

Thank you for downloading our doctor discussion guide, Speaking Up About OFF Periods. This guide will **help aid your conversations with your doctor,** so you can get the most out of every visit.

In the following pages, you will find a symptom checklist, as well as a guide to help you understand the return of Parkinson's symptoms (OFF periods), and **how to talk to your doctor about them.**

If you are experiencing a return of symptoms while taking your regular Parkinson's medication as prescribed, **ask your doctor if INBRIJA® may be right for you**.

- INBRIJA is for use as needed
- INBRIJA may start to work in as soon as 10 minutes

INBRIJA treats OFF periods in adults taking carbidopa/levodopa (CD/LD). INBRIJA doesn't replace your regular CD/LD. INBRIJA has been shown to improve motor symptoms. The effect of INBRIJA on nonmotor symptoms is unknown.

Do not use INBRIJA if you take or have taken a nonselective monoamine oxidase inhibitor such as phenelzine or tranylcypromine within the last 2 weeks.

Do not orally inhale more than 1 dose (2 capsules) for any OFF period. Do not take more than 5 dose (10 capsules) in a day.

Please see Additional Important Safety Information on the next 2 pages.

If you have any questions about INBRIJA or would like to speak with someone live, please contact us directly or visit our website.

Call toll-free: 1-833-INBRIJA Monday through Friday, 8 AM to 8 PM Eastern Time INBRIJA.com

> Warm regards, The INBRIJA Team



Indication

INBRIJA (levodopa inhalation powder) is a prescription medicine used when needed for OFF episodes in adults with Parkinson's treated with regular carbidopa/levodopa medicine. INBRIJA does not replace regular carbidopa/levodopa medicine.

Additional Important Safety Information

Before using INBRIJA, tell your healthcare provider about your medical conditions, including:

- asthma, chronic obstructive pulmonary disease (COPD), or any chronic lung disease
- daytime sleepiness, sleep disorders, sleepiness/drowsiness without warning, or use
 of medicine that increases sleepiness, including antidepressants or antipsychotics
- dizziness, nausea, sweating, or fainting when standing up
- abnormal movement (dyskinesia)
- mental health problems such as hallucinations or psychosis
- uncontrollable urges like gambling, sexual urges, spending money, or binge eating
- glaucoma
- pregnancy or plans to become pregnant. It is unknown if INBRIJA will harm an unborn baby.
- breastfeeding or plans to breastfeed. Levodopa can pass into breastmilk and it is unknown if it can harm the baby.

Tell your healthcare provider if you take:

- MAO-B inhibitors
- dopamine (D2) antagonists (including phenothiazines, butyrophenones, risperidone, metoclopramide)
- isoniazid
- iron salts or multivitamins that contain iron salts

Do not drive, operate machinery, or do other activities until you know how INBRIJA affects you.

Sleepiness and falling asleep suddenly can happen as late as a year after treatment is started.

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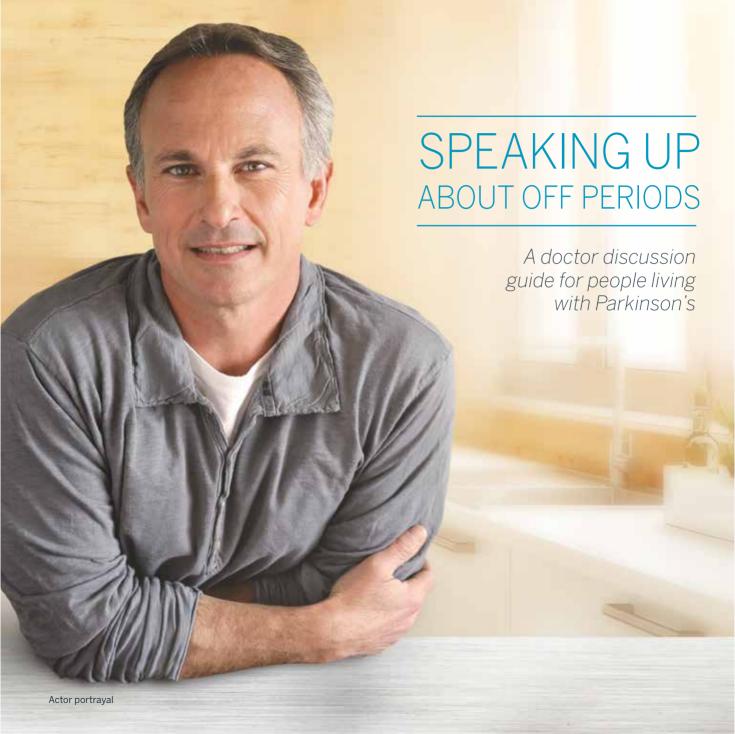
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Tell your healthcare provider if you experience the following side effects:

- falling asleep during normal daily activities with or without warning. If you
 become drowsy, do not drive or do activities where you need to be alert. Chances
 of falling asleep during normal activities increases if you take medicine that cause
 sleepiness.
- withdrawal-emergent hyperpyrexia and confusion (fever, stiff muscles, or changes in breathing and heartbeat) if you suddenly stop using INBRIJA or carbidopa/levodopa, or suddenly lower your dose of carbidopa/levodopa.
- low blood pressure when standing up (that may be with dizziness, fainting, nausea, and sweating). Get up slowly after sitting/lying down.
- hallucinations and other psychosis INBRIJA may cause or worsen seeing/hearing/believing things that are not real; confusion, disorientation, or disorganized thinking; trouble sleeping; dreaming a lot; being overly suspicious or feeling people want to harm you; acting aggressive; and feeling agitated/restless.
- unusual uncontrollable urges such as gambling, binge eating, shopping, and sexual urges has occurred in some people using medicine like INBRIJA.
- uncontrolled, sudden body movements (dyskinesia) may be caused or worsened by INBRIJA. INBRIJA may need to be stopped or other Parkinson's medicines may need to be changed.
- bronchospasm people with asthma, COPD, or other lung diseases may wheeze or have difficulty breathing after inhaling INBRIJA. If this occurs, stop taking INBRIJA and seek immediate medical attention.
- increased eye pressure in patients with glaucoma. Your healthcare provider should monitor this.
- changes in certain lab values including liver tests

The most common side effects of INBRIJA are cough, upper respiratory tract infection, nausea, and change in the color of saliva or spit.

Please see the Patient Information Leaflet at www.inbrija.com/patient-information.pdf



This guide will help you understand OFF periods and how to talk about them.

What exactly are OFF periods?

OFF periods are when Parkinson's symptoms return between regular doses of carbidopa/levodopa.

Many people with Parkinson's have OFF periods.

Some OFF period symptoms can be difficult to notice and talk about.

Keep in mind that OFF periods may include:

- · Motor symptoms like stiffness or shaking
- Nonmotor symptoms like anxiety or fatigue

Some questions you might have about OFF periods

- Q. What should I tell my doctor if I think I'm having OFF periods?
- A. Tell your doctor as many details as you can about the symptoms you have between your regular doses of Parkinson's medicine. Remember, you may not have OFF period symptoms during your doctor visit.

- Q. How many people with Parkinson's have OFF periods?
- A. Of the nearly 1 million people with Parkinson's in the United States, about 40% will have OFF periods within 5 years of starting treatment.

Are you experiencing OFF periods?

Symptoms can vary from person to person and from OFF period to OFF period. Nobody knows your OFF periods better than you.

Now think about your own experience with Parkinson's, and fill out the OFF symptom checklist.

OFF periods can include the return of motor symptoms (related to movement) or nonmotor symptoms (unrelated to movement).

WHICH SYMPTOMS DO YOU EXPERIENCE? Fill in time(s) Fill in time(s) **Motor symptoms Nonmotor symptoms** of day of day Shaking or tremor Anxiety/panic attacks Slowness of movement Drenching sweats Problems with balance Difficulty thinking Challenges with hand Fatigue or drowsiness movements Speech difficulties Restlessness Stiffness Irritability Difficulty getting out of a Sleep disturbances chair Other Other

There are a few more details your doctor may need to know. Answer the questions on these pages.

On an average day, how many OFF periods (the return of Parkinson's symptoms) do you have?

- None
- 1-2
- 3-5
- More than 5

On most days, how much time do you spend in OFF periods?

- None
- Less than 1 hour
- 1-2 hours
- 3-5 hours
- More than 5 hours

Sometimes it's difficult to realize if you're having OFF periods. Think about the activities you enjoy. Have you been having symptoms that you notice when doing these things?
Notes

A great doctor visit is when:

A little planning can go a long way. This section will help you prepare for your next doctor visit.

Recent changes that I've noticed:	



Use these pages to remind yourself of important details you'd like to share. Here are some things I want to remember to bring up at my next visit:

The last time we met. I remember

that my doctor told me:

My next doctor appointment is

(date)

If you think you may be experiencing symptoms of OFF periods, speak up at your next doctor visit. The more you share, the more your doctor may be able to help.

Ask about treatment options for OFF periods.

