

Summertime is a great time to think about transitioning back to school...



For ADHD in children and teens 6 to 17 years of age¹...

Break the cycle of multiple prescriptions and potential “pain points” this school year

- **A recent survey of 11,000 caregivers and adults revealed that finding the right ADHD treatment can be challenging²**
 - It can be a frustrating period of trial and error²
 - The average child tries ~3 different medications²
- **The ADHD drug shortage is ongoing in 2024³**
 - Shortages exist across the entire stimulant class³
 - Patients are enduring hours of phone calls and travel looking for pharmacies that can fill their prescriptions³



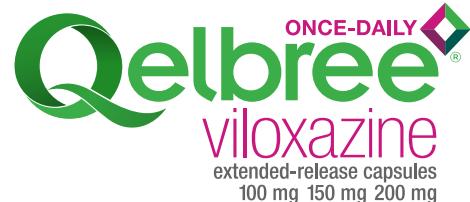
All photos within this piece are patient portrayals.

INDICATION

Qelbree is indicated for the treatment of ADHD in adults and pediatric patients 6 years and older.

IMPORTANT SAFETY INFORMATION**WARNING: SUICIDAL THOUGHTS AND BEHAVIORS**

In clinical studies, higher rates of suicidal thoughts and behaviors were reported in patients with ADHD treated with Qelbree than in patients treated with placebo. Closely monitor all Qelbree-treated patients for clinical worsening and for emergence of suicidal thoughts and behaviors.



Please see full Important Safety Information on page 7.

Consider a transition to Qelbree— a novel nonstimulant that works^{1,4}

Prescription data show that 68% of patients were prescribed Qelbree because a change in previous ADHD treatment was needed⁵

Of patients who transitioned to Qelbree:



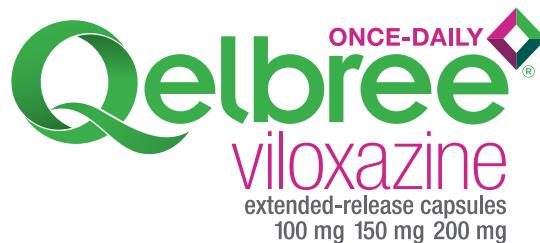
of patients transitioned
to Qelbree from a stimulant⁵



of patients transitioned to
Qelbree from a nonstimulant⁵

- 32% of patients taking Qelbree were new to prescription ADHD treatment⁵

Source: IQVIA NPA market dynamics data April 2023–March 2024.

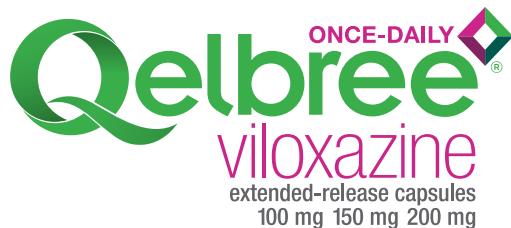


Abbreviation: ADHD, Attention-deficit/hyperactivity disorder.

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THIS SCHOOL YEAR...

Consider a transition to Qelbree for ADHD in children and teens 6 to 17 years of age¹



A novel nonstimulant that works^{1,4}



Pediatric clinical trials

Methodology: Randomized, DB, placebo-controlled, fixed-dose, parallel-group, multicenter studies of children 6 to 11 years of age with ADHD (Study P301 and P303) and teens 12 to 17 years of age (Study P302), with a baseline ADHD-RS-5 Total Score ≥ 28 , CGI-S ≥ 4 . The primary endpoint was CFB in the ADHD-RS-5 Total Score at EOS. **Results:** Total scores at EOS were significantly reduced with Qelbree vs placebo. The CFB in ADHD-RS-5 Total Score at EOS (Study P301) (LS mean \pm SE) was -16.6 ± 1.16 for Qelbree 100 mg/day, -17.7 ± 1.12 for Qelbree 200 mg/day, and -10.9 ± 1.14 for placebo. The CFB in ADHD-RS-5 Total Score at EOS (Study P302) (LS mean \pm SE) was -16.0 ± 1.45 for Qelbree 200 mg/day, -16.5 ± 1.38 for Qelbree 400 mg/day, and -11.4 ± 1.37 for placebo.

CONTRAINDICATIONS

- Concomitant administration of a monoamine oxidase inhibitor (MAOI), or dosing within 14 days after discontinuing an MAOI, because of an increased risk of hypertensive crisis
- Concomitant administration of sensitive CYP1A2 substrates or CYP1A2 substrates with a narrow therapeutic range

*Branded ADHD products launched in last 6 years (as of September 2023).

Abbreviations: ADHD-RS-5, Attention-Deficit/Hyperactivity Disorder Rating Scale, 5th Edition; CFB, change from baseline; CGI-S, Clinical Global Impression-Severity of Illness; DB, double blind; EOS, end of study; LS mean, least-squares mean; SE, standard error.

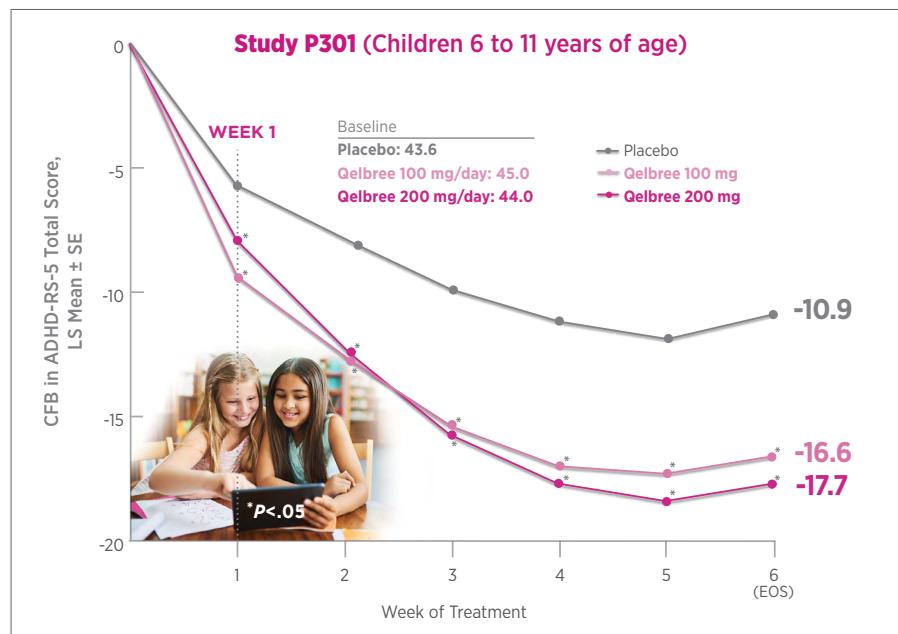
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THIS SCHOOL YEAR...

Consider a transition to Qelbree—a novel nonstimulant that works for ADHD in children 6 to 11 years of age^{1,4}

Proven efficacy in treating ADHD at EOS (n=460)^{1,5}

Inattention and hyperactivity/impulsivity symptom score reductions observed as early as week 1^{1,5}



Children start Qelbree at 100 mg/day¹

100 mg/day	200 mg/day	300 mg/day	400 mg/day
			
(start dose)			

Capsules shown
are not actual size.

Titrate Qelbree 100 mg/week over 1 to 3 weeks **as needed to reach effective dose**.¹

Study P301 results

Total Score at EOS was significantly reduced with Qelbree vs placebo.¹ The CFB in ADHD-RS-5 Total Score at EOS was -16.6 for Qelbree 100 mg/day, -17.7 for Qelbree 200 mg/day, and -10.9 for placebo.¹

IMPORTANT SAFETY INFORMATION

- **Severe renal impairment:** Initiate Qelbree at 100 mg once daily and increase by 50 mg to 100 mg at weekly intervals to a maximum recommended dosage of 200 mg once daily

Please see full Important Safety Information on page 7.

Qelbree[®]

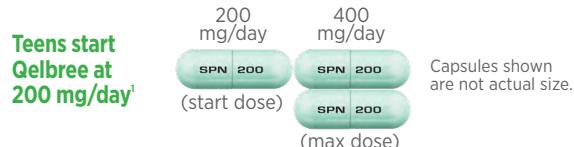
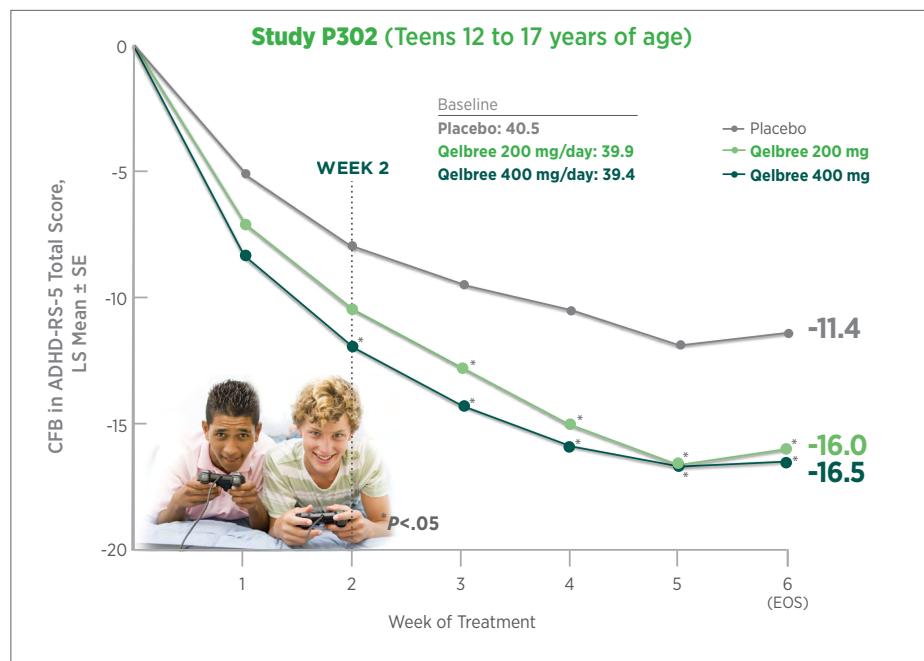
ONCE-DAILY
viloxazine
extended-release capsules
100 mg 150 mg 200 mg

THIS SCHOOL YEAR...

Consider a transition to Qelbree—a novel nonstimulant that works for ADHD in teens 12 to 17 years of age^{1,4}

Proven efficacy in treating ADHD at EOS (n=301)^{1,5}

Inattention and hyperactivity/impulsivity symptom score reductions observed as early as week 2^{1,5}



Titrate Qelbree 200 mg/week over 1 week **as needed to reach effective dose.¹**

Study P302 results

Total Score at EOS was significantly reduced with Qelbree vs placebo.¹ The CFB in ADH-DS-5 Total Score at EOS was -16.0 for Qelbree 200 mg/day, -16.5 for Qelbree 400 mg/day, and -11.4 for placebo.¹

IMPORTANT SAFETY INFORMATION

- **Severe renal impairment:** Initiate Qelbree at 100 mg once daily and increase by 50 mg to 100 mg at weekly intervals to a maximum recommended dosage of 200 mg once daily

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THIS SCHOOL YEAR...

Help the right patients with ADHD 6 to 17 years old¹ make the transition to Qelbree— a novel nonstimulant that works!^{1,4}

Speak with your representative about the resources we provide to help you start the transition!



covermymeds®



**Get your patients off to a great start this summer.
Scan here to order Qelbree samples!
Learn more at QelbreeHCP.com**

*Terms and conditions: Offer void where prohibited. For full terms and conditions, please see the Qelbree Co-pay Card, or visit www.Qelbree.com.

INDICATION

Qelbree is indicated for the treatment of ADHD in adults and pediatric patients 6 years and older.

IMPORTANT SAFETY INFORMATION

WARNING: SUICIDAL THOUGHTS AND BEHAVIORS

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Please see full Important Safety Information on page 7.



INDICATION

Qelbree® (viloxazine extended-release capsules) is indicated for the treatment of ADHD in adults and pediatric patients 6 years and older.

IMPORTANT SAFETY INFORMATION

WARNING: SUICIDAL THOUGHTS AND BEHAVIORS

In clinical studies, higher rates of suicidal thoughts and behaviors were reported in patients with ADHD treated with Qelbree than in patients treated with placebo. Closely monitor all Qelbree-treated patients for clinical worsening and for emergence of suicidal thoughts and behaviors.

CONTRAINDICATIONS

- Concomitant administration of a monoamine oxidase inhibitor (MAOI), or dosing within 14 days after discontinuing an MAOI, because of an increased risk of hypertensive crisis
- Concomitant administration of sensitive CYP1A2 substrates or CYP1A2 substrates with a narrow therapeutic range

WARNINGS & PRECAUTIONS

- Suicidal thoughts and behaviors:* Closely monitor all Qelbree-treated patients for clinical worsening and emergence of suicidal thoughts and behaviors, especially during the initial few months of drug therapy, and at times of dosage changes
- Heart rate, blood pressure increases:* Qelbree can cause an increase in diastolic blood pressure and heart rate. Assess these measures prior to starting therapy, following increases in dosage, and periodically during therapy
- Activation of mania or hypomania:* Noradrenergic drugs may induce a manic or mixed episode in patients with bipolar disorder. Prior to initiating treatment with Qelbree, screen patients to determine if they are at risk for bipolar disorder. Screening should include a detailed psychiatric history, including a personal or family history of suicide, bipolar disorder, and depression
- Somnolence and fatigue:* Patients should not perform activities requiring mental alertness, such as operating a motor vehicle or hazardous machinery, due to potential somnolence (including sedation or lethargy) and fatigue, until they know how they will be affected by Qelbree

ADVERSE REACTIONS

The most common adverse reactions ($\geq 5\%$ and at least twice the rate of placebo for any dose) in patients 6 to 17 years were somnolence, decreased appetite, fatigue, nausea, vomiting, insomnia, and irritability, and in adults, insomnia, headache, somnolence, fatigue, nausea, decreased appetite, dry mouth, and constipation.

PREGNANCY

There is a pregnancy exposure registry that monitors pregnancy outcomes in women exposed to Qelbree during pregnancy. Healthcare providers are encouraged to register patients by calling the National Pregnancy Registry for Psychiatric Medications at 1-866-961-2388 or by visiting www.womensmentalhealth.org/preg.

REFERENCES: 1. Qelbree [package insert]. Rockville, MD: Supernus Pharmaceuticals, Inc. 2. Rodgers AR, Kear NC. What your patients aren't telling you about their ADHD treatment. *ADDitude Magazine*. Spring 2024:1-7. 3. ADDitude Eds. Call to action! Speak up to end the ADHD drug shortage. *ADDitude Magazine*. February 20, 2024;1-6. 4. Food and Drug Administration. Novel drug approvals for 2021. May 13, 2022. Accessed January 7, 2023. <https://www.fda.gov/drugs-new-drugs-fda-cders-new-molecular-entities-and-new-therapeutic-biological-products/novel-drug-approvals-2021>. 5. Data on file, Supernus Pharmaceuticals

Please see full [Prescribing Information, including Boxed Warning](#).



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