

For adults with moderately to severely active ulcerative colitis (UC).

HEALING IS POSSIBLE*

with  Tremfya®
(guselkumab)

In clinical trials of patients receiving TREMFYA®:

At 12 weeks

23% (200 mg IV) were in clinical remission.

At 1 year

50% (200 mg SC) and 45% (100 mg SC) were in clinical remission.

*34% (200 mg SC) and 35% (100 mg SC) achieved endoscopic remission. Visually assessed areas may not represent remission of the entire colon lining.

Individual results may vary.

IV=intravenous infusion; SC=subcutaneous injection.

Continue reading for more details.

WHAT IS TREMFYA® (guselkumab)?

TREMFYA® is a prescription medicine used to treat adults with moderately to severely active ulcerative colitis.

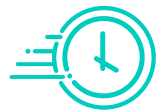
SELECTED IMPORTANT SAFETY INFORMATION

TREMFYA® is not for everyone; only your healthcare provider can decide if it's right for you. Do not use if you are allergic to TREMFYA®. TREMFYA® is a prescription medicine that may cause serious side effects, including serious allergic reactions, infections, and liver problems. TREMFYA® affects your immune system. It may increase your risk of infections and lower your ability to fight them. Please read the Important Safety Information on pages 12-13 and the [Medication Guide](#) for TREMFYA® to learn more about these and other risks for TREMFYA®. Discuss any questions you have with your healthcare provider.

For adults with moderately to severely active ulcerative colitis (UC).

Why choose TREMFYA[®]?

An important aspect of managing UC is to help visibly heal the lining of your colon and to treat your symptoms—TREMFYA[®] can help with both.



FAST ACTING

IN AN INDUCTION STUDY,*

Rapid symptom relief at 4 weeks

Some patients taking TREMFYA[®] experienced:

- fewer bowel movements
- less rectal bleeding (blood in stool)

almost **3X more** patients on TREMFYA[®] (**23% vs 8%** of patients on placebo) **achieved clinical remission[§] at 12 weeks** taking initial intravenous (IV) infusions of 200 mg.[†]

*Results are from a clinical trial of patients with moderately to severely active UC: 421 patients received TREMFYA[®] 200 mg IV and 280 patients received placebo.

[†]Intravenous infusion (through a vein in the arm).

[§]Results are from patients who achieved clinical response after 12 weeks of TREMFYA[®] induction and entered the maintenance trial: 190 patients received TREMFYA[®] 200 mg, 188 patients received TREMFYA[®] 100 mg, and 190 patients received placebo.

[§]Clinical remission is based on frequency of bowel movements, fewer bloody stools, and endoscopy results.

^{||}Subcutaneous injection (under the skin).



Talk to your healthcare provider to see if TREMFYA[®] is right for you.



LONG LASTING

IN A MAINTENANCE STUDY OF PATIENTS WHO RESPONDED IN THE INDUCTION STUDY,[‡]

over **2X more** patients on TREMFYA[®] **achieved clinical remission[§] at one year:**

- **50%** of patients taking 200 mg subcutaneous maintenance injections^{||} vs 19% of patients taking placebo.
- **45%** of patients taking 100 mg subcutaneous maintenance injections^{||} vs 19% of patients taking placebo.



AT 2 YEARS, many patients were in clinical remission^{§†}:

- **52%** of patients taking 200 mg subcutaneous maintenance injections.^{||}
- **55%** of patients taking 100 mg subcutaneous maintenance injections.^{||}

[†]After 1 year, patients and healthcare providers knew that TREMFYA[®] was used. This may have increased results.

Individual results may vary.

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For adults with moderately to severely active ulcerative colitis (UC).

Why choose TREMFYA[®]? (cont'd)

Some patients saw **100% VISIBLE HEALING OF THEIR INTESTINAL LINING**

IN A MAINTENANCE STUDY OF PATIENTS WHO RESPONDED IN THE INDUCTION STUDY,*

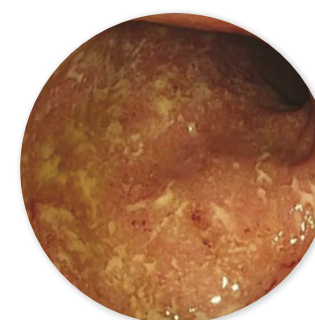
2X more patients on TREMFYA[®] achieved endoscopic remission at **one year**, which is no visible signs of inflammation on the colon lining during endoscopy:

- **34%** of patients taking TREMFYA[®] 200 mg subcutaneous maintenance injections[†] vs 15% placebo.
- **35%** of patients taking TREMFYA[®] 100 mg subcutaneous maintenance injections[†] vs 15% placebo.

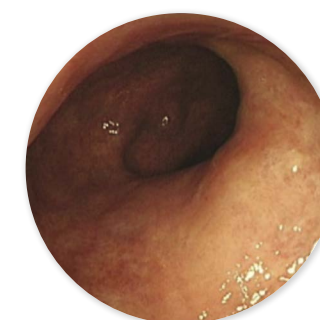
Visually assessed areas may not represent remission of the entire colon lining.



SEE THE DIFFERENCE WITH ENDOSCOPIC IMAGERY[‡]



Before TREMFYA[®]



After one year on TREMFYA[®]

Visually assessed areas may not represent remission of the entire colon lining.

[‡]The images are of sections of the colon from an actual patient who enrolled in the TREMFYA[®] UC induction and maintenance studies.

To learn more about TREMFYA[®], talk to your healthcare provider or scan this QR code.



Data rates may apply.

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Individual results may vary.

*Results are from patients who achieved clinical response after 12 weeks of TREMFYA[®] induction and entered the maintenance trial: 190 patients received TREMFYA[®] 200 mg, 188 patients received TREMFYA[®] 100 mg, and 190 patients received placebo.

[†]Subcutaneous injection (under the skin).

Next: Get the details on how to take TREMFYA[®].

TREMFYA® DOSING

After finishing your 3 initial doses of TREMFYA®, you may be able to administer TREMFYA® maintenance dosing at home with your healthcare provider's approval and receive proper training on how to prepare and inject TREMFYA®.

How to take TREMFYA®:



IV INITIAL DOSES

Your first 3 doses will be given through a vein in the arm (intravenous infusion) in a healthcare facility every 4 weeks.

It takes at least 1 hour for each dose.

WEEK 0



WEEK 4



WEEK 8



SUBCUTANEOUS MAINTENANCE DOSES

After finishing your initial doses, you will receive TREMFYA® subcutaneously (under the skin) as:

- A **200 mg** dose every 4 weeks starting at week 12
- OR
- A **100 mg** dose every 8 weeks starting at week 16

Your healthcare provider will prescribe the right dose for you. Use TREMFYA® exactly as prescribed.

WEEK 12 AND EVERY 4 WEEKS AFTER



OR

WEEK 16 AND EVERY 8 WEEKS AFTER



IMPORTANT: If your healthcare provider decides that you or a caregiver may be able to give your injections of TREMFYA® at home, you should receive training on the right way to inject TREMFYA® before attempting to inject. Do not try to inject yourself until you have been shown the right way to give the injections by your healthcare provider.

Read the detailed Instructions for Use (IFU) that comes with your TREMFYA® medication for information on how to prepare and administer TREMFYA®.

TREMFYA® offers device options for both 100 mg and 200 mg maintenance doses.

Scan the QR code to learn more about each device option.



Data rates may apply.

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A dedicated Nurse Guide*—a registered nurse—is available for infusion and injection support.†

**Call: 1-833-WITHME1 (833-948-4631)
Monday–Friday, 8:00 AM–11:00 PM ET.**

Multilingual phone support is available.

*Nurse Guides do not provide medical advice. Please ask your doctor any questions you might have about your disease and treatment.

†Your doctor is the best person to help you understand what to expect. Your Nurse Guide is also available, after you have talked with your doctor, if you have questions about infusions or injections.

Next: How does TREMFYA® work?

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A DUAL-ACTING TREATMENT^{*†}

TREMFYA[®] is the only IL-23 blocker that works
in two ways

- It targets a key component of inflammation called IL-23^{*†}
- It binds to a target on the cells that make IL-23 called CD64^{††}

^{*}Based on laboratory experiments using inflammatory cells.

[†]The clinical significance of these findings is unknown.

^{††}CD64 are proteins on the surface of certain immune cells, and these cells are the main producers of IL-23 in UC. Cells that do not have CD64 on their surface may also produce IL-23 but to a lesser extent.

^{†††}“Only” based on approved selective IL-23 blockers for moderately to severely active UC as of March 2025.

Scan the QR code to learn
more about TREMFYA[®].

Data rates may apply.



CD64=cluster of differentiation 64; IL=interleukin.

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For adults with moderately to severely
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 Tremfya[®]
(guselkumab)

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TREMFYA[®] targets
IL-23, a key
component of
inflammation
in UC.^{*†}

TREMFYA® LEGACY

14+
YEARS

of combined clinical research*

6+
YEARS

on the market across
multiple indications

*Based on a clinical trial of TREMFYA® initiated in 2009.

POTENTIAL SIDE EFFECTS OF TREMFYA®

Before starting TREMFYA®, ask your healthcare provider about the benefits and risks of TREMFYA®. TREMFYA® has possible risks involved with treatment, so it's important to discuss them with your healthcare provider.

TREMFYA® may cause serious side effects, including serious allergic reactions, infections, and liver problems.

The most common side effects of TREMFYA® include:

- respiratory tract infections
- headache
- injection site reactions
- joint pain (arthralgia)
- diarrhea
- stomach flu (gastroenteritis)
- fungal skin infections
- herpes simplex infections
- stomach pain
- bronchitis

These are not all the possible side effects of TREMFYA®. See the Important Safety Information on pages 12–13 and talk to your healthcare provider about the benefits and risks of TREMFYA®. Talk to your doctor for medical advice about side effects. You may report side effects to the FDA at 1-800-FDA-1088.

SELECTED IMPORTANT SAFETY INFORMATION

TREMFYA® is not for everyone; only your healthcare provider can decide if it's right for you. Do not use if you are allergic to TREMFYA®. TREMFYA® is a prescription medicine that may cause serious side effects, including serious allergic reactions, infections, and liver problems. TREMFYA® affects your immune system. It may increase your risk of infections and lower your ability to fight them. Please read the Important Safety Information on pages 12–13 and the [Medication Guide](#) for TREMFYA® to learn more about these and other risks for TREMFYA®. Discuss any questions you have with your healthcare provider.

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 Tremfya®
(guselkumab)

IMPORTANT SAFETY INFORMATION

What is the most important information I should know about TREMFYA®?

TREMFYA® is a prescription medicine that may cause serious side effects, including:

- **Serious Allergic Reactions.** Stop using TREMFYA® and get emergency medical help right away if you develop any of the following symptoms of a serious allergic reaction:
 - fainting, dizziness, feeling lightheaded (low blood pressure)
 - swelling of your face, eyelids, lips, mouth, tongue or throat
 - trouble breathing or throat tightness
 - chest tightness
 - skin rash, hives
 - itching
- **Infections.** TREMFYA® may lower the ability of your immune system to fight infections and may increase your risk of infections. Your healthcare provider should check you for infections and tuberculosis (TB) before starting treatment with TREMFYA® and may treat you for TB before you begin treatment with TREMFYA® if you have a history of TB or have active TB. Your healthcare provider should watch you closely for signs and symptoms of TB during and after treatment with TREMFYA®.

Tell your healthcare provider right away if you have an infection or have symptoms of an infection, including:

- fever, sweats, or chills
- muscle aches
- weight loss
- cough
- warm, red, or painful skin or sores on your body different from your psoriasis
- diarrhea or stomach pain
- shortness of breath
- blood in your phlegm (mucus)
- burning when you urinate or urinating more often than normal
- **Liver Problems.** With the treatment of Crohn's disease or ulcerative colitis, your healthcare provider will do blood tests to check your liver before and during treatment with TREMFYA®. Your healthcare provider may stop treatment with TREMFYA® if you develop liver problems. Tell your healthcare provider right away if you notice any of the following symptoms:
 - unexplained rash
 - vomiting
 - tiredness (fatigue)
 - yellowing of the skin or the whites of your eyes
 - nausea
 - stomach pain (abdominal)
 - loss of appetite
 - dark urine

Do not use TREMFYA® if you have had a serious allergic reaction to guselkumab or any of the ingredients in TREMFYA®.



Before using TREMFYA®, tell your healthcare provider about all of your medical conditions, including if you:

- have any of the conditions or symptoms listed in the section **"What is the most important information I should know about TREMFYA®?"**
- have an infection that does not go away or that keeps coming back.
- have TB or have been in close contact with someone with TB.
- have recently received or are scheduled to receive an immunization (vaccine). You should avoid receiving live vaccines during treatment with TREMFYA®.
- are pregnant or plan to become pregnant. It is not known if TREMFYA® can harm your unborn baby.

Pregnancy Registry: If you become pregnant during treatment with TREMFYA®, talk to your healthcare provider about registering in the pregnancy exposure registry for TREMFYA®. You can enroll by visiting www.mothersbaby.org/ongoing-study/tremfya-guselkumab, by calling 1-877-311-8972, or emailing MotherToBaby@health.ucsd.edu. The purpose of this registry is to collect information about the safety of TREMFYA® during pregnancy.
- are breastfeeding or plan to breastfeed. It is not known if TREMFYA® passes into your breast milk.

Tell your healthcare provider about all the medicines you take, including prescription and over-the-counter medicines, vitamins, and herbal supplements.

What are the possible side effects of TREMFYA®?

TREMFYA® may cause serious side effects. See "What is the most important information I should know about TREMFYA®?"

The most common side effects of TREMFYA® include: respiratory tract infections, headache, injection site reactions, joint pain (arthralgia), diarrhea, stomach flu (gastroenteritis), fungal skin infections, herpes simplex infections, stomach pain, and bronchitis.

These are not all the possible side effects of TREMFYA®. Call your doctor for medical advice about side effects.

Use TREMFYA® exactly as your healthcare provider tells you to use it.

Please read the full [Prescribing Information](#), including [Medication Guide](#), for TREMFYA® and discuss any questions that 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.

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-510994v1



SUPPORT to help you



SELECTED IMPORTANT SAFETY INFORMATION

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Once you and your doctor have decided that TREMFYA® is right for you, sign up for TREMFYA withMe.

Tremfya *withMe*

Get free, personalized support to help make it easier to start and stay on treatment.

Whether you need help understanding how to get your prescription filled or finding cost support options to help you pay for your treatment, TREMFYA withMe has everything you may need to help you start and stay on track.

TREMFYA withMe offers:



Dedicated Nurse Guide*

Your Nurse Guide is a registered nurse committed to providing personalized one-on-one support on your treatment journey, including preparing you for your initial and maintenance doses.†



Prescription and Cost Support

TREMFYA withMe can help you understand how to fill your prescription and find cost support options that may help you pay for TREMFYA®.



Patient Portal

Get access to a personalized patient portal with helpful resources.

*Nurse Guides do not provide medical advice. Please ask your healthcare provider any questions you might have about your disease and treatment.

The support and resources provided by TREMFYA withMe are 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.

†Your doctor is the best person to help you understand what to expect. Your Nurse Guide is also available, after you have talked with your doctor, if you have questions about infusions or injections.



Scan to sign up for patient support offered by TREMFYA withMe.

Data rates may apply.

For adults with moderately to severely active ulcerative colitis (UC).



DUAL-ACTING^{*†}

TREMFYA[®] is the only IL-23 blocker that works in two ways by:

- 1** targeting IL-23 and
- 2** binding to a target on cells that make IL-23

"Only" based on approved selective interleukin (IL)-23 blockers for moderately to severely active UC as of March 2025.

*Based on laboratory experiments using inflammatory cells.

†The clinical significance of these findings is unknown.

Please see pages 8 and 9 for more details.

VISIBLE HEALING

At one year, **1 out of 3** patients on TREMFYA[®] (200 mg and 100 mg) achieved endoscopic remission.

Individual results may vary. Visually assessed areas may not represent remission of the entire colon lining.

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Once you and your healthcare provider have decided that TREMFYA[®] is right for you



PERSONALIZED PATIENT SUPPORT

Dedicated support and resources are here to help you every step of the way.

Talk to your healthcare provider about TREMFYA[®].

Scan the QR code or visit Tremfya.com to learn more. Data rates may apply.



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