

*Based on IQVIA data from May 2018 to June 2023.

INDICATION

Chronic Migraine

BOTOX® (onabotulinumtoxinA) for injection is indicated for the prophylaxis of headaches in adult patients with chronic migraine (≥15 days per month with headache lasting 4 hours a day or longer).

Limitations of Use

Safety and effectiveness have not been established for the prophylaxis of episodic migraine (14 headache days or fewer per month) in 7 placebo-controlled studies.

IMPORTANT SAFETY INFORMATION, INCLUDING BOXED WARNING

WARNING: DISTANT SPREAD OF TOXIN EFFECT

Postmarketing reports indicate that the effects of BOTOX and all botulinum toxin products may spread from the area of injection to produce symptoms consistent with botulinum toxin effects. These may include asthenia, generalized muscle weakness, diplopia, ptosis, dysphagia, dysphonia, dysarthria, urinary incontinence, and breathing difficulties. These symptoms have been reported hours to weeks after injection. Swallowing and breathing difficulties can be life threatening, and there have been reports of death. The risk of symptoms is probably greatest in children treated for spasticity, but symptoms can also occur in adults treated for spasticity and other conditions, particularly in those patients who have an underlying condition that would predispose them to these symptoms. In unapproved uses and approved indications, cases of spread of effect have been reported at doses comparable to those used to treat cervical dystonia and spasticity and at lower doses.

Please see additional Important Safety Information throughout.

Please see accompanying full Prescribing Information, including Boxed Warning and Medication Guide, or visit https://www.rxabbvie.com/pdf/botox pi.pdf



*Based on IQVIA data from May 2018 to June 2023

The importance of a Chronic Migraine diagnosis

Many Chronic Migraine patients experience a long, complicated journey before diagnosis

75% of patients did not receive a Chronic Migraine diagnosis.^{3,*}

It may take 5+ years for patients to seek specialist care for headache/migraine symptoms and receive a diagnosis.4,†



Chronic Migraine is defined by⁵:

headache days per month

headache days are migraine days per month

hours of headache per day

Earlier diagnosis helps Chronic Migraine patients begin their treatment journey sooner

*Based on a study of Chronic Migraine patients (N = 512) who had sought evaluation from a healthcare professional (specialist or non-specialist) for their headaches. [†]Based on a study of patients (N = 200) interviewed about the time delay from symptom onset to diagnosis.

IMPORTANT SAFETY INFORMATION (continued)

CONTRAINDICATIONS

BOTOX is contraindicated in the presence of infection at the proposed injection site(s) and in patients who are hypersensitive to any botulinum toxin product or to any of the components in the formulation.

WARNINGS AND PRECAUTIONS

Spread of Toxin Effect

See Boxed Warning.

No definitive serious adverse event reports of distant spread of toxin effect associated with BOTOX for chronic migraine at the labeled dose have

Lack of Interchangeability Between Botulinum Toxin Products

The potency Units of BOTOX are specific to the preparation and assay method utilized. They are not interchangeable with other preparations of botulinum toxin products and, therefore, Units of biological activity of BOTOX cannot be compared to nor converted into Units of any other botulinum toxin products assessed with any other specific assay method.

Why wait? Patients want to start and stay on treatment

READY TODAY

In a survey,

wish they talked to their doctor and started treatment sooner6

According to patients surveyed after starting BOTOX® for Chronic Migraine treatment (n = 78).

would recommend that a friend talk to their doctor about BOTOX®7

According to market research (n = 78).

CHOOSE TO STAY

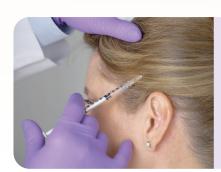
In a survey,

of current BOTOX® patients say they plan to continue treatment8

According to patients surveyed after starting BOTOX® for Chronic Migraine treatment (n = 78).

of BOTOX® patients (71%) stayed on treatment for 12 months9

Based on 2020 Truven MarketScan data (N = 6009) of BOTOX® for Chronic Migraine patients who returned for their fourth treatment.



With a legacy of 13+ years in Chronic Migraine, 10,8 there is only one BOTOX®

1+ million Chronic Migraine patients treated as of June 2023"

§Since FDA approval in 2010.

IMPORTANT SAFETY INFORMATION (continued) WARNINGS AND PRECAUTIONS (continued)

Serious Adverse Reactions With Unapproved Use

Serious adverse reactions, including excessive weakness, dysphagia, and aspiration pneumonia, with some adverse reactions associated with fatal outcomes, have been reported in patients who received BOTÓX injections for unapproved uses. In these cases, the adverse reactions were not necessarily related to distant spread of toxin, but may have resulted from the administration of BOTOX to the site of injection and/or adjacent structures. In several of the cases, patients had preexisting dysphagia or other significant disabilities. There is insufficient information to identify factors associated with an increased risk for adverse reactions associated with the unapproved uses of BOTOX. The safety and effectiveness of BOTOX for unapproved uses have not been established.

Hypersensitivity Reactions

Serious and/or immediate hypersensitivity reactions have been reported. These reactions include anaphylaxis, serum sickness, urticaria, soft-tissue edema, and dyspnea. If such a reaction occurs, further injection of BOTOX should be discontinued and appropriate medical therapy immediately instituted. One fatal case of anaphylaxis has been reported in which lidocaine was used as the diluent, and consequently, the causal agent cannot be reliably determined.

Please see additional Important Safety Information throughout.

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"Based on IQVIA data from May 2018 to June 2023

Talk to your patients about the BOTOX® Savings Program (BSP)

Help BOTOX® patients enroll today

Eligible patients may pay as little Medicare lives covered^{12,†}



Patients may save up to \$4000 per year and up to \$1300 for the first treatment in each calendar year*

*Eligibility: Available to patients with commercial insurance coverage for BOTOX® (onabotulinumtoxinA) who meet eligibility

For questions about the program, please call 1-800-44-BOTOX.

Formulary coverage does not imply safety or efficacy.

[‡]Based on insurance coverage, reimbursement may be up to \$1300 for the first treatment in a calendar year and \$1000 for each subsequent treatment in the same calendar year with a maximum savings limit of \$4000 per calendar year; patient out-of-pocket expense may vary.

criteria. This co-pay assistance program is not available to patients receiving prescription reimbursement under any federal, state, or government-funded insurance programs (for example, Medicare [including Part D], Medicare Advantage, Mediaap. Medicaid, TRICARE, Department of Defense, or Veterans Affairs programs) or where prohibited by law. Offer subject to change or termination without notice. Restrictions, including monthly maximums, may apply. This is not health insurance. For full Terms and Conditions, visit abbv.ie/bsp-terms or call 1-800-44-BOTOX (800-442-6869) for additional information. To learn about AbbVie's privacy practices and your privacy choices, visit https://abbv.ie/corpprivacy.

*Not a quarantee of coverage or partial or full payment. Check each patient's coverage with applicable insurer.

Costs matter to patients:

According to a survey, 2 in 3 Chronic Migraine patients (n = 140) would try BOTOX® if there were no associated out-of-pocket costs¹³

~20% more new BOTOX® Chronic Migraine patients who used the BSP were persistent on treatment at 1 year vs those who didn't use the BSP14.§

§Twelve-month persistency treatment rates based on data from January 2018 through June 2019 for new Chronic Migraine patients (non-BSP: n = 46,489; BSP: n = 2514).



Talk to your patients about enrolling in the BOTOX® Savings Program* today

AbbVie is committed to helping patients start and stay on treatment

IMPORTANT SAFETY INFORMATION (continued) WARNINGS AND PRECAUTIONS (continued)

Increased Risk of Clinically Significant Effects With Preexisting Neuromuscular Disorders

Individuals with peripheral motor neuropathic diseases, amyotrophic lateral sclerosis (ALS), or neuromuscular junction disorders (eg, myasthenia gravis or Lambert-Eaton syndrome) should be monitored when given botulinum toxin. Patients with known or unrecognized neuromuscular disorders or neuromuscular junction disorders may be at increased risk of clinically significant effects, including generalized muscle weakness, diplopia, ptosis, dysphonia, dysarthria, severe dysphagia, and respiratory compromise from therapeutic doses of BOTOX (see Warnings and Precautions).

Dysphagia and Breathing Difficulties

Treatment with BOTOX and other botulinum toxin products can result in swallowing or breathing difficulties. Patients with preexisting swallowing or breathing difficulties may be more susceptible to these complications. In most cases, this is a consequence of weakening of muscles in the area of injection that are involved in breathing or oropharyngeal muscles that control swallowing or breathing (see Boxed Warning).

BOTOX TODAY™ offers comprehensive support

AbbVie provides valuable resources at your fingertips



Scan here or visit BOTOXOneGo.com for informative tools and videos to help your appropriate Chronic Migraine patients start BOTOX® treatment sooner, including:







PATIENT **EDUCATION**



TRAINING AND EDUCATION



B0T0X0neGo.com

GET ASSISTANCE INCLUDING:

- Insurance verification
- Prior authorization
- Denied/underpaid claims

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 Relevant billing codes for BOTOX®

Contact your AbbVie Account Specialist to find out about access and reimbursement support and education

IMPORTANT SAFETY INFORMATION (continued) WARNINGS AND PRECAUTIONS (continued)

Human Albumin and Transmission of Viral Diseases

This product contains albumin, a derivative of human blood. Based on effective donor screening and product manufacturing processes, it carries an extremely remote risk for transmission of viral diseases and variant Creutzfeldt-Jakob disease (vCJD). There is a theoretical risk for transmission of Creutzfeldt-Jakob disease (CJD), but if that risk actually exists, the risk of transmission would also be considered extremely remote. No cases of transmission of viral diseases, CJD, or vCJD have ever been identified for licensed albumin or albumin contained in other licensed products.

ADVERSE REACTIONS

Adverse reactions to BOTOX for injection are discussed in greater detail in the following sections: Boxed Warning, Contraindications, and Warnings and Precautions.

Chronic Migraine

The most frequently reported adverse reactions following injection of BOTOX for chronic migraine vs placebo include, respectively, neck pain (9% vs 3%); headache (5% vs 3%); eyelid ptosis (4% vs <1%); migraine (4% vs 3%); muscular weakness (4% vs <1%); musculoskeletal stiffness (4% vs 1%); bronchitis (3% vs 2%); injection-site pain (3% vs 2%); musculoskeletal pain (3% vs 1%); myalqia (3% vs 1%); facial paresis (2% vs 0%); hypertension (2% vs 1%); and muscle spasms (2% vs 1%).

Postmarketing Experience

Adverse reactions that have been identified during postapproval use of BOTOX are discussed in greater detail in Postmarketing Experience (Section 6.3 of the Prescribing Information).

There have been spontaneous reports of death, sometimes associated with dysphagia, pneumonia, and/or other significant debility or anaphylaxis, after treatment with botulinum toxin. There have also been reports of adverse events involving the cardiovascular system, including arrhythmia and myocardial infarction, some with fatal outcomes. Some of these patients had risk factors, including cardiovascular disease. The exact relationship of these events to the botulinum toxin injection has not been established.

Please see additional Important Safety Information throughout.



*Based on IQVIA data from May 2018 to June 2023.

DELIVER BOTOX® TODAY

Proven Prevention in Your Hands

PROVEN

8 to 9 fewer headache days per month from baseline at week 24 (vs 6 to 7 with placebo)¹

PRECISE

PREEMPT[†] **Protocol**—the only locally administered procedure delivered with purposeful fixed-site, fixed-dose injections into 7 head and neck muscle areas^{1,15}

PREDICTABLE

A legacy of 13+ years in Chronic Migraine, and counting^{6,‡}



Scan here to watch the Ease of Injection video

Share the experiences of real BOTOX® patients and a physician to help set treatment expectations for your patients

Access BOTOX® for Chronic Migraine treatment sooner Contact your AbbVie Account Specialist about BOTOX TODAY™



Appropriate new Chronic Migraine patients can try BOTOX® with a sample today to evaluate efficacy and safety

Talk to your account specialist to access samples today

*PREEMPT = Phase 3 REsearch Evaluating Migraine Prophylaxis Therapy. *Since FDA approval in 2010.

IMPORTANT SAFETY INFORMATION (continued) DRUG INTERACTIONS

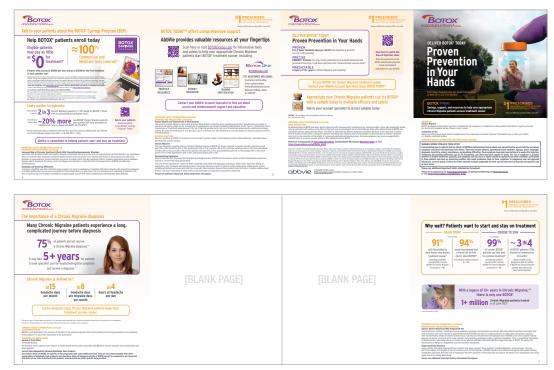
Co-administration of BOTOX and other agents interfering with neuromuscular transmission (eg, aminoglycosides, curare-like compounds) should only be performed with caution as the effect of the toxin may be potentiated. Use of anticholinergic drugs after administration of BOTOX may potentiate systemic anticholinergic effects. The effect of administering different botulinum neurotoxin products at the same time or within several months of each other is unknown. Excessive neuromuscular weakness may be exacerbated by administration of another botulinum toxin prior to the resolution of the effects of a previously administered botulinum toxin. Excessive weakness may also be exaggerated by administration of a muscle relaxant before or after administration of BOTOX.

Please see accompanying full <u>Prescribing Information</u>, including Boxed Warning and <u>Medication Guide</u>, or visit <u>https://www.rxabbvie.com/pdf/botox_pi.pdf</u>

References: 1. BOTOX® Prescribing Information, November 2023. 2. Data on file, Allergan, September 2023; Branded Drugs for Chronic Migraine Analysis. 3. Dodick DW, Loder EW, Manack Adams A, et al. Assessing barriers to Chronic Migraine consultation, diagnosis, and treatment: Results from the Chronic Migraine Epidemiology and Outcomes (CaMEO) study. Headache. 2016;56(5):821-834. 4. Viticchi G, Silvestrini M, Falsetti L, et al. Time delay from onset to diagnosis of migraine. Headache. 2017;57(1):109-125. 6. Data on file, Allergan, September 2023; In a Survey, 91% of Current Users Said They Wish They'd Started BOTOX® Treatment Sooner. 7. Data on file, Allergan, April 21, 2021; BOTOX® CM Patient ATU Full Report. 8. Data on file, Allergan, September 2023; In a Survey, 99% of Current Users Said They Plan to Continue on BOTOX® Treatment. 9. Data on file, AbDVio, October 16, 2023; MABI Persistence Data. 10. Data on file, Allergan, 2010; Chronic Migraine FDA Approval Letter. 11. Data on file, Allergan, October 2023; Total Unique Chronic Migraine Patients. 12. Data on file, Allergan, April 2021; BOTOX® Therapeutic Payer Coverage. 13. Data on file, Allergan, May 15, 2020; BOTOX® CM Patient ATU. 14. Data on file, Allergan, January 2020; BSP Opportunity Analysis. 15. Blumenfeld AM, Silberstein SD, Dodick DW, Aurora SK, Turkel CC, Binder WJ. Method of injection of onabotulinumtoxinA for chronic migraine: a safe, well-tolerated, and effective treatment paradigm based on the PREEMPT clinical program. Headache. 2010;50(9):1406-1418.



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