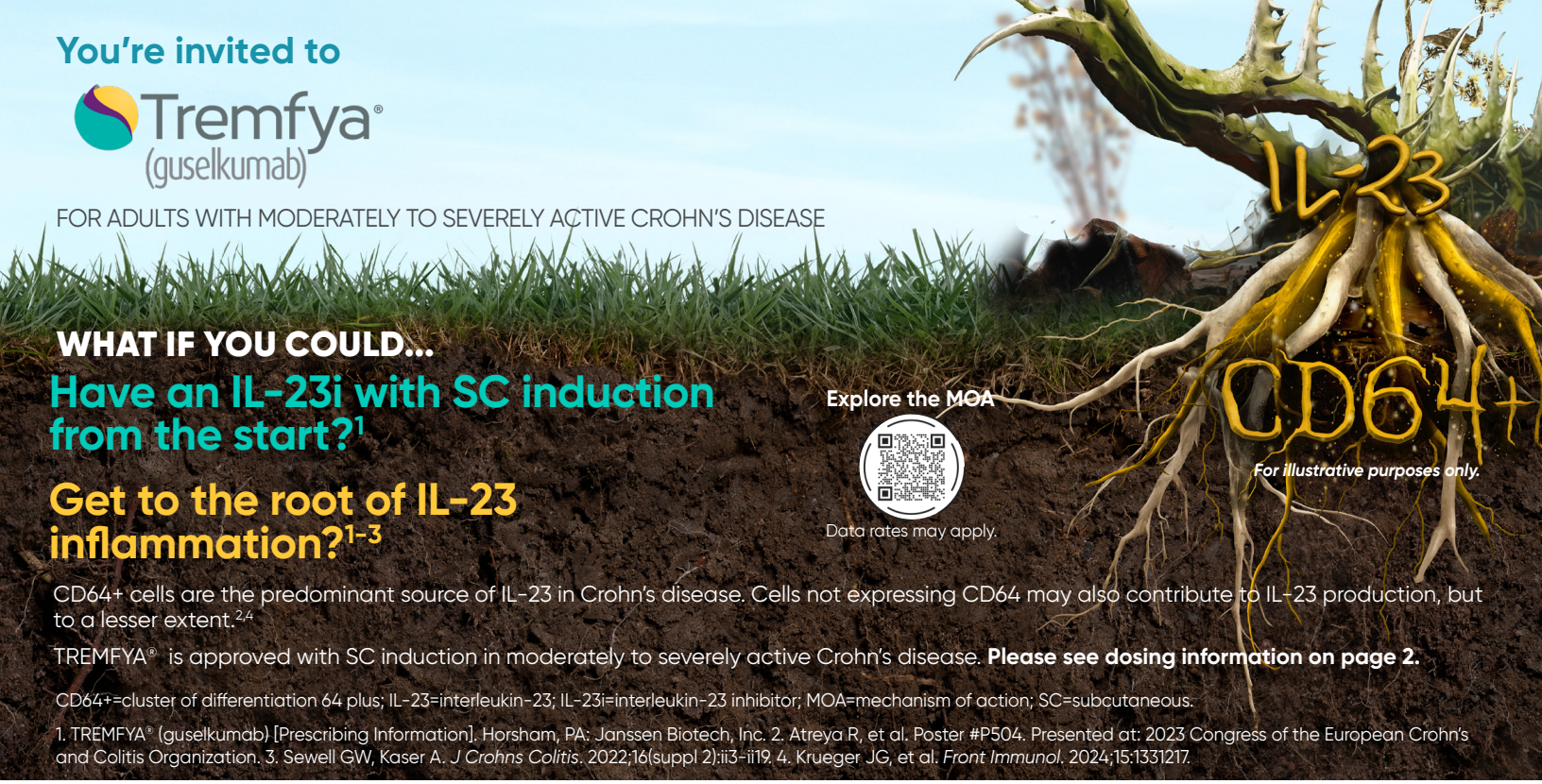
You're invited to

Tremfya® (guselkumab)

FOR ADULTS WITH MODERATELY TO SEVERELY ACTIVE CROHN'S DISEASE



WHAT IF YOU COULD...

Have an IL-23i with SC induction from the start?[1]

Get to the root of IL-23 inflammation?[1-3]

Explore the MOA

Data rates may apply.

CD64+ cells are the predominant source of IL-23 in Crohn's disease. Cells not expressing CD64 may also contribute to IL-23 production, but to a lesser extent.[2,4]

TREMFYA® is approved with SC induction in moderately to severely active Crohn's disease. **Please see dosing information on page 2.**

CD64+=cluster of differentiation 64 plus; IL-23=interleukin-23; IL-23i=interleukin-23 inhibitor; MOA=mechanism of action; SC=subcutaneous.

1. TREMFYA® (guselkumab) [Prescribing Information]. Horsham, PA: Janssen Biotech, Inc. 2. Atreya R, et al. Poster #P504. Presented at: 2023 Congress of the European Crohn's and Colitis Organization. 3. Sewell GW, Kaser A. *J Crohns Colitis*. 2022;16(suppl 2):ii3-ii19. 4. Krueger JG, et al. *Front Immunol*. 2024;15:1331217.

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Friday 3-Oct-25

5:30 PM CT Arrival
6:30 PM CT

THE PARK EVENT CENTER

500 Division St
Waite Park MN 56387
320 640-0204

Register at

MyDomeProgramRegistration.com
Enter Meeting Code: 2025-02592

The consultant is a paid speaker for Janssen Biotech, Inc., a Johnson & Johnson company. The speaker is presenting on behalf of Janssen Biotech, Inc., and must present information in compliance with FDA requirements applicable to Janssen Biotech, Inc.

Please note that your e-mail will be required for registration and shared with Johnson & Johnson. If you have questions about this program, please contact your Johnson & Johnson representative. Sponsored by Johnson & Johnson.

Data rates may apply.

INDICATIONS

TREMFYA® is indicated for the treatment of adult patients with moderately to severely active ulcerative colitis.

TREMFYA® is indicated for the treatment of adult patients with moderately to severely active Crohn's disease.

SELECTED IMPORTANT SAFETY INFORMATION

TREMFYA® is contraindicated in patients with a history of serious hypersensitivity reaction to guselkumab or to any of the excipients. Serious hypersensitivity reactions, including anaphylaxis, may occur. TREMFYA® may increase the risk of infection. Do not initiate treatment in patients with clinically important active infection until the infection resolves or is adequately treated. If such an infection develops, discontinue TREMFYA® until infection resolves. Evaluate for tuberculosis (TB) before treating with TREMFYA®. Monitor patients for signs and symptoms of active TB during and after treatment with TREMFYA®. Drug-induced liver injury has been reported. For the treatment of Crohn's disease or ulcerative colitis, monitor liver enzymes and bilirubin levels at baseline, for at least 16 weeks of treatment, and periodically thereafter according to routine patient management. Interrupt treatment if drug-induced liver injury is suspected, until this diagnosis is excluded. Avoid use of live vaccines in patients treated with TREMFYA®. Please see related and other Important Safety Information on reverse.

DISCLOSURES

In adherence with PhRMA guidelines, spouses or other guests are not permitted to attend company-sponsored programs.

For all attendees, please be advised that information such as your name and the value and purpose of any educational item, meal, or other items of value you receive may be publicly disclosed. If you are licensed in any state or other jurisdiction, or are an employee or contractor of any organization or governmental entity, that limits or prohibits meals from pharmaceutical companies, please identify yourself so that you (and we) are able to comply with such requirements.

Please note that the company prohibits the offering of gifts, gratuities, or meals to federal government employees/officials. Thank you for your cooperation.

IMPORTANT SAFETY INFORMATION

CONTRAINDICATIONS

TREMFYA® is contraindicated in patients with a history of serious hypersensitivity reaction to guselkumab or to any of the excipients.

WARNINGS AND PRECAUTIONS

Hypersensitivity Reactions

Serious hypersensitivity reactions, including anaphylaxis, have been reported with postmarket use of TREMFYA®. Some cases required hospitalization. If a serious hypersensitivity reaction occurs, discontinue TREMFYA® and initiate appropriate therapy.

Infections

TREMFYA® may increase the risk of infection. Treatment with TREMFYA® should not be initiated in patients with any clinically important active infection until the infection resolves or is adequately treated.

Consider the risks and benefits of treatment prior to prescribing TREMFYA® in patients with a chronic infection or a history of recurrent infection. Instruct patients receiving TREMFYA® to seek medical help if signs or symptoms of clinically important chronic or acute infection occur. If a patient develops a clinically important or serious infection, or is not responding to standard therapy, closely monitor and discontinue TREMFYA® until the infection resolves.

Tuberculosis (TB)

Evaluate patients for TB infection prior to initiating TREMFYA® treatment. Do not administer TREMFYA® to patients with active TB infection. Initiate treatment of latent TB prior to administering TREMFYA®. Consider anti-TB therapy prior to initiating TREMFYA® in patients with a past history of latent or active TB in whom an adequate course of treatment cannot be confirmed. Monitor all patients for signs and symptoms of active TB during and after TREMFYA® treatment.

Hepatotoxicity

A serious adverse reaction of drug-induced liver injury was reported in a clinical trial subject with Crohn's disease following three doses of a higher than recommended induction regimen.

In patients with Crohn's disease or ulcerative colitis, evaluate liver enzymes and bilirubin at baseline, for at least 16 weeks of treatment, and periodically thereafter according to routine patient management.

Consider other treatment options in patients with evidence of acute liver disease or cirrhosis. Prompt investigation of the cause of liver enzyme elevation is recommended to identify potential cases of drug-induced liver injury. Interrupt treatment if drug-induced liver injury is suspected, until this diagnosis is excluded. Instruct patients to seek immediate medical attention if they experience symptoms suggestive of hepatic dysfunction.

Immunizations

Prior to initiating TREMFYA®, complete all age-appropriate vaccinations according to current immunization guidelines. Avoid use of live vaccines in patients treated with TREMFYA®.

ADVERSE REACTIONS

Most common adverse reactions associated with TREMFYA® include: ulcerative colitis adverse reactions (≥2%): induction: respiratory tract infections; maintenance (≥3%): injection site reactions, arthralgia, and upper respiratory tract infections. Crohn's disease adverse reactions (≥3%): respiratory tract infections, abdominal pain, injection site reactions, headache, fatigue, arthralgia, diarrhea, and gastroenteritis.

Please read the full Prescribing Information and Medication Guide for TREMFYA®. Provide the Medication Guide to your patients and encourage discussion.

Dosage Forms and Strengths: TREMFYA® is available as 100 mg/mL and 200 mg/2 mL for subcutaneous injection and as a 200 mg/20 mL (10 mg/mL) single-dose vial for intravenous infusion.

cp-510996v1

DOSING INFORMATION IN CROHN'S DISEASE

Induction:

The recommended induction dosage of TREMFYA® is:

- 200 mg administered by intravenous infusion over at least one hour at Week 0, Week 4, and Week 8, or
- 400 mg administered by subcutaneous injection (given as two consecutive injections of 200 mg each) at Week 0, Week 4, and Week 8

Maintenance:

The recommended maintenance dosage of TREMFYA® is:

- 100 mg administered by subcutaneous injection at Week 16, and every 8 weeks thereafter, or
- 200 mg administered by subcutaneous injection at Week 12, and every 4 weeks thereafter

Use the lowest effective recommended dosage to maintain therapeutic response.

Pretreatment Evaluations: Evaluate for tuberculosis (TB) infection, obtain liver enzymes and bilirubin levels, and complete all age-appropriate vaccinations according to current immunization guidelines.

Monitor: For signs and symptoms of active TB during and after treatment with TREMFYA®; liver enzymes and bilirubin levels for at least 16 weeks of treatment, and periodically thereafter according to routine patient management.

TREMFYA® is intended for use under the guidance and supervision of a healthcare professional. TREMFYA® may be administered by a healthcare professional, or a patient/caregiver may inject after proper training in subcutaneous injection technique.

FDA=U.S. Food & Drug Administration.

Johnson&Johnson

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