

Corporate Presentation

Focus on: Tonmya^{™*} (TNX-102 SL) in Development for the Management of Fibromyalgia

February 2024

NASDAQ: TNXP

*Tonmya is conditionally accepted by FDA as the tradename for TNX-102 SL for the management of fibromyalgia



Cautionary Note on Forward-Looking Statements

Certain statements in this presentation regarding strategic plans, expectations and objectives for future operations or results are "forward-looking statements" as defined by the Private Securities Litigation Reform Act of 1995. These statements may be identified by the use of forward-looking words such as "anticipate," "believe," "forecast," "estimate" and "intend," among others. These forward-looking statements are based on Tonix's current expectations and actual results could differ materially. There are a number of factors that could cause actual events to differ materially from those indicated by such forward-looking statements. These factors include, but are not limited to, the risks related to failure to obtain FDA clearances or approvals and noncompliance with FDA regulations; risks related to the failure to successfully market any of our products; risks related to the timing and progress of clinical development of our product candidates; our need for additional financing; uncertainties of patent protection and litigation; uncertainties of government or third party payor reimbursement; limited research and development efforts and dependence upon third parties; and substantial competition. As with any pharmaceutical under development, there are significant risks in the development, regulatory approval and commercialization of new products. The forward-looking statements in this presentation are made as of the date of this presentation, even if subsequently made available by Tonix on its website or otherwise. Tonix does not undertake an obligation to update or revise any forward-looking statement, except as required by law. Investors should read the risk factors set forth in the Annual Report on Form 10-K for the year ended December 31, 2022, as filed with the Securities and Exchange Commission (the "SEC") on March 13, 2023, and periodic reports and current reports filed with the SEC on or after the date thereof. All of Tonix's forward-looking statements are expressly qualified by all such risk factors and other cautionary statements.



Who We Are

Focusing on:

Filing a New Drug Application (NDA) with the US Food and Drug

Administration (FDA) for Tonmya™ (TNX-102 SL) for the management

of Fibromyalgia





About Fibromyalgia

Fibromyalgia is a <u>chronic pain disorder</u> resulting from amplified sensory and pain signaling within the CNS¹

Fibromyalgia is a <u>syndrome</u> comprised of the <u>symptoms</u>: chronic widespread pain, <u>nonrestorative sleep</u>, fatigue, and brain fog











Fibromyalgia, CFS/ME² and Long COVID have overlapping symptoms - Considered chronic overlapping pain conditions (COPCs)

Fibromyalgia is the **only COPC** with any **FDA-approved drugs**³





Fibromyalgia is a Large, Underserved and Dissatisfied population

- ~10 million U.S. adults are affected predominantly women^{1,2}
 - Debilitating and life altering condition
 - Significant economic cost
- Patients are dissatisfied, despite three FDA approved drugs^{3,4}
 - Average patient has 20 physician office visits per year²
 - Typical for patients to rotate between drugs³
 - Polypharmacy (multiple drugs at the same time) common³
 - Estimated that >22 million prescriptions are issued for the treatment of fibromyalgia (on- and off-label usage) each year^{5,6}
- Prescription opiate use declining because of availability
 - Unknown number of patients using 'street drugs'
- No new Rx product since 2009



¹American College of Rheumatology (<u>www.ACRPatientInfo.org</u> accessed May 7, 2019) – prevalence rate of 2-4% for U.S. adult population (~250 million)

²Vincent A, et al. Arthritis Care Res (Hoboken). 2013 65(5):786-92. doi: 10.1002; diagnosed prevalence rate was 1.1% of adult population or 50% of the prevalent population

³Robinson RL, et al. *Pain Med*. 2012 13(10):1366-76. doi: 10.1111; ; 85% received drug treatment

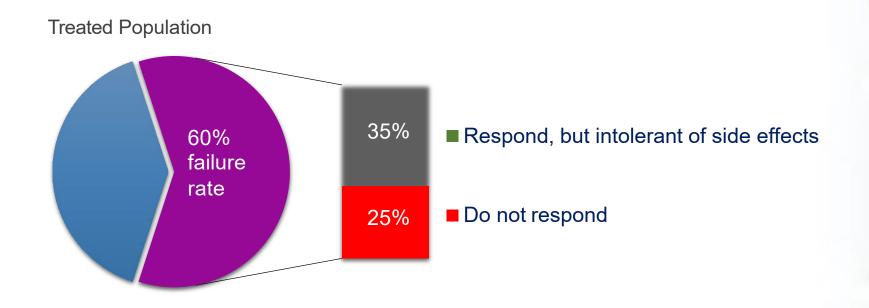
⁴The three drugs with FDA approval for the treatment of fibromyalgia: Pregabalin (Lyrica); Duloxetine (Cymbalta); Milnacipran (Savella)

⁵Product sales derived from IMS MIDAS; IMS NDTI used to factor usage for fibromyalgia; data accessed April 2015.

⁶Market research by Frost & Sullivan, commissioned by Tonix, 2011

Fewer than Half of Those Treated for Fibromyalgia Receive Sustained Benefit from the Three FDA-Approved Drugs¹

- The treatment objective is to restore functionality and quality of life by broadly improving symptoms while avoiding significant side effects
- The majority fail therapy due to lack of a response or poor tolerability²



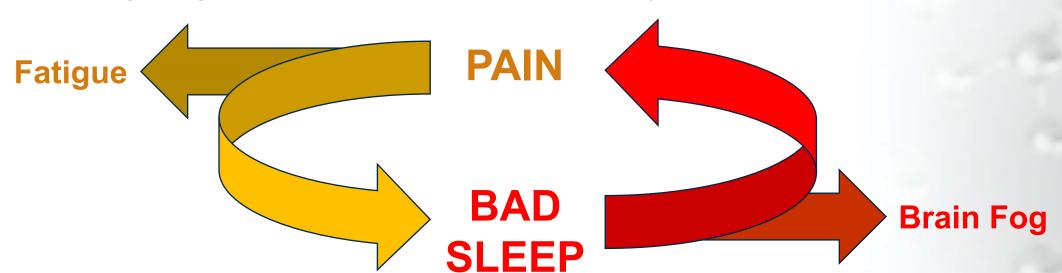


¹The three drugs with FDA approval for the treatment of fibromyalgia: Pregabalin (Lyrica); Duloxetine (Cymbalta); Milnacipran (Savella) ²Market research by Frost & Sullivan, commissioned by Tonix (2011)



Poor Sleep and Pain have Bi-directional Reinforcing Effects¹

- Poor sleep and pain form a <u>vicious cycle</u> in driving fibromyalgia <u>decompensation</u>
 - Can't sleep → worse pain / In pain → can't sleep
 - Poor sleep and pain contribute to persistence, chronicity and severity
 - Syndrome includes symptoms of fatigue and brain fog
- Treating sleep disturbance in fibromyalgia has the potential to break the vicious cycle
 - Potential to remove an obstacle to recovery
 - Using the right medicine is important some sedative/hypnotics don't work^{1,2}







Tonmya[™] (TNX-102 SL, Cyclobenzaprine HCl Sublingual Tablets)¹

- Non-opioid analgesic designed for long-term daily bedtime use in fibromyalgia patients
 - Targets non-restorative sleep
 - No recognized risk for abuse
- Proprietary, sublingual formulation of cyclobenzaprine designed to optimize delivery and absorption
 - Issued patents expected to provide exclusivity to 2034/2035
 - Protectic[®] formulation based on eutectic composition of matter
- Improves <u>sleep quality</u>, does not increase <u>sleep quantity</u>:
 - Not a traditional hypnotic or sedative



Fibromyalgia Program Status

Tonmya™

(TNX-102 SL)

Fibromyalgia

Positive 2nd Phase 3 Topline Results Reported 4Q'23

Cyclobenzaprine Protectic® Sublingual Tablets

- 1) Positive Phase 3 study (*RELIEF*) reported December 2020¹
- 2) Second Phase 3 study (RALLY) missed primary endpoint July 2021
 - Unexpected increase in adverse event-related discontinuations in both drug and placebo arms, potentially due to recruiting during COVID-19
- 3) Positive 2nd (confirmatory) Phase 3 study (*RESILIENT*) reported December 2023

Next Steps:

Pre-NDA meeting with FDA expected 2Q'24
NDA filing expected 2H'24
FDA decision on NDA approval expected 2H'25



Tonmya[™] (TNX-102 SL): Phase 3 *RESILIENT* Study Design



General study characteristics:

- Randomized, double-blind, multicenter, placebo-controlled study in fibromyalgia
- 33 U.S. sites enrolled 457 participants with fibromyalgia as defined by 2016 Revisions to the 2010/2011 FM Diagnostic Criteria¹

Primary Endpoint:

• Change from baseline to Week 14 (TNX-102 SL vs. placebo) in weekly averages of daily diary average pain severity score

TNX-102 SL once-daily at bedtime 5.6 mg (2 x 2.8 mg tablets)*

Placebo once-daily at bedtime

14 weeks

*Two-week run-in at 2.8 mg dose at bedtime followed by 12 weeks at 5.6 mg dose

ClinicalTrials.gov Identifier: NCT05273749

Study Title: A Phase 3 Study to Evaluate the Efficacy and Safety of TNX-102 SL

Taken Daily in Patients With Fibromyalgia (RESILIENT)

Trial ID: TNY-CY-F307 ('RESILIENT')







RESILIENT Pre-Specified Primary Endpoint

Summary¹

- Tonmya[™] (TNX-102 SL) demonstrated statistically significant improvement in mean weekly pain scores over placebo at Week 14
- <u>P-value of 0.00005</u> is *highly* statistically significant

Additional Findings

- Effect size 0.38
- All pre-specified sensitivity analyses of the primary endpoint show statistical significance (p ≤ 0.001)
- Rapid onset of action: p-values <0.01 at each weekly time point, including Week 1

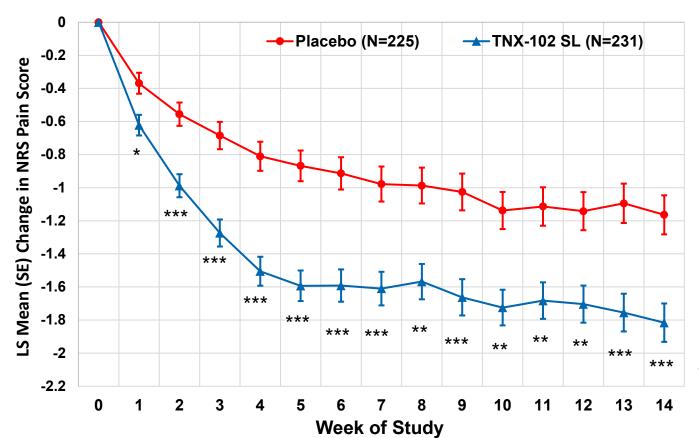


RESILIENT Primary Outcome Measure Reduction in Widespread Pain





Weekly Average of Daily Diary NRS Ratings of Average Pain Over Prior 24 Hours



*p<0.01; **p<0.001; ***p<0.0001

Week 14 LS mean (SE) change from baseline for TNX-102 SL -1.82 (0.12) and for placebo -1.16 (0.12); LSMD from placebo -0.65 (0.16); p=0.00005#

*Based on Mixed Model Repeated Measures with Multiple Imputation, with fixed categorical effects of treatment, center, study week, and treatment by study week interaction, as well as baseline value and baseline value-by-study week interaction. Abbreviations: LS, least squares; LSMD, least squares mean difference; NRS, numerical rating scale; SE, standard error





Summary of Key Pre-Specified Secondary Outcome Measures

Rating Scale	<u>Week 14</u>	<u>Met**</u>
Patient Global Impression of Change (PGIC)	<i>p</i> < 0.001	\checkmark
Fibromyalgia Impact Questionnaire - Symptoms	<i>p</i> < 0.001	✓
Fibromyalgia Impact Questionnaire - Function	p = 0.001	✓
PROMIS Sleep Disturbance	<i>p</i> < 0.001	\checkmark
PROMIS Fatigue	<i>p</i> < 0.001	\checkmark
Weekly average of daily Sleep Quality scores	p < 0.001	✓

^{*}In order of statistical serial gate-keeping hierarchy (or, "waterfall") to control overall Type 1 error **Statistical significance met







RESILIENT Summary of Efficacy

Fibromyalgia is a *syndrome* composed of *symptoms*

- Widespread pain
- Fatigue
- Sleep disturbance

Efficacy across symptoms of pain, fatigue and sleep

Pain: <u>primary endpoint</u>, daily pain diary: *p*-value of 0.00005

Fatigue: PROMIS fatigue: p-value of 0.00009

Sleep: PROMIS sleep disturbance: p-value of 0.0000001

Conclusion: Tonmya has "broad spectrum" or "syndromal activity"

- Broad spectrum: across several symptoms
- Syndromal: improves the syndrome (most of the symptoms)
- Potential for a broad-spectrum drug to reduce the use of multiple drugs or "polypharmacy"







Treatment-Emergent Adverse Events (TEAEs) at Rate of ≥ 3% in Either Treatment Group

System Organ Class	TNX-102 SL	Placebo	Total*
Preferred Term	N=231	N=226	N=457
Systemic Adverse Events			
COVID-19	10 (4.3%)	7 (3.1%)	17 (3.7%)
Somnolence	7 (3.0%)	3 (1.3%)	10 (2.2%)
Headache	7 (3.0%)	4 (1.8%)	11 (2.4%)
Oral Cavity Adverse Events			
Hypoaesthesia oral	55 (23.8%)	1 (0.4%)	56 (12.3%)
Product taste abnormal	27 (11.7%)	2 (0.9%)	29 (6.3%)
Paraesthesia oral	16 (6.9%)	2 (0.9%)	18 (3.9%)
Tongue discomfort	16 (6.9%)	0 (0.0%)	16 (3.5%)

*Safety Population

Changes in Sexual Functioning Questionnaire short form (CSFQ-14) was a safety measure in the study

- In females, CSFQ-14 total score improved (indicating better sexual functioning) to a greater extent in the TNX-102 SL group compared with placebo, p=0.010
- Orgasm/Completion and Desire/Frequency were improved
- Potential tolerability advantage over pharmacotherapeutics with potent serotonin reuptake inhibition



Tonmya[™] Showed Broad-Spectrum Activity and was Well Tolerated No current product addresses pain, poor sleep and fatigue

	Symptoms/Side Effects	Lyrica®	Cymbalta [®] Savella [®]	Tonmya™
	Pain	YES	YES	YES
Activity	Sleep	YES	-	YES
	Fatigue	-	YES	YES
	Sleep	-	YES	-
	Fatigue	YES	-	-
Systemic Tolorability	Weight	YES	-	-
Tolerability Issues	Blood Pressure	-	YES	-
	Sexual function	-	YES	-
	GI issues	-	YES	-
Class		Gabapentinoid	SNRI	Tricyclic
Mechanism		Slow neuron firing	Block NE reuptake	Targets sleep disturbance



Planning for Tonmya[™] Launch and Marketing

Several companies that successfully developed CNS drugs have launched them

Big Pharma wants the commercial launch de-risked before acquisition (e.g., Nurtec®)

Company		Mkt Cap¹	Product	Indication	FDA Approval	Exit
Axsome	AXSM	\$4.4 B	Auvelity®	Depression	8/2022	
Biohaven	BHVN	\$3.8 B	Nurtec®	Migraine	2/2020	Sold to PFE for \$12 B in Oct 2022
IntraCellular	ITCI	\$7.1 B	Caplyta [®]	Schizophrenia	12/2019	
Supernus	SUPN	\$1.5 B	Oxtella-XR®	Seizures	1/2019	
Neurocrine	NBIX	\$13.2 B	Ingrezza®	Tardive Dyskinesia	4/2017	
Acadia	ACAD	\$4.1 B	Nuplazid [®]	Parkinson's psychosis	4/2016	

To prepare for the launch of Tonmya, Tonix acquired two marketed Rx drugs: Zembrace® and Tosymra®

Both are indicated for the acute treatment of migraine



Two Marketed Proprietary Migraine Drugs

Non-oral Formulations of Sumatriptan

Zembrace® SymTouch® (sumatriptan injection) 3 mg¹



Tosymra[®] (sumatriptan nasal spray) 10 mg²



• Each indicated for the treatment of acute migraine with or without aura in adults

- Sumatriptan remains the acute migraine 'gold standard' treatment for many patients and continues to represent the largest segment of the market in terms of unit sales³
- Each may provide migraine pain relief in as few as 10 minutes for some patients^{1,2,4,5}
- Patents to 2036 (Zembrace) and 2031 (Tosymra)

Acquired from Upsher-Smith Laboratories which has managed care contracts covering ~200 M lives

· Contract includes a transition period during which Tonix expects to secure its own contracts

Tonix is prepared to meet potential increased demand for Tosymra following GSK's discontinuation of lmitrex® (sumatriptan) nasal spray in January 2024

¹Zembrace SymTouch [package insert]. Maple Grove, MN: Upsher-Smith Laboratories, LLC: February 2021 - For more information, talk to your provider and read the <u>Patient Information</u> and <u>Instructions for Use</u>. – Important Safety Information is provided in the appendix ²Tosymra [package insert]. Maple Grove, MN: Upsher-Smith Laboratories, LLC: Feb 2021. For more information, talk to your provider and read the <u>Patient Information</u> and <u>Instructions</u> for Use. – Important Safety Information is provided in the appendix

³Upsher-Smith Laboratories, LLC; Data On File, 2023

⁴Mathew NT, et al. Dose ranging efficacy and safety of subcutaneous sumatriptan in the acute treatment of migraine. US Sumatriptan Research Group. Arch Neurol. 1992;49(12):1271-1276.

⁵Wendt J, et al. A randomized, double-blind, placebo-controlled trial of the efficacy and tolerability of a 4-mg dose of subcutaneous sumatriptan for the treatment of acute migraine attacks in adults. Clinical Therapeutics. 2006;28(4):517-526.





Decline in personal promotion ("Detailing") of prescription drugs

- The pandemic accelerated transition to non-personal promotion
 - Omnichannel is more important and more sophisticated
 - Tele-sales
 - Digital
 - Direct mail
- Growth in need to support patients with payers to seek reimbursement

Fibromyalgia experts are a subset of Rheumatologists

- New prescriptions for fibromyalgia drugs originate in a subset of doctors
 - Refills may be written by general practitioners

Channels for distribution of prescription drugs are evolving

Growth of specialty pharmacies who distribute products by mail



Large Need for New Fibromyalgia Therapies that Provide Broad Symptom Improvement with Better Tolerability

- Currently-approved medications may have side effects that limit long-term use¹
 - Many patients skip doses or discontinue altogether within months of treatment initiation
 - Medication-related side effects may be similar to fibromyalgia symptoms
- High rates of discontinuation, switching and augmentation
 - Attempt to treat multiple symptoms and/or avoid intolerable side effects
 - Average of 2-3 medications usedsimultaneously²
 - The typical patient has tried six different medications³
- Substantial off-label use of narcotic painkillers and prescription sleep aids³
 - Among those diagnosed, more than one-third have used prescription opioids as a means of treatment⁴
- Tonmya[™] (TNX-102 SL) is a non-opioid, centrally-acting analgesic that could provide a new broad-spectrum therapeutic option for fibromyalgia patients



¹ Nuesch et al, *Ann Rheum Dis* 2013;72:955-62.

² Robinson RL et al, *Pain Medicine* 2012;13:1366.

³ Patient Trends: Fibromyalgia", Decision Resources, 2011.

⁴ Berger A, et al. *Int J Clin Pract*, 2007; 61(9):1498–1508.

Milestones: Recently Completed and Upcoming

Financial Milestones

4th Quarter 2023 Financing: \$144 M facility: \$30 M upfront

Tonmya™ Milestones

✓ 4th Quarter 2023 Positive topline results of Phase 3 RESILIENT study for Tonmya[™] for the management of fibromyalgia

□ 2nd Quarter 2024 Initiate Phase 2 study of TNX-102 SL for acute stress disorder

□ 2nd Quarter 2024 Pre-NDA meeting with FDA for Tonmya[™] for fibromyalgia

□ 2nd Half 2024 Submit NDA to FDA for Tonmya[™] for fibromyalgia

Other Key Program Milestones

□ 1st Quarter 2024 Initiate Phase 2 study of TNX-1300 for the treatment of cocaine intoxication

□ 3rd Quarter 2024 Results of Phase 1 study of TNX-1500



Additional Potential Indications for Tonmya™ (TNX-102 SL)



Fibromyalgia-Type Long COVID

Status: Phase 2

Phase 2 study (PREVAIL) completed

Topline results reported 3Q 2023

Next Steps: Meet with FDA



Acute Stress Reaction/ Acute Stress Disorder

- Phase 2 ready investigator-initiated study
- Department of Defense funded
- UNC will perform study
- Received IND clearance from FDA

Next Steps: Expect to start Phase 2 in 2Q 2024



Key Clinical Programs

Molecule*	Indication	Phase 1 Phase 2	Phase 3	NDA Submission
Tonmya™	Fibromyalgia	Positive Phase 3 Topline Results Reported 4Q'23		Submission expected 2H'24
TNX-102 SL	Long COVID	Phase 2 Topline Results Reported 3Q'23		7/2
Cyclobenzaprine HCl		Nopolica 3Q 23		
Protectic® Sublingual Tablets	Acute Stress Disorder	Phase 2 Study Start Expected 2Q'24		
TNX-1300				(%)
Cocaine Esterase NIDA Funded	Cocaine Intoxication	Phase 2 Study Start Expected 1Q'24		
TNX-2900				(.5)
Intranasal Potentiated Oxytocin FDA Orphan Drug Designation	Prader-Willi Syndrome	Phase 2 Ready		
TNX-1500	Organ Transplant	Phase 1 Study Phase 1 dat	ta.	
Anti-CD40L mAb	Rejection/ Autoimmune Conditions	Ongoing expected 30		Td

TONIX





Zembrace® Important Safety Information (1 of 2)

Zembrace SymTouch (Zembrace) can cause serious side effects, including heart attack and other heart problems, which may lead to death. Stop use and get emergency help if you have any signs of a heart attack:

• Discomfort in the center of your chest that lasts for more than a few minutes or goes away and comes back; severe tightness, pain, pressure, or heaviness in your chest, throat, neck, or jaw; pain or discomfort in your arms, back, neck, jaw or stomach; shortness of breath with or without chest discomfort; breaking out in a cold sweat; nausea or vomiting; feeling lightheaded

Zembrace is not for people with risk factors for heart disease (high blood pressure or cholesterol, smoking, overweight, diabetes, family history of heart disease) unless a heart exam shows no problem.

Do not use Zembrace if you have:

- History of heart problems; narrowing of blood vessels to your legs, arms, stomach, or kidney (peripheral vascular disease); uncontrolled high blood pressure; hemiplegic or basilar migraines. If you are not sure if you have these, ask your provider.
- Had a stroke, transient ischemic attacks (TIAs), or problems with blood circulation; severe liver problems; taken any of the following medicines in the last 24 hours: almotriptan, eletriptan, frovatriptan, naratriptan, rizatriptan, ergotamines, dihydroergotamine; are taking certain antidepressants, known as monoamine oxidase (MAO)-A inhibitors or it has been 2 weeks or less since you stopped taking a MAO-A inhibitor. Ask your provider for a list of these medicines if you are not sure.
- An allergy to sumatriptan or any of the components of Zembrace

Tell your provider about all of your medical conditions and medicines you take, including vitamins and supplements.

Zembrace can cause dizziness, weakness, or drowsiness. If so, do not drive a car, use machinery, or do anything where you need to be alert.





Zembrace® Important Safety Information (2 of 2)

Zembrace may cause serious side effects including:

- Changes in color or sensation in your fingers and toes; sudden or severe stomach pain, stomach pain after meals, weight loss, nausea or vomiting, constipation or diarrhea, bloody diarrhea, fever; cramping and pain in your legs or hips; feeling of heaviness or tightness in your leg muscles; burning or aching pain in your feet or toes while resting; numbness, tingling, or weakness in your legs; cold feeling or color changes in one or both legs or feet; increased blood pressure including a sudden severe increase even if you have no history of high blood pressure; medication overuse headaches from using migraine medicine for 10 or more days each month. If your headaches get worse, call your provider.
- Serotonin syndrome, a rare but serious problem that can happen in people using Zembrace, especially when used with anti-depressant medicines called SSRIs or SNRIs. Call your provider right away if you have: mental changes such as seeing things that are not there (hallucinations), agitation, or coma; fast heartbeat; changes in blood pressure; high body temperature; tight muscles; or trouble walking.
- Hives (itchy bumps); swelling of your tongue, mouth, or throat
- Seizures even in people who have never had seizures before

The most common side effects of Zembrace include: pain and redness at injection site; tingling or numbness in your fingers or toes; dizziness; warm, hot, burning feeling to your face (flushing); discomfort or stiffness in your neck; feeling weak, drowsy, or tired.

Tell your provider if you have any side effect that bothers you or does not go away. These are not all the possible side effects of Zembrace. For more information, ask your provider.

This is the most important information to know about Zembrace but is not comprehensive. For more information, talk to your provider and read the <u>Patient Information</u> and <u>Instructions for Use</u>. You can also visit <u>www.upsher-smith.com</u> or call 1-888-650-3789. For full Prescribing Information, visit: https://dailymed.nlm.nih.gov/dailymed/drugInfo.cfm?setid=6e5b104f-2b9e-416e-92fb-ef1bdaea867d

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

Zembrace is a prescription medicine used to treat acute migraine headaches with or without aura in adults who have been diagnosed with migraine.

Zembrace is not used to prevent migraines. It is not known if it is safe and effective in children under 18 years of age.



Tosymra® Important Safety Information (1 of 2)

Tosymra® can cause serious side effects, including heart attack and other heart problems, which may lead to death. Stop Tosymra and get emergency medical help if you have any signs of heart attack:

Discomfort in the center of your chest that lasts for more than a few minutes or goes away and comes back; severe
tightness, pain, pressure, or heaviness in your chest, throat, neck, or jaw; pain or discomfort in your arms, back, neck, jaw,
or stomach; shortness of breath with or without chest discomfort; breaking out in a cold sweat; nausea or vomiting; feeling
lightheaded

Tosymra is not for people with risk factors for heart disease (high blood pressure or cholesterol, smoking, overweight, diabetes, family history of heart disease) unless a heart exam is done and shows no problem.

Do not use Tosymra if you have:

- History of heart problems; narrowing of blood vessels to your legs, arms, stomach, or kidney (peripheral vascular disease);
 uncontrolled high blood pressure; severe liver problems; hemiplegic or basilar migraines. If you are not sure if you have these, ask your healthcare provider.
- Had a stroke, transient ischemic attacks (TIAs), or problems with blood circulation; taken any of the following medicines in the last 24 hours: almotriptan, eletriptan, frovatriptan, naratriptan, rizatriptan, ergotamines, or dihydroergotamine. Ask your provider if you are not sure if your medicine is listed above
- are taking certain antidepressants, known as monoamine oxidase (MAO)-A inhibitors or it has been 2 weeks or less since you stopped taking a MAO-A inhibitor. Ask your provider for a list of these medicines if you are not sure
- An allergy to sumatriptan or any ingredient in Tosymra

Tell your provider about all of your medical conditions and medicines you take, including vitamins and supplements. Tosymra can cause dizziness, weakness, or drowsiness. If so, do not drive a car, use machinery, or do anything where you need to be alert.





Tosymra® Important Safety Information (2 of 2)

Tosymra may cause serious side effects including:

- Changes in color or sensation in your fingers and toes; sudden or severe stomach pain, stomach pain after meals, weight loss, nausea or vomiting, constipation or diarrhea, bloody diarrhea, fever; cramping and pain in your legs or hips, feeling of heaviness or tightness in your leg muscles, burning or aching pain in your feet or toes while resting, numbness, tingling, or weakness in your legs, cold feeling or color changes in one or both legs or feet; increased blood pressure including a sudden severe increase even if you have no history of high blood pressure; medication overuse headaches from using migraine medicine for 10 or more days each month. If your headaches get worse, call your provider.
- Serotonin syndrome, a rare but serious problem that can happen in people using Tosymra, especially when used with anti-depressant medicines called SSRIs or SNRIs. **Call your provider right away if you have**: mental changes such as seeing things that are not there (hallucinations), agitation, or coma; fast heartbeat; changes in blood pressure; high body temperature; tight muscles; or trouble walking.
- · Seizures even in people who have never had seizures before

The most common side effects of Tosymra include: tingling, dizziness, feeling warm or hot, burning feeling, feeling of heaviness, feeling of pressure, flushing, feeling of tightness, numbness, application site (nasal) reactions, abnormal taste, and throat irritation.

Tell your provider if you have any side effect that bothers you or does not go away. These are not all the possible side effects of Tosymra. For more information, ask your provider.

This is the most important information to know about Tosymra but is not comprehensive. For more information, talk to your provider and read the <u>Patient Information</u> and <u>Instructions for Use.</u> You can also visit <u>www.upsher-smith.com</u> or call 1-888-650-3789. For full Prescribing Information, visit: https://dailymed.nlm.nih.gov/dailymed/drugInfo.cfm?setid=015a5cf9-f246-48bc-b91e-cd730a53d8aa

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.

Tosymra is a prescription medicine used to treat acute migraine headaches with or without aura in adults.

Tosymra is not used to treat other types of headaches such as hemiplegic or basilar migraines or cluster headaches.

Tosymra is not used to prevent migraines. It is not known if Tosymra is safe and effective in children under 18 years of age.

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