial, or 2 relapses during 2 years prior to trial

CLINICAL TRIAL 2
TOWER1,3
1,165 PEOPLE
who had at least 1 relapse during 1 year prior to trial, or 2 relapses during 2 years prior to trial

CLINICAL TRIAL 3
TOPIC1,5
614 PEOPLE
who had their 1st clinical event within 3 months prior to trial, and 2 or more lesions characteristic of relapsing MS

*The clinical trials were each given a name. Trial 1 was called TEMSO; Trial 2 was called TOWER; and Trial 3 was called TOPIC.
REDUCING RELAPSES IS KEY

All relapses, whether mild or severe, are signs that MS is active.

AUBAGIO REDUCED THE RISK OF RELAPSES¹

In 2 clinical trials, AUBAGIO helped reduce the risk of relapses vs. placebo.

CLINICAL TRIAL 1
31% REDUCTION IN RELAPSE RATE
on AUBAGIO 14 mg and 7 mg vs. placebo

CLINICAL TRIAL 2
36% REDUCTION IN RELAPSE RATE
22% reduction in relapse rate on AUBAGIO 7 mg vs. placebo

AUBAGIO KEPT MORE PEOPLE FREE OF RELAPSES¹

In all 3 clinical trials, AUBAGIO kept more people relapse-free vs. placebo.

CLINICAL TRIAL 1
57% REMAINED RELAPSE-FREE
on AUBAGIO 14 mg vs. 46% with placebo
54% remained relapse-free on AUBAGIO 7 mg vs. 46% with placebo

CLINICAL TRIAL 2
57% REMAINED RELAPSE-FREE
on AUBAGIO 14 mg vs. 47% with placebo
58% remained relapse-free on AUBAGIO 7 mg vs. 47% with placebo

CLINICAL TRIAL 3
72% REMAINED RELAPSE-FREE
on AUBAGIO 14 mg vs. 62% with placebo
71% remained relapse-free on AUBAGIO 7 mg vs. 62% with placebo

Do not take AUBAGIO if you have had an allergic reaction to AUBAGIO or a medicine called leflunomide.

Please see Important Safety Information on pages 34 and 35 and accompanying full Prescribing Information, including boxed WARNING and Medication Guide, enclosed.
AUBAGIO 14 mg maintained its impact on relapses for up to 7.5 years, in the original and the extension study.\(^1,7\)

An extension study follows participants after the original trial has ended and looks at their long-term experience with the medication.\(^7\)

- Original clinical study: ~1 relapse over 2 years for patients taking placebo\(^1\)
- Extension study: ~1 relapse over 6 years for patients taking AUBAGIO 14 mg\(^7\)
- Original clinical study: 31% reduction in relapse rate with AUBAGIO 7 mg versus placebo\(^1\)
- In the original clinical study 2 (TOWER), there was 36% reduction in relapse rate with AUBAGIO 14 mg and 22% with AUBAGIO 7 mg vs placebo\(^1\)

A doctor’s note:

Symptoms of relapses may not always be visible. This is why it’s important to partner closely with your healthcare provider.

Do not take AUBAGIO if you take a medicine called leflunomide for rheumatoid arthritis.
TAKE NEW LESIONS INTO ACCOUNT

New lesions can be a “silent” sign that relapsing MS is getting worse. You may not have symptoms but your disease is still active.

The MSAA MRI Access Fund may be able to help eligible patients cover the cost of regular MRIs.

Visit myMSAA.org to learn more.

A DOCTOR’S NOTE:
It’s recommended that people living with RMS have regular MRIs. Use your first MRI as a baseline and then compare to any MRIs performed after that.

AUBAGIO DECREASED THE NUMBER OF NEW LESIONS*.

One clinical trial looked at brain lesions as a key measure of disease activity. People taking AUBAGIO had fewer new brain lesions vs. placebo.

- 80% FEWER NEW LESIONS
  - with AUBAGIO 14 mg vs. placebo
  - 57% fewer new lesions with AUBAGIO 7 mg vs. placebo

*Average contrast-enhancing lesions per scan.

AUBAGIO may stay in your blood for up to 2 years after you stop taking it. Your healthcare provider can prescribe a medicine that can remove AUBAGIO from your blood quickly.

Please see Important Safety Information on pages 34 and 35 and accompanying full Prescribing Information, including boxed WARNING and Medication Guide, enclosed.
SLOW THE PROGRESSION OF DISABILITY

Disability progression can affect functions of the body, such as motor, sensory, bowel and bladder, visual and mood.  

A DOCTOR’S NOTE:  
It’s never too early to think about slowing disability progression. If you’re newly diagnosed, talk to your healthcare provider about making this a goal.

Before taking AUBAGIO, talk with your healthcare provider if you have: liver or kidney problems; a fever or infection, or if you are unable to fight infections; numbness or tingling in your hands or feet that is different from your MS symptoms; diabetes; serious skin problems when taking other medicines; breathing problems; or high blood pressure. Your healthcare provider will check your blood cell count and TB test before you start AUBAGIO. Talk with your healthcare provider if you take or are planning to take other medicines (especially medicines for treating cancer or controlling your immune system), over-the-counter medicines, vitamins or herbal supplements.

*A healthcare providers measure disability progression using a test called the Expanded Disability Status Scale, or EDSS. Your first score—or your “baseline”—will determine how your disability is gauged moving forward. If your baseline score is ≤5.5, you’re considered to have sustained disability progression if that score goes up by 1 point (lasting at least 12 weeks). If your baseline score is >5.5, you’re considered to have sustained disability progression if that score goes up by at least 0.5 points (lasting at least 12 weeks).  

The mean EDSS at baseline was 2.7 in both Clinical Trial 1 and Clinical Trial 2.

AUBAGIO SLOWED DISABILITY PROGRESSION

AUBAGIO 14 mg was shown to help keep people free of disability progression.

Disability progression* was looked at in 2 of the clinical trials. In both of those trials, AUBAGIO 14 mg was shown to help keep more people free from disability progression. AUBAGIO 7 mg did not achieve a statistically significant reduction in risk of sustained disability progression.

80% SHOWED NO DISABILITY PROGRESSION with AUBAGIO 14 mg vs. 73% with placebo

78% remained free of disability progression with AUBAGIO 7 mg vs. 73% with placebo*

84% SHOWED NO DISABILITY PROGRESSION with AUBAGIO 14 mg vs. 80% with placebo

79% remained free of disability progression with AUBAGIO 7 mg vs. 80% with placebo*

Please see Important Safety Information on pages 34 and 35 and accompanying full Prescribing Information, including boxed WARNING and Medication Guide, enclosed.
In the original and extension study of Clinical Trial 1, the majority of people taking AUBAGIO 14 mg remained free of disability progression for up to 7.5 years.\(^7\)

- 61.5% of people taking AUBAGIO 7 mg remained free of disability progression for up to 7.5 years.
- 59% of people taking placebo for 2 years and then switching to AUBAGIO 14 mg in the extension study remained free of disability progression for up to 7.5 years.
- 54% of people taking placebo for 2 years and then switching to AUBAGIO 7 mg in the extension study remained free of disability progression for up to 7.5 years.

When your level of disability remains stable, that means you may continue doing the things you enjoy for as long as possible.

AUBAGIO CONTINUED TO SLOW DISABILITY PROGRESSION OVER TIME\(^7\)

Expanding Disability Status Scale (EDSS)

- For most patients their level of disability remained relatively stable, with a change in EDSS of less than 0.5\(^7\).

AUBAGIO may cause serious side effects. Tell your doctor if you have any of the following:

- Serious skin reactions that may lead to death: Stop taking AUBAGIO if you have rash or redness and peeling, mouth sores or blisters.
- Other allergic reactions that may affect different parts of the body. If you have a fever or rash in combination with severe muscle pain, swollen lymph glands, swelling of your face, unusual bruising or bleeding, weakness or tiredness, or yellowing of your skin or the whites of your eyes, stop taking AUBAGIO and call your doctor right away.

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SEE HOW AUBAGIO IS THOUGHT TO WORK¹,¹⁰

MS is thought to occur when a distinct set of immune cells become destructive and attack the central nervous system, specifically targeting the outer covering of the nerves known as the myelin sheath. When you take AUBAGIO it blocks an enzyme that’s needed for these cells to multiply. Blocking this enzyme is like a dimmer switch that dials down the cell’s ability to multiply. While we don’t fully understand how AUBAGIO works in relapsing MS, we do know that it works differently from other relapsing MS medicines.¹,¹⁰

When you have relapsing MS, certain immune cells in your body become destructive and multiply.¹,¹¹

AUBAGIO blocks an enzyme called DHODH that these destructive cells need to keep multiplying.¹,¹¹

Taken daily, AUBAGIO reduces the number of immune cells, including destructive immune cells that are thought to cause MS flare-ups, while still allowing normal immune cell activity to occur.¹,¹¹

AUBAGIO may stay in your blood for up to 2 years after you stop taking it. Your healthcare provider can prescribe a medicine that can remove AUBAGIO from your blood quickly.

CHOOSING A TREATMENT THAT WORKS FOR YOU

MS is different for everyone. So what works well for one person might not work so well for another. It’s important to understand this. Whether you’re new to treatment or considering a change, don’t settle for less than you deserve.

Consider your own goals, relay them to your healthcare team, and together make the choice you think is best for your relapsing MS treatment. And if you have any questions along the way, you can always speak to one of our Nurses 24/7 at 1-855-676-6326.

For illustrative purposes only.

Please see Important Safety Information on pages 34 and 35 and accompanying full Prescribing Information, including boxed WARNING and Medication Guide, enclosed.
LEARN ABOUT SIDE EFFECTS

Different treatments have different side effects. It’s important to know the serious risks of any medication you take. 10

If you experience any of the following side effects while taking AUBAGIO, speak with your healthcare provider right away. In addition to the risk of liver problems, including liver failure that can be life-threatening and may require a liver transplant, and the risk of harm to an unborn baby, other serious side effects include:

• Decreases in white blood cell count – this may cause you to have more infections
• Certain vaccinations should be avoided during treatment with AUBAGIO and for at least 6 months after discontinuation
• Allergic reactions
• Serious skin reactions that may lead to death

• Other allergic reactions that may affect different parts of the body such as your liver, kidneys, heart, or blood cells
• Numbness or tingling in your hands or feet that is different from your MS symptoms
• High blood pressure
• Breathing problems (new or worsening) that may be serious and lead to death

Different treatments have different side effects. It’s important to know the serious risks of any medication you take.

THE MOST COMMON SIDE EFFECTS ASSOCIATED WITH AUBAGIO 1

Here are some of the most common side effects reported in clinical trials. These are not all the side effects.

Tell your HCP if you have any side effect that bothers you or does not go away.

THE NUMBER OF PEOPLE WHO STOPPED TAKING AUBAGIO DUE TO COMMON SIDE EFFECTS 2

Here are the discontinuation rates due to common side effects in clinical trials.

Please see Important Safety Information on pages 34 and 35 and accompanying full Prescribing Information, including boxed WARNING and Medication Guide, enclosed.
Hair thinning with AUBAGIO is similar to hair thinning that may happen with childbirth, stress, and iron deficiency. Some people may worry that their hair thinning with AUBAGIO is similar to what may happen with chemotherapy. That’s not the case.

With AUBAGIO, clinical studies found hair loss is usually temporary and may occur around 3 months after beginning treatment. In clinical trials, 15 out of more than 2,000 people stopped taking AUBAGIO due to hair thinning or loss. Individual experiences may vary.

### ABOUT HAIR THINNING OR LOSS

**Hair thinning with AUBAGIO is similar to hair thinning that may happen with childbirth, stress, and iron deficiency.** Some people may worry that their hair thinning with AUBAGIO is similar to what may happen with chemotherapy. That’s not the case.

With AUBAGIO, clinical studies found hair loss is usually temporary and may occur around 3 months after beginning treatment.

In clinical trials, 15 out of more than 2,000 people stopped taking AUBAGIO due to hair thinning or loss.

<table>
<thead>
<tr>
<th>DOSAGE</th>
<th>OUTCOME</th>
<th>PERCENTAGE</th>
</tr>
</thead>
<tbody>
<tr>
<td>AUBAGIO 14 mg</td>
<td>REPORTED HAIR LOSS*</td>
<td>13%</td>
</tr>
<tr>
<td></td>
<td>DID NOT REPORT HAIR LOSS*</td>
<td>87%</td>
</tr>
<tr>
<td>AUBAGIO 7 mg</td>
<td>REPORTED HAIR LOSS*</td>
<td>10%</td>
</tr>
<tr>
<td></td>
<td>DID NOT REPORT HAIR LOSS*</td>
<td>90%</td>
</tr>
</tbody>
</table>

This means that most people who reported experiencing hair thinning or loss did not stop taking AUBAGIO as a result.

*In clinical trials, about 1 in 20 people taking placebo (5% of 997 patients) reported experiencing hair thinning or loss.

†Out of 2,047 patients taking AUBAGIO in studies, 1.3% of patients (13 people) on 14 mg and 0.2% (2 people) on 7 mg discontinued due to hair thinning or loss vs. 0.1% (1 person) on placebo.

### POSSIBLE SIDE EFFECTS

Considering changing treatment? Ask yourself these questions:

1. Has my experience with side effects changed or gotten worse since I first began my treatment?
2. Are side effects getting in the way of my everyday activities and responsibilities?
3. Do I sometimes wish I could skip my treatment because of side effects?
4. Which potential side effects do I feel I can manage and which are deal breakers?

If side effects are getting in the way of your daily life, it may be time to reevaluate your relapsing MS treatment. And if you are looking to start your first treatment, remember different treatments have different side effects. So take a moment to think about which ones are deal breakers for you.

*In clinical trials, about 1 in 20 people taking placebo (5% of 997 patients) reported experiencing hair thinning or loss.

†Out of 2,047 patients taking AUBAGIO in studies, 1.3% of patients (13 people) on 14 mg and 0.2% (2 people) on 7 mg discontinued due to hair thinning or loss vs. 0.1% (1 person) on placebo.

Heather, from Wisconsin
On AUBAGIO 14 mg
Individual experiences may vary.

*Has my experience with side effects changed or gotten worse since I first began my treatment?

†Are side effects getting in the way of my everyday activities and responsibilities?

‡Do I sometimes wish I could skip my treatment because of side effects?

§Which potential side effects do I feel I can manage and which are deal breakers?

In clinical trials, 15 out of more than 2,000 people stopped taking AUBAGIO due to hair thinning or loss.

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Please see Important Safety Information on pages 34 and 35 and accompanying full Prescribing Information, including boxed WARNING and Medication Guide, enclosed.
BEGINNING TREATMENT WITH AUBAGIO

BEFORE YOU START
Your healthcare provider will need to run a few tests before beginning treatment, including:

- Blood tests to check your liver within 6 months of starting treatment
- TB (tuberculosis) skin test or blood test for mycobacterium tuberculosis infection
- Pregnancy test, if you are a woman of childbearing potential
- Complete blood count within 6 months of starting treatment
- Periodic blood pressure checks

These tests are often done at the same time.

AFTER YOU START
Your healthcare provider will need to:

- Monitor your liver enzymes for the first 6 months
- Check your blood pressure periodically after starting treatment

Please see Important Safety Information on pages 34 and 35 and accompanying full Prescribing Information, including boxed WARNING and Medication Guide, enclosed.

CONNECT. INSPIRE. SUPPORT.

Join COMMON THREADS
Members get access to:

- AUBAGIO & You
  Stay informed and inspired with a comprehensive program for people beginning AUBAGIO.
- Living Well
  Monthly topics focused on living well with relapsing MS, keeping positive, and hearing from others.
- Tips & Stories
  Community members share their experiences, stories, tips, hope, and wisdom.

Join now and receive Fresh Start, a complimentary cookbook, for Common Threads members.
GETTING THE SUPPORT YOU NEED

AUBAGIO PROVIDES SUPPORT THAT’S TRULY PERSONAL

Once you start taking AUBAGIO, you’ll have access to optional support services including:

Dedicated Nurse Support
• Your nurse will be available Monday–Friday during normal business hours*
• You won’t have to start over with your story
• Additional support from on-call Nurses 24/7

Assistance Navigating Insurance
• Benefits verification
• Financial assistance, for those who are eligible

Tools & Tips
• Helpful tools and smart tips to help manage MS

Visit aubagio.com/ms-one-to-one to learn more.

AUBAGIO OFFERS A $0 CO-PAY FOR ELIGIBLE PATIENTS

The last thing you want to worry about is paying for your medication. That’s why the AUBAGIO Co-Pay Program† offers assistance for those with commercial insurance. It assists with co-pays and co-insurance for the cost of AUBAGIO—regardless of your financial status.

Once enrolled in the Program, you’ll have a $0 co-payment for the cost of your AUBAGIO prescription.

IF YOU DON’T HAVE INSURANCE OR ARE HAVING DIFFICULTY PAYING FOR YOUR TREATMENT, CALL:
1.855.676.6326
to talk to an MS One to One® nurse for more info.
You may also want to check with your local patient advocacy group about other support options.

*Your dedicated Nurse will provide you with her/his specific work hours and direct extension for your convenience.

†Out-of-pocket costs related to medication, appointments, evaluations, testing, or other related services are not covered by the AUBAGIO Co-Pay Program. The AUBAGIO Co-Pay Program is not available for prescriptions purchased under Medicare, Medicaid, TRICARE, or other federal- and state-funded programs. SANOFI GENZYME reserves the right to amend or terminate the program.

Please see Important Safety Information on pages 34 and 35 and accompanying full Prescribing Information, including boxed WARNING and Medication Guide, enclosed.
INDICATION AND IMPORTANT SAFETY INFORMATION

INDICATION
AUBAGIO® (teriflunomide) is a prescription medicine used to treat relapsing forms of multiple sclerosis (MS), to include clinically isolated syndrome, relapsing-remitting disease, and active secondary progressive disease, in adults.

IMPORTANT SAFETY INFORMATION

DO NOT TAKE AUBAGIO IF YOU:
- Have severe liver problems. AUBAGIO may cause serious liver problems, including liver failure that can be life-threatening and may require a liver transplant. Your risk may be higher if you already have liver problems or take other medicines that affect your liver.
- Are pregnant or planning to become pregnant. AUBAGIO may cause serious liver problems in your unborn baby. It is not known if AUBAGIO passes into breast milk. You should not breastfeed while taking AUBAGIO.
- Are of childbearing potential and not using effective birth control.
- Are of childbearing potential and are planning to become pregnant.
- Have moderate or severe liver problems.
- Do not receive certain vaccinations while taking AUBAGIO.

Before taking AUBAGIO, talk with your healthcare provider if you have:
- Hepatitis.
- A fever or a skin reaction.
- A severe skin reaction.
- An allergic reaction to leflunomide.
- A history of a severe skin reaction.
- A history of a severe liver reaction.
- A history of any of the following:
  - High blood pressure
  - Renal problems
  - Seizures
  - Blood disorders

Please see full Prescribing Information, including boxed WARNING and Medication Guide, enclosed.

WARNING
If you have a fever or more infections. Symptoms include:
- Fever, tiredness, body aches, chills, nausea, or vomiting. Patients with low white blood cell count should receive certain vaccinations during AUBAGIO treatment and 6 months after.
- Allergic reactions such as difficulty breathing, itching, or swelling on any part of your body including lips, eyes, throat, or tongue. Stop taking AUBAGIO and call your doctor right away.
- Serious skin reactions that may lead to death. Stop taking AUBAGIO if you have rash or redness and peeling, mouth sores or blisters.
- Other allergic reactions that may affect different parts of the body. If you have a fever or rash in combination with severe muscle pain, swollen lymph glands, swelling of your face, unusual bruising or bleeding, weakness or tiredness, or yellowing of your skin or the whites of your eyes, stop taking AUBAGIO and call your doctor right away.

The most common side effects when taking AUBAGIO include: headache; diarrhea; nausea; hair thinning or loss; and abnormal liver test results. These are not all the side effects of AUBAGIO. Tell your healthcare provider about any side effect that bothers you.

Consult your healthcare provider if you have questions about your health or any medications you may be taking, including AUBAGIO.

See full Prescribing Information, including boxed WARNING and Medication Guide, enclosed.

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