

REYVOW® (lasmiditan)© tablets 50mg,100mg

OPEN YOUR PATIENTS' WORLD TO THE POSSIBILITIES WITH REYVOW¹

INDICATION AND USAGE

REYVOW is indicated for the acute treatment of migraine with or without aura in adults.

LIMITATIONS OF USE

REYVOW is not indicated for the preventive treatment of migraine.

SELECT IMPORTANT SAFETY INFORMATION

Driving Impairment

REYVOW may cause significant driving impairment. More sleepiness was reported at 8 hours following a single dose of REYVOW compared to placebo. Advise patients not to engage in potentially hazardous activities requiring complete mental alertness, such as driving a motor vehicle or operating machinery, for at least 8 hours after each dose of REYVOW. Patients who cannot follow this advice should not take REYVOW. Prescribers and patients should be aware that patients may not be able to assess their own driving competence and the degree of impairment caused by REYVOW.

Please see Important Safety Information on <u>page 6</u> and click to see <u>Full Prescribing Information</u> and <u>Medication Guide</u> for REYVOW.





CLINICAL STUDY DESIGN: SAMURAI AND SPARTAN



REYVOW, A **DITAN**, A **HIGH-AFFINITY 5-HT_{1F} RECEPTOR AGONIST**, IS A TABLET THAT WAS EVALUATED IN 2 RANDOMIZED, DOUBLE-BLIND, PLACEBO-CONTROLLED, SINGLE-ATTACK TRIALS.¹⁻³

- 4439 patients age 18 and older were dosed (REYVOW: 3177; placebo: 1262), including those with:
- ≥2 cardiovascular risk factors (41%)⁴
- Concomitant use of migraine preventive drugs (22%)¹
- Concomitant use of serotonergic medication (22%)⁵
- Prior triptan exposure within the past 3 months (37%)⁶
- All patients had:
- History of migraine for at least 1 year^{2,3}
- 3-8 migraine attacks/month^{2,3}
- MIDAS[†] score ≥11 (pooled median was 25)⁷

Patients were instructed to take the study drug within 4 hours of headache onset when the pain was moderate to severe.¹

Patients were allowed to take a rescue medication 2 hours after taking study drug; however, opioids, barbiturates, triptans, and ergots were not allowed within 24 hours of study drug administration.¹

2018 FDA guidance recommends both pain freedom and MBS freedom be efficacy endpoints for FDA approval of new acute treatments for migraine.8



Primary endpoint PAIN FREEDOM¹

Complete elimination of moderate to severe headache pain at 2 hours

Key secondary endpoint: Freedom from Most Bothersome Symptom (MBS)¹

Complete elimination of the self-identified most bothersome migraine-associated symptom of photophobia, phonophobia, or nausea (if present at the time of treatment) at 2 hours

Doses evaluated: 100 mg, 200 mg (SAMURAI); 50 mg, 100 mg, 200 mg (SPARTAN).1

[†]Migraine Disability Assessment.

SELECT IMPORTANT SAFETY INFORMATION

Central Nervous System Depression

REYVOW may cause central nervous system (CNS) depression, including dizziness and sedation. Because of the potential for REYVOW to cause sedation, other cognitive and/or neuropsychiatric adverse reactions, and driving impairment, REYVOW should be used with caution if used in combination with alcohol or other CNS depressants. Patients should be warned against driving and other activities requiring complete mental alertness for at least 8 hours after REYVOW is taken.

Please see Important Safety Information on <u>page 6</u> and click to see <u>Full Prescribing Information</u> and <u>Medication Guide</u> for REYVOW.

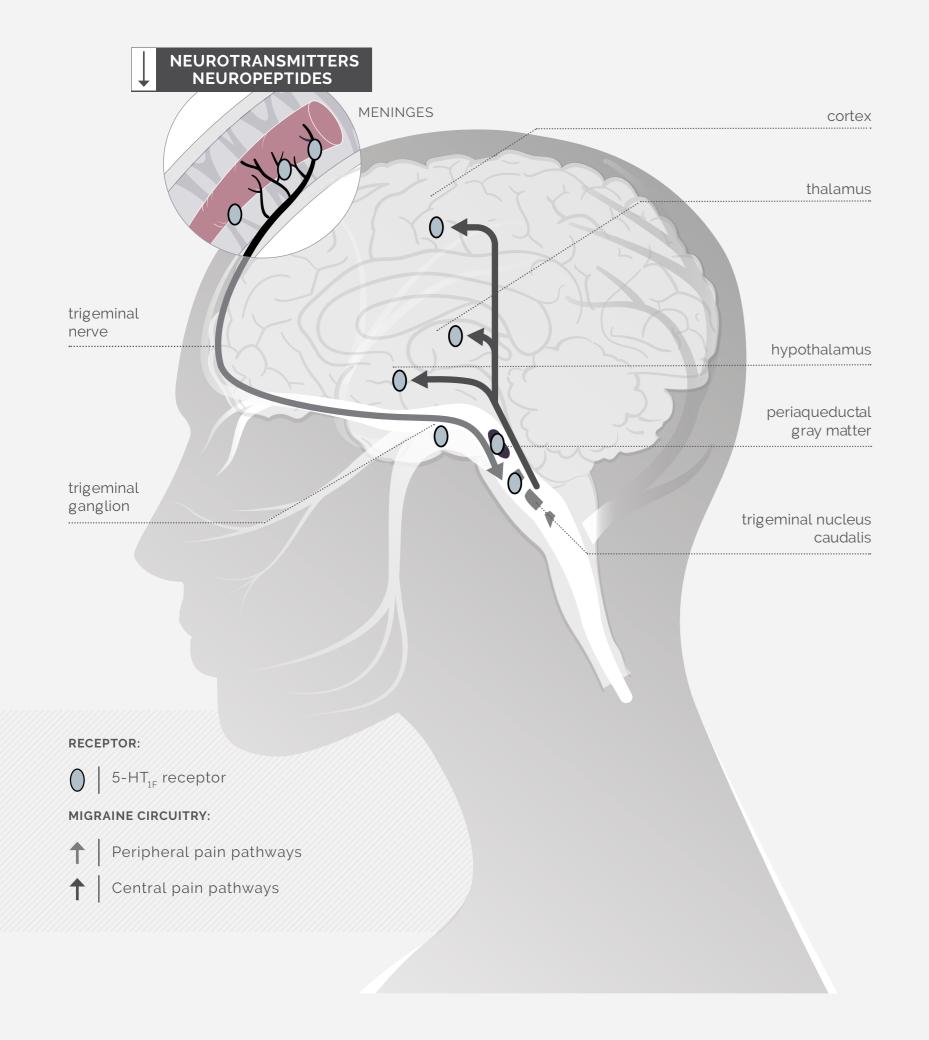
REYVOW*

(lasmiditan) ©

tablets 50mg,100mg

5-HT_{1F} RECEPTORS, INVOLVED IN MODULATING PAIN SIGNALING, ARE FOUND ON BOTH THE PERIPHERAL AND CENTRAL PAIN PATHWAYS^{9,10}

BASED ON THE LOCATION OF THESE RECEPTORS, REYVOW IS BELIEVED TO ACT BOTH CENTRALLY AND PERIPHERALLY¹⁰



REYVOW is not a triptan¹

REYVOW IS THE **FIRST** AND **ONLY** FDA-APPROVED **DITAN**—A HIGH-AFFINITY 5-HT_{1F} RECEPTOR AGONIST¹

REYVOW PRESUMABLY EXERTS ITS THERAPEUTIC EFFECTS BY ACTIVATING THE 5-HT_{1F} RECEPTOR; HOWEVER, THE EXACT MECHANISM OF ACTION IS UNKNOWN¹

Activation of 5-HT_{1F} receptors has been observed in preclinical studies to^{9,11,12}:



Inhibit pain pathways, including the trigeminal nerve



Inhibit the release of neurotransmitters and neuropeptides



Not cause vasoconstriction of blood vessels

IN PRECLINICAL STUDIES:

- Though not demonstrated in humans, REYVOW was shown to cross the blood-brain barrier in an animal model¹³
- REYVOW was shown to be lipophilic based on an in vitro assay¹³

SELECT IMPORTANT SAFETY INFORMATION

Serotonin Syndrome

In clinical trials, reactions consistent with serotonin syndrome were reported in patients treated with REYVOW who were not taking any other drugs associated with serotonin syndrome. Serotonin syndrome may also occur with REYVOW during coadministration with serotonergic drugs. Discontinue REYVOW if serotonin syndrome is suspected.

Please see Important Safety Information on page 6 and click to see Full Prescribing Information and Medication Guide for REYVOW.

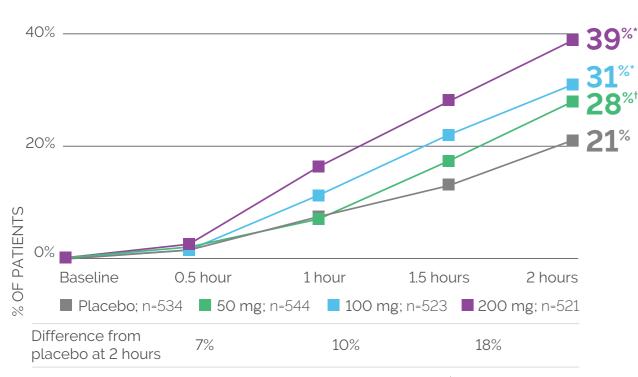
For the acute treatment of migraine in adults¹

FAST AND COMPLETE ELIMINATION OF PAIN AT 2 HOURS IS POSSIBLE WITH A SINGLE DOSE OF REYVOW^{1,14}

SOME PATIENTS ACHIEVED PAIN FREEDOM BEFORE 2 HOURS^{1,14}

RESULTS FROM 2 STUDIES, % OF PATIENTS WHO ACHIEVED PAIN FREEDOM AT 2 HOURS WITH REYVOW VS PLACEBO^{1,14}





*P=.006 vs placebo, †P<.001 vs placebo.

	SAMURAI	
15 % Placebo n=515	28 % ^t 100 mg n=498	32 % ^t 200 mg n=503
Difference from placebo	13%	17%

 $^{\dagger}P$ <.001 vs placebo. Please see clinical study design on page 2.

In SAMURAI, 20% & 25% of patients taking REYVOW experienced pain freedom at 90 minutes compared to 10% with placebo. 1,14

The results for pain freedom at timepoints before 2 hours are descriptive and the analyses were not controlled for Type I error. Effect of REYVOW on pain freedom at these earlier timepoints cannot be regarded as statistically significant. 1,14

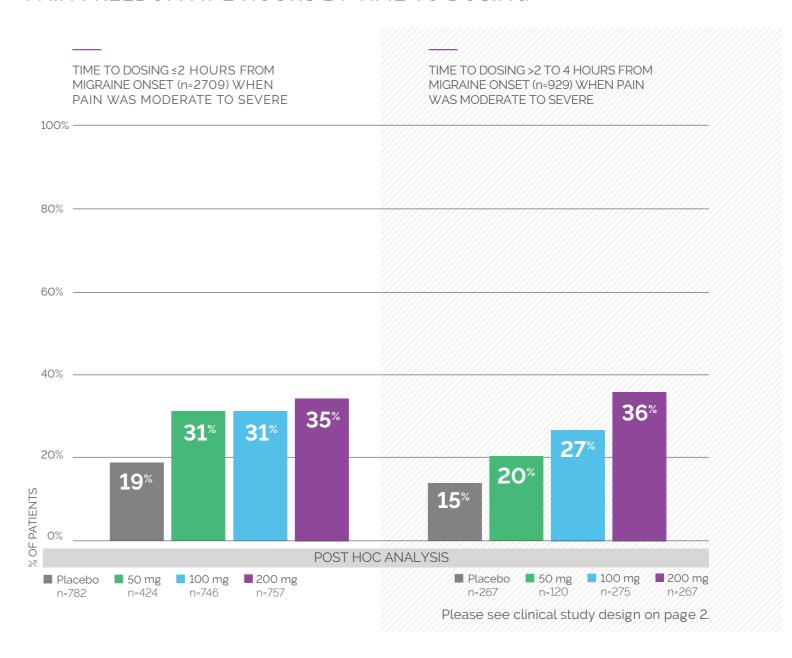


REYVOW® (lasmiditan)® tablets 50mg,100mg

EFFICACY WAS SIMILAR REGARDLESS OF WHEN REYVOW WAS DOSED¹⁵

COMPLETE ELIMINATION OF PAIN IS POSSIBLE FOR PATIENTS WHO WAIT UP TO 4 HOURS TO DOSE REYVOW¹⁵

IN A POST HOC ANALYSIS, % OF PATIENTS WHO ACHIEVED PAIN FREEDOM AT 2 HOURS BY TIME TO DOSING¹⁵



Post hoc analyses of pooled data from SAMURAI and SPARTAN. The analyses are considered exploratory and have not been controlled for Type I error. No conclusions of statistical or clinical significance can be drawn. Patients were instructed to take their dose when pain was moderate to severe and within 4 hours of the onset of pain. The study did not stratify by time to dosing.

SELECT IMPORTANT SAFETY INFORMATION Medication Overuse Headache

Overuse of acute migraine drugs may lead to exacerbation of headache (i.e., medication overuse headache). Medication overuse headache may present as migraine-like daily headaches or as a marked increase in frequency of migraine attacks. Detoxification of patients including withdrawal of the overused drugs and treatment of withdrawal symptoms (which often includes a transient worsening of headache) may be necessary.

Please see Important Safety Information on <u>page 6</u> and click to see <u>Full Prescribing Information</u> and <u>Medication Guide</u> for REYVOW.

REYVOW*

(lasmiditan) ©

tablets 50mg,100mg

REYVOW OFFERS YOU THE FLEXIBILITY OF 3 DOSING OPTIONS¹

AVAILABLE IN 2 TABLET STRENGTHS (50 MG, 100 MG) AND 3 DOSES (50 MG, 100 MG, 200 MG)¹







REYVOW can be taken with or without food. No more than 1 dose should be taken in 24 hours and REYVOW should not be taken unless the patient can wait at least 8 hours between dosing and driving or operating machinery.

A second dose of REYVOW has not been shown to be effective for the same migraine attack. The safety of treating an average of more than 4 migraine attacks in a 30-day period has not been established.¹

PRESCRIBING GUIDANCE

50 mg Tablets

Prescription Form Example

ш	SIG: PRN/1 DOS	E PER 24 HOURS
	DISPENSE: 8 TAI	BLETS
	REFILLS:	(INSERT # OF REFILLS)
	100 mg Tablets	

(
100 mg Tablets
SIG: PRN/1 DOSE PER 24 HOURS
DISPENSE: 8 TABLETS
REFILLS: (INSERT # OF REFILLS)

200 mg-Max dose (100 mg Tablet x 2) SIG: PRN/1 DOSE PER 24 HOURS **DISPENSE:** 8 TABLETS **REFILLS:** _____ (INSERT # OF REFILLS)

SELECT IMPORTANT SAFETY INFORMATION

Driving Impairment

REYVOW may cause significant driving impairment. More sleepiness was reported at 8 hours following a single dose of REYVOW compared to placebo. Advise patients not to engage in potentially hazardous activities requiring complete mental alertness, such as driving a motor vehicle or operating machinery, for at least 8 hours after each dose of REYVOW. Patients who cannot follow this advice should not take REYVOW. Prescribers and patients should be aware that patients may not be able to assess their own driving competence and the degree of impairment caused by REYVOW.

Please see Important Safety Information on page 6 and click to see Full Prescribing Information and Medication **Guide for REYVOW.**

For eligible, commercially insured adult patients with migraine

GET YOUR PATIENTS STARTED WITH THE REYVOW SAVINGS CARD*

PATIENTS CAN GET REYVOW FOR AS LITTLE AS \$0 FOR UP TO 12 MONTHS



Patients can activate the REYVOW Savings Card by visiting REYVOW.com/savings Call 1-833-REYVOW1 (1-833-739-8691) or text "SAVE" to 55900 to get a link sent directly to their phone.

*TERMS AND CONDITIONS

Offer good until 12/31/2021 for up to 12 months of REYVOW. Patients with commercial drug insurance may be able to pay as little as \$0 for their first fill of REYVOW. For the 2nd and subsequent fills, patients must have coverage for REYVOW through their commercial drug insurance plan to continue to pay as little as \$0 per fill. Offer subject to a monthly savings of wholesale acquisition cost plus usual and customary pharmacy charges and a separate \$3,400 maximum annual savings. Participation in the program requires a valid patient HIPAA authorization. Patient is responsible for any applicable taxes, fees, or amounts exceeding monthly or annual caps. This offer is invalid for patients without commercial drug insurance or those whose prescription claims are eligible to be reimbursed, in whole or in part, by any governmental program, including, without limitation, Medicaid, Medicare, Medicare Part D, Medigap, DoD, VA, TRICARE®/CHAMPUS, or any state patient or pharmaceutical assistance program. Offer void where prohibited by law and subject to change or discontinue without notice. Card activation is required. Subject to additional terms and conditions, which can be found at **REYVOW.com/savings**.

IMPORTANT SAFETY INFORMATION

WARNINGS AND PRECAUTIONS

Driving Impairment

REYVOW may cause significant driving impairment. In a driving study, administration of single 50 mg, 100 mg, or 200 mg doses of REYVOW significantly impaired subjects' ability to drive. Additionally, more sleepiness was reported at 8 hours following a single dose of REYVOW compared to placebo. Advise patients not to engage in potentially hazardous activities requiring complete mental alertness, such as driving a motor vehicle or operating machinery, for at least 8 hours after each dose of REYVOW. Patients who cannot follow this advice should not take REYVOW. Prescribers and patients should be aware that patients may not be able to assess their own driving competence and the degree of impairment caused by REYVOW.

Central Nervous System Depression

REYVOW may cause central nervous system (CNS) depression, including dizziness and sedation. Because of the potential for REYVOW to cause sedation, other cognitive and/or neuropsychiatric adverse reactions, and driving impairment, REYVOW should be used with caution if used in combination with alcohol or other CNS depressants. Patients should be warned against driving and other activities requiring complete mental alertness for at least 8 hours after REYVOW is taken.

Serotonin Syndrome

In clinical trials, reactions consistent with serotonin syndrome were reported in patients treated with REYVOW who were not taking any other drugs associated with serotonin syndrome. Serotonin syndrome may also occur with REYVOW during coadministration with serotonergic drugs [e.g., selective serotonin reuptake inhibitors (SSRIs), serotonin norepinephrine reuptake inhibitors (SNRIs), tricyclic antidepressants (TCAs), and monoamine oxidase (MAO) inhibitors]. Serotonin syndrome symptoms may include mental status changes (e.g., agitation, hallucinations, coma), autonomic instability (e.g., tachycardia, labile blood pressure, hyperthermia), neuromuscular signs (e.g., hyperreflexia, incoordination), and/or gastrointestinal signs and symptoms (e.g., nausea, vomiting, diarrhea). The onset of symptoms usually occurs within minutes to hours of receiving a new or a greater dose of a serotonergic medication. Discontinue REYVOW if serotonin syndrome is suspected.

Medication Overuse Headache

Overuse of acute migraine drugs (e.g., ergotamines, triptans, opioids, or a combination of drugs for 10 or more days per month) may lead to exacerbation of headache (i.e., medication overuse headache). Medication overuse headache may present as migraine-like daily headaches or as a marked increase in frequency of migraine attacks. Detoxification of patients including withdrawal of the overused drugs and treatment of withdrawal symptoms (which often includes a transient worsening of headache) may be necessary.

ADVERSE REACTIONS

The most common adverse reactions associated with REYVOW (≥2% and greater than placebo in clinical studies) were dizziness, fatigue, paresthesia, sedation, nausea and/or vomiting, and muscle weakness.

DRUG ABUSE AND DEPENDENCE

REYVOW contains lasmiditan, a Schedule V controlled substance.

Abuse

In a human abuse potential study in recreational poly-drug users (n=58), single oral therapeutic doses (100 mg and 200 mg) and a supratherapeutic dose (400 mg) of REYVOW were compared to alprazolam (2 mg) (C-IV) and placebo. With all doses of REYVOW, subjects reported statistically significantly higher "drug liking" scores than placebo, indicating that REYVOW has abuse potential. Subjects who received REYVOW reported statistically significantly lower "drug liking" scores than alprazolam. Euphoric mood occurred to a similar extent with REYVOW 200 mg, REYVOW 400 mg, and alprazolam 2 mg (43-49%). A feeling of relaxation was noted in more subjects on alprazolam (22.6%) than with any dose of REYVOW (7-11%). Phase 2 and 3 studies indicate that, at therapeutic doses, REYVOW produced adverse events of euphoria and hallucinations to a greater extent than placebo. However, these events occur at a low frequency (about 1% of patients). Evaluate patients for risk of drug abuse and observe them for signs of lasmiditan misuse or abuse.

Dependence

Physical withdrawal was not observed in healthy subjects following abrupt cessation after 7 daily doses of lasmiditan 200 mg or 400 mg.

Please click to see Full Prescribing Information and Medication Guide. LM HCP ISI 11JAN2020

REFERENCES



- 1. REYVOW [Prescribing Information]. Indianapolis, IN: Lilly USA, LLC.
- 2. Kuca B, Silberstein SB, Wietecha L, Berg PH, Dozier G, Lipton RB. Lasmiditan is an effective acute treatment for migraine: a phase 3 randomized study. Neurology. 2018;91:e2222-e2232.
- 3. Goadsby PJ, Wietecha LA, Dennehy EB, et al. Phase 3 randomized, placebo-controlled, double-blind study of lasmiditan for acute treatment of migraine. Brain. 2019;142:1894-1904.
- **4.** Shapiro RE, Hochstetler HM, Dennehy EB, et al. Lasmiditan for acute treatment of migraine inpatients with cardiovascular risk factors: post-hoc analysis of pooled results from 2 randomized, double-blind, placebo-controlled, phase 3 trials. J Headache Pain. 2019:20:90.
- 5. Data on File. Indianapolis, IN: Lilly USA, LLC. DOF-LM-US-0018.
- 6. Data on File. Indianapolis, IN: Lilly USA, LLC. DOF-LM-US-0005.
- 7. Data on File. Indianapolis, IN: Lilly USA, LLC. DOF-LM-US-0012.
- 8. Migraine: developing drugs for acute treatment guidance for industry. US Food and Drug Administration website. https:// www.fda.gov/media/89829/download. Updated February 2018. Accessed June 17, 2019.
- 9. Rubio-Beltrán E, Labastida-Ramirez A, Villalón CM, MaassenVanDenBrink A. Is selective 5-HT₁₀ receptor agonism an entity apart from that of the triptans in antimigraine therapy? *Pharmacol Ther.* 2018;186:88-97.
- 10. Vila-Pueyo M. Targeted 5-HT₁, therapies for migraine. *Neurotherapeutics*. 2018;15:291-303.
- 11. Goadsby PJ, Holland PR, Martins-Oliveira M, Hoffmann J, Schankin C, Akerman S. Pathophysiology of migraine: a disorder of sensory processing. Physiol Rev. 2017;97:553-622.
- 12. Ahn SK, Khalmuratova R, Jeon SY, et al. Colocalization of 5-HT₁ receptor and calcitonin gene-related peptide in rat vestibular nuclei. Neurosci Lett. 2009;465:151-156.
- 13. Data on File. Indianapolis, IN: Lilly USA, LLC. DOF-LM-US-0019.
- 14. Data on File. Indianapolis, IN: Lilly USA, LLC. DOF-LM-US-0004.
- 15. Data on File. Indianapolis, IN: Lilly USA, LLC. DOF-LM-US-0008.

For the acute treatment of migraine in adults1

FAST AND COMPLETE ELIMINATION OF PAIN IS POSSIBLE WITH REYVOW¹



REYVOW, a ditan, is the first and only FDA-approved high-affinity 5-HT_{1F} receptor agonist. REYVOW is not a triptan¹



A single dose can **completely eliminate** migraine pain in 2 hours^{1,14}



Efficacy was similar regardless of when REYVOW was dosed. **Complete elimination of pain is possible** for some patients who dose **within 4 hours**¹⁵



Select important safety information Advise patients not to drive a car or operate machinery for 8 hours after taking REYVOW. Patients who cannot follow this advice should not take REYVOW¹



No contraindications*1

*Please see Important Safety Information on page 6.



Eligible commercially insured patients can get REYVOW for as little as \$0 for up to 12 months[†]

†Please see page 5 for additional savings information and terms and conditions.

