Stelara®
(ustekinumab)



FOR ADULTS WITH MODERATELY TO SEVERELY ACTIVE CROHN'S DISEASE (CD) OR ULCERATIVE COLITIS (UC)

LASTING REMISSION CAN START WITH STELARA®

IN BOTH THE CD AND UC STUDIES, MANY PATIENTS ACHIEVED CLINICAL REMISSION AT 1 YEAR WITH STELARA®. PLEASE SEE SUPPORTING DATA WITHIN.

CD + UC

STELARA® is a prescription medicine used to treat adults 18 years and older with moderately to severely active Crohn's disease or ulcerative colitis.

SELECTED IMPORTANT SAFETY INFORMATION

STELARA® is not for everyone; only your doctor can decide if it's right for you. STELARA® is a prescription medicine that affects your immune system. It can increase your chances of having serious side effects including serious infections, cancer, serious allergic reactions, lung inflammation, and a rare condition—reversible posterior leukoencephalopathy syndrome. **Please read the Important Safety Information on pages 10-11 of this brochure and the Medication Guide for STELARA® to learn more about these and other risks for STELARA®. Discuss any questions you have with your doctor.**

Stelara® (ustekinumab)

For adults with moderately to severely active CD or UC.



LASTING REMISSION CAN START WITH STELARA®

Welcome to STELARA®, a treatment approved for adults with moderately to severely active CD or UC.

STELARA® can help patients living with CD or UC achieve **relief** and **remission** and, for UC patients, it is the first and only approved UC medication to improve inflammation on and below the surface of the intestine. Keep reading to learn more about results and how STELARA® can help.

180,000+ PATIENTS

have been treated with STELARA® for CD and other approved indications.

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*For adults with moderately to severely active **CD**.*

Clinical trials included patients who failed or were intolerant to other medications, including a biologic, prior to STELARA® (ustekinumab).

RAPID RELIEF

WHEN COULD I FEEL BETTER?

6 WEEKS

- **The majority** of patients who had not previously failed a biologic found **relief from their CD symptoms** just 6 weeks after starting STELARA® (ustekinumab)
- **1 out of 3 patients** who had previously failed a biologic found **relief from their symptoms** in just 6 weeks after starting STELARA®

3 WEEKS*

- Some had **noticeable symptom improvement** as early as 3 weeks

**Symptom improvement was measured differently at weeks 3 and 6.*

LASTING REMISSION

FOR HOW LONG COULD I FEEL BETTER?

1 YEAR

- **The majority** of patients were **in remission at year 1** after responding to the intravenous (IV) dose and continued on STELARA® injections

3 YEARS

Study Extension – Years 1-3†

- **4 out of 10** patients were in remission at 3 years

3 out of 4 patients who were in remission at year 1 were also **in remission at year 3**

†After year 1, patients learned they were on STELARA® treatment.

Individual results may vary. Only you and your doctor can decide if STELARA® is right for you.

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*For adults with moderately to severely active **UC**.*

Clinical trials included patients who failed or were intolerant to other medications, including a biologic, prior to STELARA® (ustekinumab).

RAPID RELIEF

WHEN COULD I FEEL BETTER?

8 WEEKS

- After only one dose of STELARA®, **the majority of patients** saw **rapid relief from their UC symptoms** in just 8 weeks
- Nearly **1 out of 5** patients **achieved clinical remission** in just 8 weeks

STELARA® is the first and only approved UC medication to improve inflammation on and below the surface of the intestine.

Improvement was observed both under the microscope and during colonoscopy in 17% of patients at 8 weeks and 44% of patients at 1 year.

This study did not evaluate how improvement of the intestine relates to long-term outcomes.

LASTING REMISSION

FOR HOW LONG COULD I FEEL BETTER?

1 YEAR

- **4 out of 10** patients who responded to the intravenous (IV) dose and continued on STELARA® injections were **in remission at year 1**

*Study Extension – Years 1-2**

2 YEAR

- Nearly **7 out of 10** patients had no rectal bleeding at all and also had fewer daily bowel movements

**After year 1, patients learned they were on STELARA® treatment. Year 2 results measured at 100 weeks.*

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THE LEGACY OF STELARA®

For adults with moderately to severely active CD or UC.

Stelara® (ustekinumab)

18+ YEARS

of combined clinical research and 10+ years on the market across indications

48,000+ PATIENTS

48,000+ patients have been prescribed STELARA® for CD in the United States

180,000+ PATIENTS

have been treated with STELARA® for CD and other approved indications

800+ PATIENTS

800+ patients were treated with STELARA® in clinical trials for UC



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PERSONALIZED HELP EVERY STEP OF THE WAY

Receive personal support from a registered nurse (a real person!) for every step of your STELARA® (ustekinumab) treatment. **It's the Nurse Navigator program, and it's easy and free to enroll**. After you sign up, your Nurse Navigator will contact you within 24 hours.



"Well, the Nurse Navigator… they're like family, actually. They listen to you."

–Mary, 2-year STELARA® CD patient

To learn more about Mary's story, visit
stelarainfo.com/crohns-disease/stelara-prescription
or stelarainfo.com/ulcerative-colitis/stelara-prescription

YOUR NURSE NAVIGATOR CAN HELP YOU BY:

- **Providing hands-on treatment education**
- **Scheduling your one-time IV infusion**
- **Arranging for in-person self-injection training**
- **Connecting you to a specialist for cost and insurance coverage support**

The nurse program is limited to education about your Janssen medication, its administration, and/or the condition it treats. It is not intended to provide medical advice, replace a treatment plan you receive from your doctor or nurse, or serve as a reason for you to start or stay on treatment.

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CD+UC DOSING

For adults with moderately to severely active CD or UC.

Stelara® (ustekinumab)

FIRST: INFUSION

WEEK 0
One-time IV infusion

STARTING STELARA®: YOUR ONE-TIME IV INFUSION

STELARA® starts with a one-time intravenous (IV) infusion, to help reduce symptoms, through a needle placed in a vein, usually in your arm, in a healthcare facility by a healthcare provider. Your doctor will give you the correct amount of medication based on your weight in a relaxed, comfortable setting.

It takes at least 1 hour to receive the full dose of medicine. Just stream one or two episodes of your favorite show and you're out the door.



"After a 1-time infusion, you receive a sub-q injection every 8 weeks. Now with STELARA®, my symptoms are under control."

–Terrie, STELARA® CD patient

NEXT: INJECTIONS

WEEK 8
Subcutaneous maintenance injections

STAYING WITH STELARA®: MAINTENANCE INJECTIONS

Following up with your maintenance doses is equally important to continue reaching your treatment goals and keep the disease under control. STELARA® provides a convenient schedule of 6 maintenance injections in the first year of treatment, every 8 weeks. Following your initial one-time IV infusion, you will receive 90 mg subcutaneous maintenance injections given under the skin every 8 weeks.

If your doctor decides that you can give your injections at home, you should receive training on the proper way to prepare and inject STELARA®. Do not try to inject until you have been properly trained by a healthcare professional.

Visit **stelarainfo.com/crohns-disease/stelara-prescription** or **stelarainfo.com/ulcerative-colitis/stelara-prescription** for an overview of the self-injection process.

Once you have a prescription, our Nurse Navigators can schedule your IV infusion for you and arrange for in-person self-injection training. To learn more about the Nurse Navigator program, see page 6 of this brochure.

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THE STELARA® DOSING DIFFERENCE

FIRST 52 WEEKS OF THERAPY AFTER STARTER DOSES

STELARA®
(ustekinumab)

6

INJECTIONS
ONE 90 MG INJECTION EVERY 8 WEEKS

After 1 starter IV infusion,
which should take at least one hour.

STELARA® is a prescription medicine used to treat adults 18 years and older with moderately to severely active Crohn's disease or ulcerative colitis.

HUMIRA®*
(adalimumab)

25

INJECTIONS
ONE 40 MG INJECTION EVERY OTHER WEEK

After 2 injections of 80 mg on day 1,
then 1 injection of 80 mg on day 15.
Dosing with citrate-free HUMIRA®.

HUMIRA® is a prescription medicine used to reduce signs and symptoms, and to achieve and maintain clinical remission in adults with moderate to severe Crohn's disease who have not responded well to certain other medications. HUMIRA® is also used to reduce signs and symptoms and achieve clinical remission in these adults who have also lost response to or are unable to tolerate infliximab.

HUMIRA® is a prescription medicine used in adults to help get moderate to severe ulcerative colitis under control (induce remission) and keep it under control (sustain remission) when certain other medicines have not worked well enough. It is not known if HUMIRA® is effective in people who stopped responding to or could not tolerate anti-TNF medicines.

While these factors are important, there are additional considerations for selecting treatment. Please talk to your doctor about treatment options and what might be right for you. This presentation is not intended to compare the safety and effectiveness of these treatments. Please refer to each product's full Prescribing Information for recommended dosing and administration.

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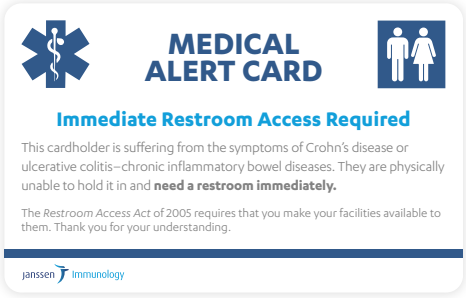
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BATHROOM ACCESS WHEN IT'S MOST URGENT

When a 14-year-old Crohn's disease patient named Ally was denied restroom access at a popular Chicago mall, she decided to act.

In 2005, the Restroom Access Act—also known as Ally's Law—was passed. It states that retail stores that do not have a public restroom must provide access to their employee restroom to any person with a medical condition, including Crohn's disease and ulcerative colitis. As of October 2019, Ally's Law has been passed in 16 states. Click on the card to download a physical version of it that will assert your legal right to a bathroom. Before using your access card make sure your state enforces this law.



LEARN ABOUT SUPPORT OPTIONS FOR COMMERCIALLY INSURED PATIENTS

» If you have commercial insurance and your insurance coverage for STELARA® is approved

JANSSEN CAREPATH SAVINGS PROGRAM*

- Eligible patients pay $5 per injection
- $20,000 maximum program benefit per calendar year
- See full program requirements at Stelara.JanssenCarePathSavings.com

» If your commercial insurance coverage is delayed (>5 business days) or denied

JANSSEN LINK*

- You can receive subcutaneous STELARA® at no cost until you receive insurance coverage approval
- See full program requirements at JanssenCarePath.com/Patient/Stelara/Starting-Treatment

Check your eligibility and enroll at MyJanssenCarePath.com

**Both the Janssen CarePath Savings Program and Janssen Link are unavailable to individuals who use any state or federal government-funded healthcare program to cover a portion of medication cost, such as Medicare, Medicaid, TRICARE, Department of Defense, or Veterans Administration. These programs are for medication only. Terms expire at the end of each program year and may change.*

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IMPORTANT SAFETY INFORMATION

STELARA® is a prescription medicine that affects your immune system. STELARA® can increase your chance of having serious side effects including:

Serious Infections

STELARA® may lower your ability to fight infections and may increase your risk of infections. While taking STELARA®, some people have serious infections, which may require hospitalization, including tuberculosis (TB), and infections caused by bacteria, fungi, or viruses.

- Your doctor should check you for TB before starting STELARA® and watch you closely for signs and symptoms of TB during treatment with STELARA®.
- If your doctor feels that you are at risk for TB, you may be treated for TB before and during treatment with STELARA®.

You should not start taking STELARA® if you have any kind of infection unless your doctor says it is okay.

Before starting STELARA®, tell your doctor if you:

- think you have an infection or have symptoms of an infection such as:
  - fever, sweats, or chills
  - muscle aches
  - cough
  - shortness of breath
  - blood in phlegm
  - weight loss
  - warm, red, or painful skin or sores on your body
  - diarrhea or stomach pain
  - burning when you urinate or urinate more often than normal
  - feel very tired
- are being treated for an infection or have any open cuts.
- get a lot of infections or have infections that keep coming back.
- have TB, or have been in close contact with someone with TB.

After starting STELARA®, call your doctor right away if you have any symptoms of an infection (see above). These may be signs of infections such as chest infections, or skin infections or shingles that could have serious complications. STELARA® can make you more likely to get infections or make an infection that you have worse. People who have a genetic problem where the body does not make any of the proteins interleukin 12 (IL-12) and interleukin 23 (IL-23) are at a higher risk for certain serious infections that can spread throughout the body and cause death. People who take STELARA® may also be more likely to get these infections.

Cancers

STELARA® may decrease the activity of your immune system and increase your risk for certain types of cancer. Tell your doctor if you have ever had any type of cancer. Some people who had risk factors for skin cancer developed certain types of skin cancers while receiving STELARA®. Tell your doctor if you have any new skin growths.

Reversible Posterior Leukoencephalopathy Syndrome (RPLS)

RPLS is a rare condition that affects the brain and can cause death. The cause of RPLS is not known. If RPLS is found early and treated, most people recover. Tell your doctor right away if you have any new or worsening medical problems including: headache, seizures, confusion, and vision problems.

Serious Allergic Reactions

Serious allergic reactions can occur. Stop using STELARA® and get medical help right away if you have any symptoms of a serious allergic reaction such as: feeling faint, swelling of your face, eyelids, tongue, or throat, chest tightness, or skin rash.

CONTINUED ON NEXT PAGE.

Lung Inflammation

Cases of lung inflammation have happened in some people who receive STELARA® and may be serious. These lung problems may need to be treated in a hospital. Tell your doctor right away if you develop shortness of breath or a cough that doesn't go away during treatment with STELARA®.

Before receiving STELARA®, tell your doctor about all of your medical conditions, including if you:

- have any of the conditions or symptoms listed above for serious infections, cancers, or RPLS.
- ever had an allergic reaction to STELARA® or any of its ingredients. Ask your doctor if you are not sure.
- are allergic to latex. The needle cover on the prefilled syringe contains latex.
- have recently received or are scheduled to receive an immunization (vaccine). People who take STELARA® should not receive live vaccines. Tell your doctor if anyone in your house needs a live vaccine. The viruses used in some types of live vaccines can spread to people with a weakened immune system, and can cause serious problems. **You should not receive the BCG vaccine during the one year before receiving STELARA® or one year after you stop receiving STELARA®.**
- have any new or changing lesions within psoriasis areas or on normal skin.
- are receiving or have received allergy shots, especially for serious allergic reactions.
- receive or have received phototherapy for your psoriasis.
- are pregnant or plan to become pregnant. It is not known if STELARA® can harm your unborn baby. You and your doctor should decide if you will receive STELARA®.
- are breastfeeding or plan to breastfeed. It is thought that STELARA® passes into your breast milk.
- talk to your doctor about the best way to feed your baby if you receive STELARA®.

Tell your doctor about all the medicines you take, including prescription and over-the-counter medicines, vitamins, and herbal supplements. Know the medicines you take. Keep a list of them to show your doctor and pharmacist when you get a new medicine.

When prescribed STELARA®:

- Use STELARA® exactly as your doctor tells you to.
- STELARA® is intended for use under the guidance and supervision of your doctor. In children 6 years and older, it is recommended that STELARA® be administered by a healthcare provider. If your doctor decides that you or a caregiver may give your injections of STELARA® at home, you should receive training on the right way to prepare and inject STELARA®. Your doctor will determine the right dose of STELARA® for you, the amount for each injection, and how often you should receive it. Do not try to inject STELARA® yourself until you or your caregiver have been shown how to inject STELARA® by your doctor or nurse.

Common side effects of STELARA® include: nasal congestion, sore throat, and runny nose, upper respiratory infections, fever, headache, tiredness, itching, nausea and vomiting, redness at the injection site, vaginal yeast infections, urinary tract infections, sinus infection, bronchitis, diarrhea, stomach pain, and joint pain. These are not all of the possible side effects with STELARA®. Tell your doctor about any side effect that you experience. Ask your doctor or pharmacist for more information.

Please click to read the full Prescribing Information and Medication Guide for STELARA® and discuss any questions you have with your doctor.

You are encouraged to report negative side effects of prescription drugs to the FDA. Visit www.fda.gov/medwatch or call 1-800-FDA-1088.

cp-124932v2

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TALK TO YOUR DOCTOR TO FIND OUT IF STELARA® IS RIGHT FOR YOU

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