

# Belief Map

STRATEGIC  
IMPERATIVE

DO MORE FOR MORE

ENGAGEMENT  
STRATEGY

RATIONALE

CURRENT  
MINDSETDESIRED  
MINDSETCURRENT  
BEHAVIORDESIRED  
BEHAVIOR

## AWARENESS

HCP EDUCATION

## ADOPTION

HCP ACTIVATION

## ADHERENCE

PATIENT ACTIVATION

### AWARENESS

Establish the value of IFN gene screening

There are no predictors of response for the biologic class

It's hit or miss with my biologic

I know exactly which patients are most likely to respond

Rx as last resort in all severe patients

Actively screen IFN-high gene patients for biologic consideration

### DIFFERENTIATION

Champion measures of success that are relevant to clinical practice

It's difficult to define treatment success for SLE

I have a gut feeling that things are working; however, I prefer to rely on hard numbers when I can get them

I'm convinced that anifrolumab is working based on these endpoints that matter to me

Keep patients on their current biologic indefinitely

Actively switch or add anifrolumab to uncontrolled patients

### UTILIZATION

Underscore the value of a non-exclusionary approach to management

Current biologic ignores largest patient segment

I wish I had a biologic for my female patients of African descent

Finally, I can offer these long-deserving patients the highest standard of care

Rx Benlysta for patients who failed in clinical trials because they have no other option

Consistently turn to anifrolumab as the first-line therapy when a biologic is considered

### MOTIVATION

Educate on the need for an optimal long-term management strategy for lupus

HCPs recognize the drawback of current SoC

I rely on corticosteroids and ISs for long-term management of lupus. It's a necessary evil, but I have no choice.

Finally I don't have to compromise safety for efficacy in the long-run

Extensive reliance on a cocktail of corticosteroids and ISs to manage both flares and long-term disease progression

Proactive use of anifrolumab before rapid steroid escalation and prior to ISs

### EMPOWERMENT

Help patients re-engage in their treatment and restore their partnership with HCPs

Moderate-to-severe patients feel let down by their physicians

When SLE was finally diagnosed, I felt a great sense of relief. Now I feel like I'm not being heard again

I can trust my rheumatologist again and rely on him or her to help me feel better

Non-compliant. Self-medicating. Withdrawn

Compliant and actively engaged with HCP treatment plan