

DMT Spotlight

A B-Cell Option Offering RMS Treatment on Your Terms



WEBINAR 
WEDNESDAYS



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© CAN DO MULTIPLE SCLEROSIS

**Exploring Treatment
Considerations and
How Once-Monthly*,
Self-Administered
KESIMPTA® (ofatumumab)
May Fit Your Lifestyle**

**CLINICAL
DATA** **&** **PATIENT
PERSPECTIVES**

*Once monthly after 3 weekly starter doses.

Carol Welch
RN, BSN, MSCN | South Carolina
Novartis, Patient Community Liaison



Heather L.
Mom, Travel Enthusiast | Texas
Started KESIMPTA as her first therapy in 2021

Carol is employed by Novartis Pharmaceuticals. Heather has been compensated by Novartis Pharmaceuticals Corporation (NPC) for her time.

RN, registered nurse; BSN, Bachelors of Science in Nursing; MSCN, Multiple Sclerosis Certified Nurse.

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**About RMS and Tips for
Discussing Treatment Options
with your Health Care Team**

**Clinical Trial Overview
(Results and Safety)**

**Taking Treatment & Perspectives
on Self-Administration Offering a
Feeling of Independence**

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Relapsing Multiple Sclerosis (RMS) is an autoimmune disorder

RMS can manifest in a variety of ways, including disease activity that you may or may not see. Common terms you may hear include:

Relapse

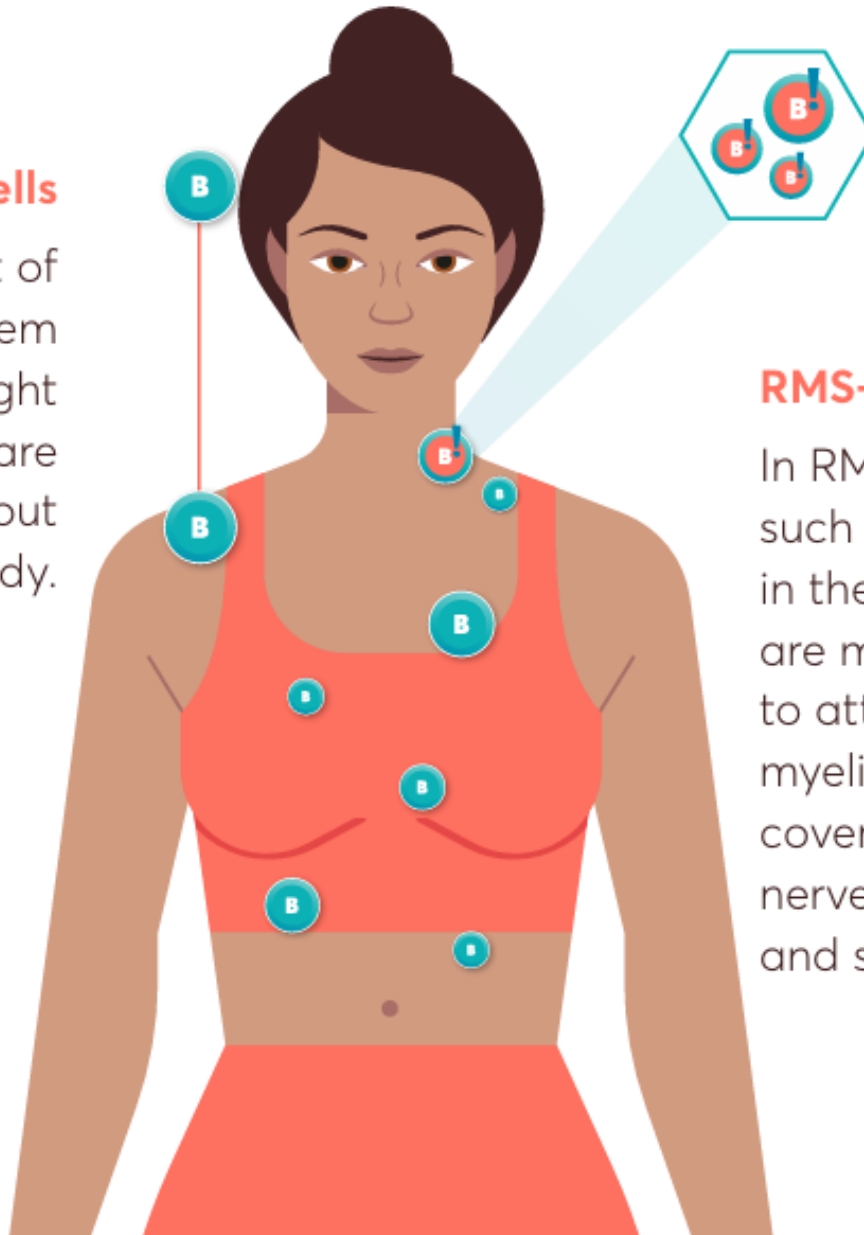
Active Lesions

Disability Progression

Note: RMS can materialize in a variety of ways, and the above is not an all-inclusive list.

B-cells

B-cells are part of the immune system that help fight infections. They are found throughout the body.



RMS-related B-cells

In RMS, immune cells, such as B-cells, located in the lymph nodes, are mistakenly sent to attack the body's myelin—the protective covering around the nerves in the brain and spinal cord.



**Simplified Goal
of Treatment:
Minimize Signs of
Disease Activity**

What's most important to you in a treatment?

No one knows better than you.

Informed decisions start with informed questions.

Efficacy & Safety

- Are there reasons to start treatment right away?
- Are there reasons to start with a *B-cell* therapy?
- What kind of results can I be looking for?
- What are the safety considerations and side effects?

Administration & Schedules

- What are the options for how I take my treatment?
- How often is treatment?
- Do I need to take off work to get my treatment?
- Are there any concerns between doses that I should be aware of?

Support

- How quickly can I get started?
- What if I need help or have insurance questions?



TIP: Use this guide to get prepared with the right questions to ask your doctor



20 mg/0.4 mL solution
in a single-dose prefilled auto-injector pen

KESIMPTA 20 mg/0.4 mL for self-injection

INDICATION

KESIMPTA® is a prescription medicine used to treat adults with relapsing forms of multiple sclerosis (MS) including clinically isolated syndrome (CIS), relapsing-remitting disease, and active secondary progressive disease.

It is not known if KESIMPTA is safe or effective in children.

ADMINISTRATION

- KESIMPTA is available in a single-dose prefilled auto-injector pen for once-monthly* self-administration by subcutaneous injection

 **Kesimpta®**
(ofatumumab) 20 mg
injection

*Once monthly after 3 weekly starter doses.

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WHO SHOULD NOT TAKE KESIMPTA?

Do NOT take KESIMPTA if you:

- Have an active hepatitis B virus (HBV) infection.
- Have had an allergic reaction to ofatumumab or life-threatening injection-related reaction to KESIMPTA.

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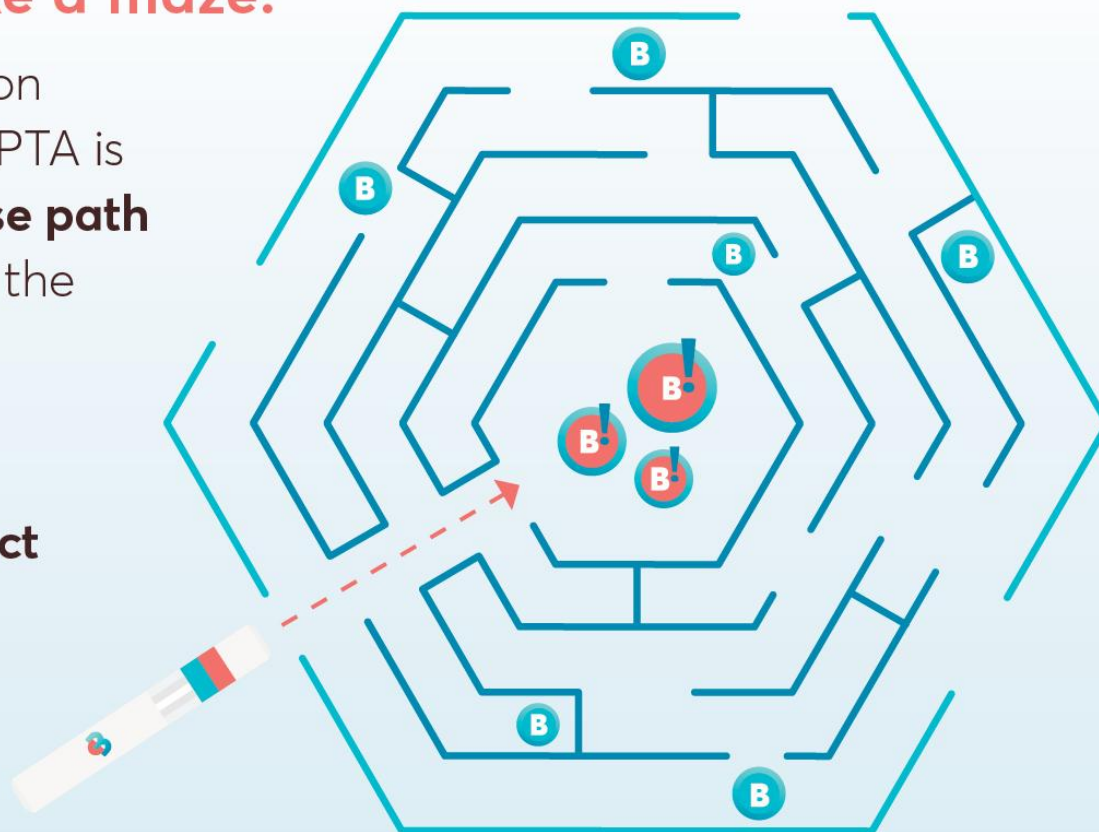


KESIMPTA IS PRECISELY DELIVERED

While it's not fully understood how KESIMPTA® works, it's designed to target the B-cells in the lymph nodes believed to play a role in RMS.

Think of your body like a maze:

- As a subcutaneous injection just under the skin, KESIMPTA is thought to target a **precise path to RMS-related B-cells** in the lymph nodes*
- This targeted delivery is thought to **limit the impact on other B-cells** your body needs to maintain immune function



*Based on preclinical studies.
For illustrative purposes only.

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(ofatumumab) 20 mg
injection

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KESIMPTA can be considered by people who are newly diagnosed, and people who have been previously treated with another DMT

About the KESIMPTA® pivotal trials (Study 1 and Study 2)

People Studied*

- Over 1800 people with RMS
- Compared KESIMPTA to teriflunomide
- Experienced relapse/saw MRI activity in the 1-2 years leading up to the studies
- Adult males and females 18-55 years old

Range of Characteristics

- Average 5-6 years since diagnosis; average 8 years since first MS symptoms
- Average age: 38
- **About 60% had previously been on an MS treatment**
- Approximately 40% had T1 lesions on their baseline MRI scan
- Average number of T1 lesions per MRI scan: 1-2



*In the studies, people received either KESIMPTA 20 mg or teriflunomide 14 mg for up to 30 months: Study 1: 465 people received KESIMPTA vs 462 teriflunomide Study 2: 481 people received KESIMPTA vs 474 teriflunomide

MRI, magnetic resonance imaging.

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Studies 1 and 2 Compared KESIMPTA to teriflunomide on multiple endpoints, including:

Relapse

Active Lesions

Disability Progression

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PROVEN SUPERIOR



	STUDY 1 vs teriflunomide	STUDY 2 vs teriflunomide
RELAPSES	51% fewer relapses	58% fewer relapses

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PROVEN SUPERIOR

 **Reducing
Relapses** **Fewer
Lesions**

	STUDY 1 vs teriflunomide	STUDY 2 vs teriflunomide
RELAPSES	51% fewer relapses	58% fewer relapses
ACTIVE LESIONS (Gd+ T1)	98% fewer lesions 0.01 for KESIMPTA vs 0.46 for teriflunomide on average per MRI scan	94% fewer lesions 0.03 for KESIMPTA vs 0.52 for teriflunomide on average per MRI scan
NEW OR ENLARGING LESIONS (T2)	82% fewer lesions 0.72 for KESIMPTA vs 4.00 for teriflunomide per year	85% fewer lesions 0.64 for KESIMPTA vs 4.16 for teriflunomide per year

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PROVEN SUPERIOR

 **Reducing Relapses**
 **Fewer Lesions**
 **Slowing Disability Progression**

	STUDY 1 vs teriflunomide	STUDY 2 vs teriflunomide
RELAPSES	51% fewer relapses	58% fewer relapses
ACTIVE LESIONS (Gd+ T1)	98% fewer lesions 0.01 for KESIMPTA vs 0.46 for teriflunomide on average per MRI scan	94% fewer lesions 0.03 for KESIMPTA vs 0.52 for teriflunomide on average per MRI scan
NEW OR ENLARGING LESIONS (T2)	82% fewer lesions 0.72 for KESIMPTA vs 4.00 for teriflunomide per year	85% fewer lesions 0.64 for KESIMPTA vs 4.16 for teriflunomide per year
DISABILITY PROGRESSION	Studies 1 & 2 combined 34% less likely at 3 months* 32% less likely at 6 months*	

*Based on whether disability progression was still present 3 and 6 months after disability symptoms started.

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PROVEN SAFETY PROFILE

Before you start any treatment, it's important to understand the safety profile and possible side effects.

KESIMPTA® was studied in 2 head-to-head studies vs teriflunomide.

-  **Few people stopped treatment due to side effects**
(comparable to teriflunomide: 5.7% for KESIMPTA, 5.2% for teriflunomide)
-  **Mild to moderate injection-related reactions**
99.8% of injection-related reactions were mild to moderate. They were most common in the 1st injection and decreased to less than 3% after the 3rd dose



**KESIMPTA has a proven safety profile,
and has been studied for 8 years and counting.**

**Because safety is so important, KESIMPTA continues to
be studied in an ongoing, open-label* extension study.†**

*A type of study where participants are aware of the type of treatment they're being given. Interpreting results from open-label studies can be uncertain. They are not considered representative results, since participants chose whether to stay in the trial.† After the original KESIMPTA studies, over 1700 people continued to participate for further evaluation, where they all took KESIMPTA. The goal of this extended study was to learn about the safety and tolerability of KESIMPTA in the long term, with a focus on injection related reactions, malignancies, and serious infections for up to 8 years. No conclusions of clinical outcomes can be drawn. (April 2026 data cut-off date.)

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POSSIBLE SIDE EFFECTS

KESIMPTA[®] could increase the risk of serious, including life-threatening or fatal, infections:

Hepatitis B virus (HBV) reactivation: Before starting KESIMPTA, you'll get a blood test for HBV. If you've ever had HBV infection, it may become active again during or after treatment with KESIMPTA.

Progressive multifocal leukoencephalopathy (PML): PML may happen with KESIMPTA. PML is a rare, serious brain infection caused by a virus that may get worse over days or weeks, and can result in death or severe disability. While no cases of PML were reported in RMS clinical trials with KESIMPTA, it could happen.

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Other serious side effects are:

- **Local injection-site reactions:**

Symptoms include redness, pain, itching, and swelling.

- **Injection-related reactions:**

Symptoms include fever, headache, pain in the muscles, chills, tiredness, rash, hives, trouble breathing, swelling of the face, eyelids, lips, mouth, tongue and throat, and feeling faint, or chest tightness.

- **Low immunoglobulins:**

KESIMPTA[®] may decrease some types of antibodies.

- **Liver damage:**

B-cell therapies, including KESIMPTA, may cause liver damage. Symptoms may include yellowing of the skin and eyes, nausea, vomiting, unusual darkness of urine, and feeling tired or weak.

Your doctor will do blood tests to check your immunoglobulin levels and liver before you start KESIMPTA and while you take it, if needed.

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HERE'S WHAT'S MOST COMMON

- **Upper respiratory tract infections**

Symptoms include sore throat, runny nose, and headache.

- **Headache**

**Before you take KESIMPTA[®], tell your doctor if you have any infections.
It's also important to tell your doctor if you:**

- Have or think you have HBV or PML
- Have taken or plan to take medication that affects your immune system
- Have a history of liver problems
- Had a recent vaccination or have one scheduled
- Are pregnant, think you may be, or are planning to be
- Are breastfeeding or plan to

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PEN FEATURES THAT HELP YOU DO IT RIGHT

The KESIMPTA® auto-injector pen is designed to help you **use it safely, right from the comfort of home**, once a month.* Someone from your health care team will show you how to use it first so you'll be ready on treatment day.

1 YOU CAN'T SEE THE NEEDLE

- It's thinner than a pediatric needle†
- It goes just under skin, not into muscle
- Just press pen against skin to start

2 IT GUIDES YOU WITH SOUNDS

- You'll hear 1 click when it starts
- You'll hear a 2nd click when it's almost done

3 AND YOU CAN SEE THE PROGRESS

- Watch as the window fills with **green**
- It stops moving when complete
- Ensure the **green** progress indicator fills the window and stops moving before removing the pen



 **Kesimpta®**
(ofatumumab) 20 mg
injection

* Once a month after 3 weekly starter doses.

†KESIMPTA pens come with a staked needle of 29-gauge. Pediatric needles average between 23-gauge and 25-gauge.

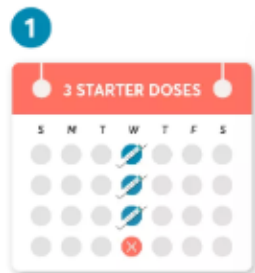
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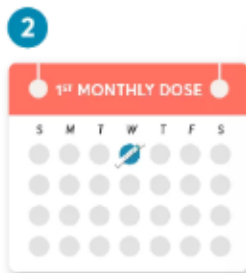


Your treatment schedule

You'll give yourself **1 dose per week for the first 3 weeks**, and then you'll skip a week. After that, you can move on to **1 dose per month**.



Pick a day and start with 1 dose a week for the first 3 weeks. **Skip the 4th week.**



Take your first monthly maintenance dose on the **5th week**.



Continue taking KESIMPTA® once a month.



TRACKING TIP

To keep it simple, try to take KESIMPTA on the same date every month.

EXAMPLE: If your first monthly dose is on April 15, take your next dose on May 15.

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(ofatumumab) 20 mg injection

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Steps for injecting KESIMPTA^{®*}:

- Remove from fridge 15-30 mins to get to room temp
- Visually inspect for expiration date and liquid clarity
- Choose and clean the injection site
- Twist off cap only when ready to use. Discard cap, use within 5 mins
- Press firmly against skin at 90°. After the second click, the green indicator will stop moving. Remove pen
- Dispose in an FDA-cleared sharps container

**Once ready, it takes less than 1 minute[†] to take KESIMPTA
(average of a 3-4 second injection time)**

When you're ready to start on KESIMPTA, someone from your health care team will show you how to use the pen so you'll be ready on treatment day.

* These are not the Full Instruction for Use (IFU). Please see IFU for more information.

† Typical administration time when ready to inject.

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With the auto-injector pen, KESIMPTA is an RMS treatment option that:



Can be self-administered **once-monthly*** at home or bring it with you† for your treatment day

The pen can **be kept at room temp for up to 7 days,†** so you can take it with you.



No premedication requirement prior to treatment‡



No post-dose observation requirement

Other B-cell treatments[§]	Administered by a health care provider	Taken mainly in a medical facility, travel required	Pretreatment with steroids required	Post-dose observation
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 Kesimpta[®]
(ofatumumab) 20 mg injection

*Once monthly after 3 weekly starter doses.
†KESIMPTA pens must be refrigerated at 2 °C to 8 °C (36 °F to 46 °F). Keep product in the original carton to protect from light until the time of use. Do not freeze. To avoid foaming, do not shake. If necessary, KESIMPTA may be stored at room temperature below 30 °C (86 °F) for up to 7 days and returned to the refrigerator, to be used within the next 7 days. If not used within those 7 days, discard the medicine.
‡Only limited benefit of premedication was observed in relapsing MS clinical studies.
§B-cell treatments for RMS include: KESIMPTA, Ocrevus (ocrelizumab), Ocrevus Zunovo[®] (ocrelizumab and hyaluronidase-ocsq), and Briumvi (ublituximab-xiiy). Please see each product’s respective prescribing information for additional information, including indication, dosing, administration, and safety. Trademarks are the property of their respective owners.
|| Other B-cell treatments require premedications 30-60 minutes before starting treatment to reduce risk of reactions

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THE KESIMPTA PEN IS EASY TO USE

In a real-world survey,* people described their experience with the auto-injector pen. **Here's what they had to say:**

~90%

Found the pen
easy to use
and said monthly
dosing was
convenient.



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(ofatumumab) 20 mg
injection

*As seen in a real-world, 30-question survey of 105 patients (aged ≥18) diagnosed with RMS for 1+ years, who took KESIMPTA with the auto-injector pen within the previous 12 months. On a scale of 1-5, 89.5% of patients rated it a 4 or 5 (5 being most positive) on overall ease of use and ease of monthly dosing schedule. Questionnaire not validated.

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SUPPORT AVAILABLE TO YOU

A KESIMPTA® prescription comes with membership to Novartis Patient Support™. You'll get access to:

- ✓ **Getting Started** – Coordinating medication delivery.
- ✓ **Financial Support** – If you are privately insured, you could pay as little as **\$0** on KESIMPTA with Co-Pay Plus.
- ✓ **Co-pay assistance** – **96%** of all prescriptions filled paid as little as **\$0 out-of-pocket** cost when used with the Co-Pay Plus offer.*†
- ✓ **Ongoing support** – Dedicated support throughout your treatment.
- ✓ **Helpful resources** – like step-by-step videos and more.



*Limitations apply. Offer not valid under Medicare, Medicaid, or any other federal or state health insurance program. Patients with commercial insurance who are initially denied coverage may receive free KESIMPTA for up to 15 doses while seeking coverage. Patients with commercial insurance who have coverage for KESIMPTA may receive up to \$18,000 in annual co-pay benefits. Novartis reserves the right to rescind, revoke, or amend this program without notice. Additional limitations may apply. See complete Terms & Conditions at start.kesimpta.com.

†2025 data on file.

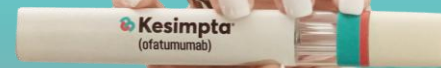
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**Redefining
a Sense of
Independence
Through Self-
Administration**



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QUESTIONS & ANSWERS

QUESTION 1:

**HOW DOES KESIMPTA COMPARE TO
OTHER B-CELL TREATMENTS?**

How does KESIMPTA administration compare to other B-cell treatments?

Administration Times & Methods*

KESIMPTA®		< 1 min auto-injection[†] (3-4 secs avg injection time)	1x monthly[‡] at home or on the go
Ocrevus® (ocrelizumab)		2-4 hrs infusion	2x yearly mainly at a medical facility
Ocrevus Zunovo® (ocrelizumab and hyaluronidase-ocsq)		10 mins injection	2x yearly mainly at a medical facility
Briumvi® (ublituximab-xiyy)		1-4 hrs[§] infusion	2x yearly at a medical facility

This is not a complete list of all the available treatments for RMS.*

The comparison pertains only to differences in dosing and administration and should not be considered a comparison of efficacy or safety.

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[†] Typical administration time when ready to inject.

[‡] Once monthly after 3 weekly starter doses.

[§] The 1st infusion of Briumvi takes 4 hrs. Subsequent infusions take 1 hr.

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QUESTION 2:

**HOW WILL I KNOW IF I CAN
AFFORD KESIMPTA?**

How will I know if I can afford KESIMPTA?



What about co-pays?

96% of all prescriptions filled paid as little as **\$0 out-of-pocket cost** when used with the **Co-Pay Plus offer**.^{*†}

For those patients who may not have prescription drug coverage, the list price for KESIMPTA® is \$10,094.84 per treatment. The list price may not reflect the price paid by patients; most patients with prescription coverage will pay less.

YOUR COORDINATOR IS DEDICATED TO YOU



This person has not taken KESIMPTA.



Wondering about insurance?

There's help for navigating coverage, and your Coordinator will keep you connected throughout the process.



Can you get KESIMPTA while waiting for coverage?

Eligible patients with commercial insurance get KESIMPTA for free while we work with your health care provider to secure coverage.

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QUESTION 3:

**CAN I GET PREGNANT WHILE
TAKING KESIMPTA?**

Can I get pregnant while taking KESIMPTA?

Tell your doctor if you're pregnant, think you might be pregnant, or plan to become pregnant before starting KESIMPTA®.

Females who can become pregnant should use effective birth control during treatment with KESIMPTA and for 6 months after your last treatment. Talk to your doctor about what birth control method is right for you during this time.



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QUESTION 4:

**HOW DO I HEAR EXPERIENCES
FROM OTHERS TAKING KESIMPTA?**

How do I hear experiences from others taking KESIMPTA?



 **Kesimpta**[®]
(ofatumumab) 20 mg injection



"MS can be invisible. We're here to help make it so **you don't feel invisible.**"

Andy M.

Dad,
Account Executive



"We love sharing our different experiences **to help you navigate yours.**"

Kamryn R.

Mom,
Entrepreneur



"We all need a support network and **we can be part of yours.**"

Zenovia W.

Entrepreneur,
Wellness Coach



"As people living with RMS, **we've been there and learned a lot along the way.**"

Caylee R.

Volleyball Coach,
Favorite Aunt



"Like you, we each have unique stories, **but we all found our fit with KESIMPTA.**"

Luis G.

Dad,
Composer



"RMS comes with a lot of questions. **We're here to help you find the answers.**"

Angie B.

Mom,
Jewelry Business Owner

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TAKE CONTROL OF YOUR TREATMENT CHOICE

With KESIMPTA[®], you have the power to decide where you get your treatment on your treatment day. KESIMPTA is the only B-cell treatment for RMS that you take **once a month*** from the comfort of home, or bring it with you. No infusion days required.



**PROVEN
RESULTS[†]**

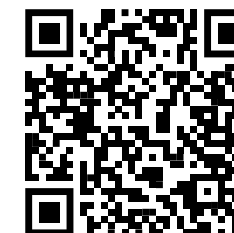


PROVEN SAFETY PROFILE[†]
plus an ongoing safety study[‡]



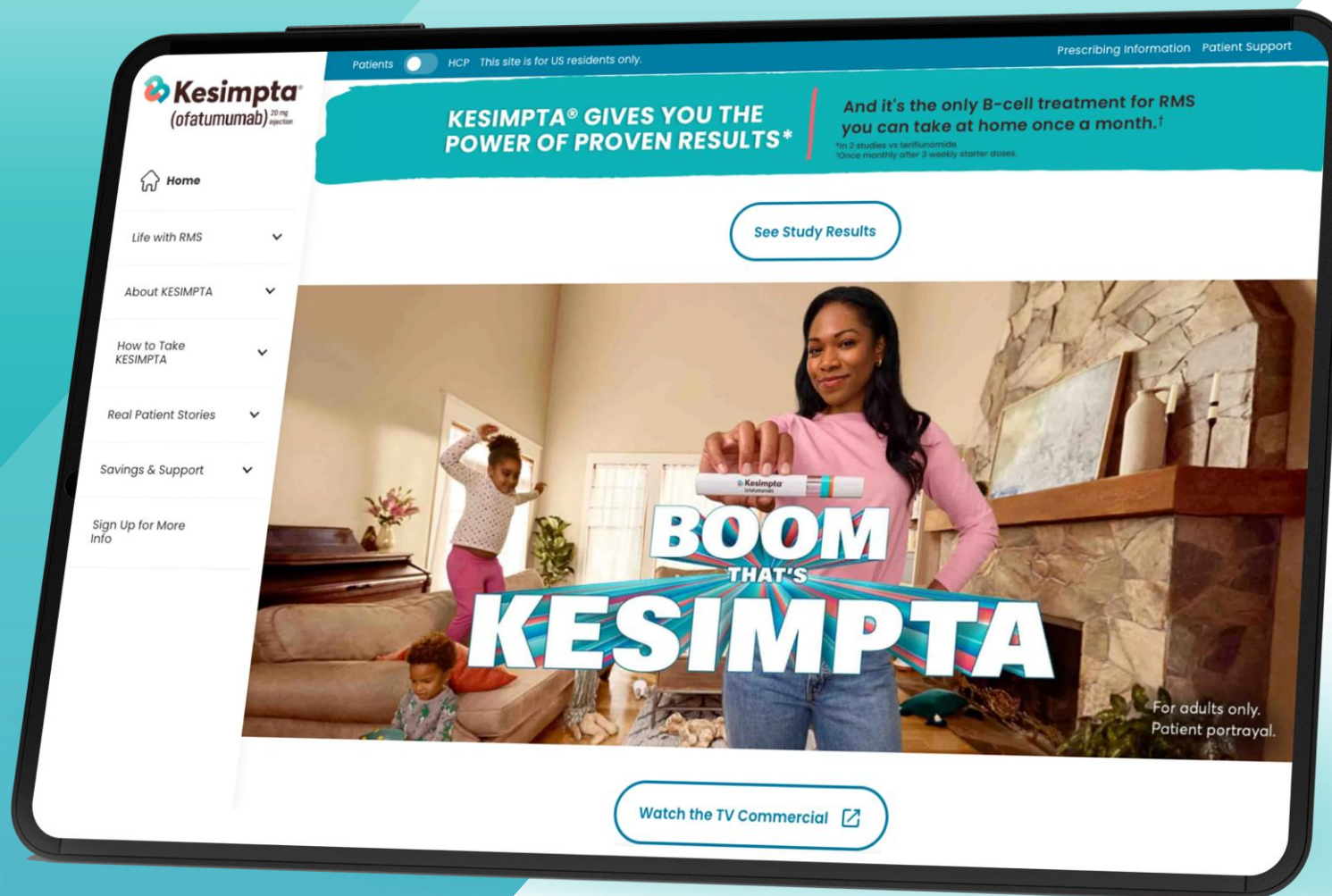
EASY-TO-USE[§]
PREFILLED PEN

To learn more about
KESIMPTA®, including
real patient perspectives,
visit **KESIMPTA.com**



Please see Prescribing Information,
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link in chat and here:
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Kesimpta®
(ofatumumab) 20 mg
injection

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KESIMPTA® GIVES YOU THE POWER OF PROVEN RESULTS*

And it's the only B-cell treatment for RMS
you can take at home once a month.[†]

*In 2 studies vs rituximab.
†Once monthly after 3 weekly starter doses.

See Study Results

**BOOM
THAT'S
KESIMPTA**

For adults only.
Patient portrayal.

Watch the TV Commercial 

Home
Life with RMS
About KESIMPTA
How to Take KESIMPTA
Real Patient Stories
Savings & Support
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Indication

What is KESIMPTA (ofatumumab) injection?

KESIMPTA is a prescription medicine used to treat adults with relapsing forms of multiple sclerosis (MS) including clinically isolated syndrome (CIS), relapsing-remitting disease, and active secondary progressive disease.

It is not known if KESIMPTA is safe or effective in children.

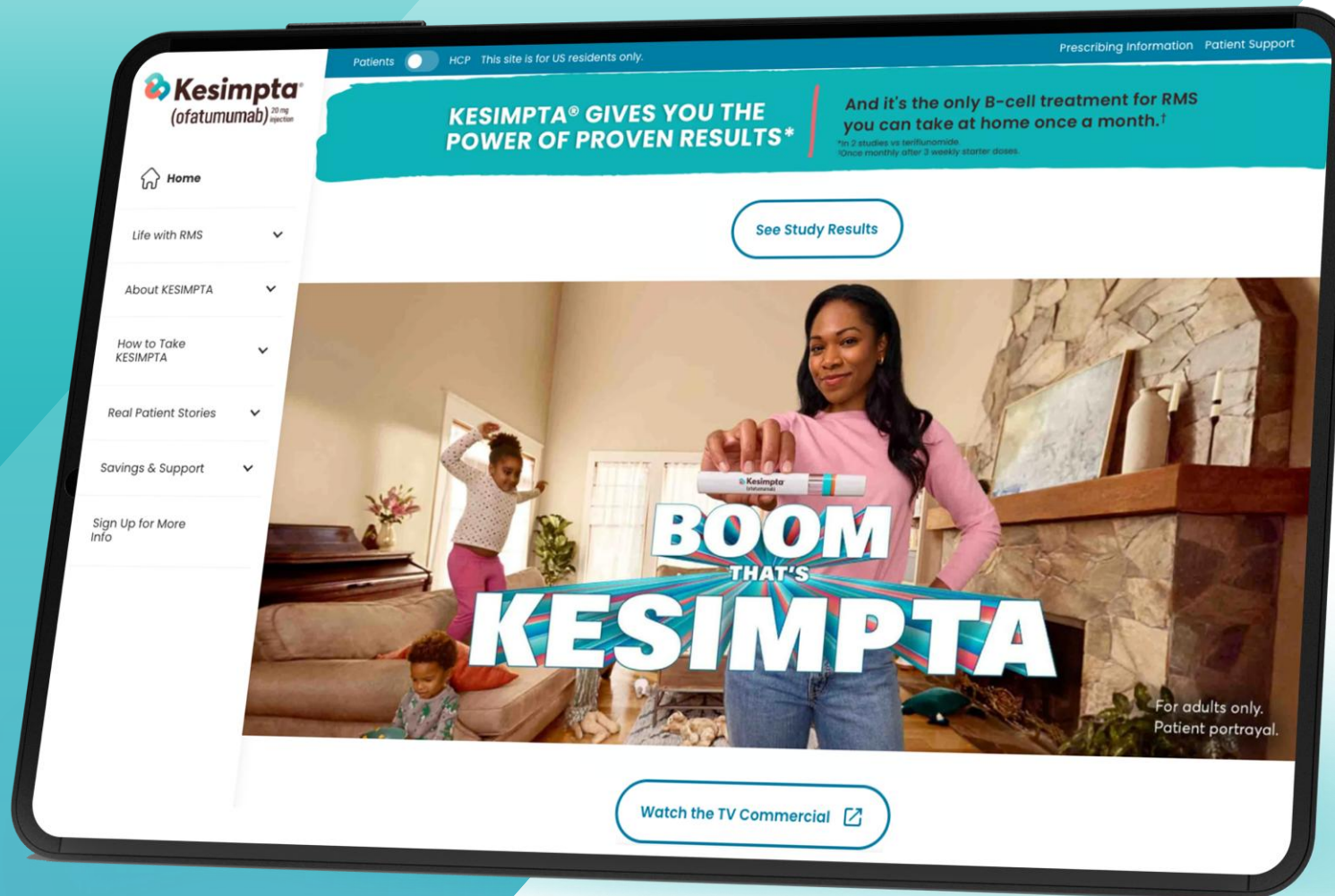
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THANK YOU!



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