# LEMS PATIENTS' HEALTH-RELATED QUALITY OF LIFE (HRQoL) IS LOWER COMPARED TO OTHER PATIENTS<sup>1</sup>

A questionnaire-based survey compared the HRQoL of patients with Lambert-Eaton myasthenic syndrome (LEMS, n=46) with the HRQoL of patients living with myasthenia gravis (MG, n=92) and the general population (n=92).

The results revealed that LEMS patients reported comparatively more unfavorable outcomes in the following domains<sup>1</sup>:





Emotional well-being



General health perception



Pain

Furthermore, patients with LEMS reported experiencing a higher overall burden of disease compared to patients with MG.<sup>1</sup>

## Participants with LEMS were also surveyed for satisfaction with LEMS treatments



of respondents indicated they were satisfied with their treatments\*; 4% experienced no symptoms under medication, and 67% experienced minimal symptoms<sup>1</sup>

\*The survey did not specify a particular treatment.1



of respondents reported using FIRDAPSE® (amifampridine)<sup>1†</sup>

<sup>†</sup>Other therapies reported by survey respondents included pyridostigmine, steroids, and IVIG.<sup>1</sup>

# FIRDAPSE, now approved up to 100 mg per day<sup>2</sup>, can help patients achieve optimal therapeutic benefit

FIRDAPSE is recommended as a first-line therapy and is the only FDA-approved treatment for LEMS.<sup>3,4</sup> Now, the maximum total daily dose increase from 80 mg to 100 mg for adults—and from 40 mg to 50 mg for pediatric patients weighing less than 45 kg<sup>4</sup>—offers healthcare providers and patients greater flexibility in treatment regimens for the management of LEMS. In two phase 3 clinical trials, FIRDAPSE helped patients maintain muscle strength and mobility and improve their sense of physical well-being while minimizing tolerability issues.<sup>4-6</sup>



Review complete dosing and titration information for FIRDAPSE, and help your patients find their optimal dose.

## For patients ≥6 years of age and weighing ≥45 kg<sup>4\*</sup>







†In patients with renal or hepatic impairment and individuals known to be poor metabolizers of N-acetyltransferase 2 (NAT2), the starting dosage of FIRDAPSE should be the lowest recommended dose taken orally in divided doses (15 mg daily in adults and in pediatric patients weighing 45 kg or more; 5 mg daily for pediatric patients weighing less than 45 kg). This dose should continue to be titrated to clinical effect and tolerability. No dosage recommendation for FIRDAPSE can be made for patients with end-stage renal disease.

<sup>‡</sup>For patients age 6 years and older weighing 45 kg or more, the maximum single dose for FIRDAPSE is 20 mg.

\*Visit firdapsehcp.com/pediatric-dosing to review FIRDAPSE dosing information for patients 6 years of age and older weighing less than 45 kg.

## INDICATION AND IMPORTANT SAFETY INFORMATION

## **INDICATIONS AND USAGE:**

FIRDAPSE is a potassium channel blocker indicated for the treatment of Lambert-Eaton myasthenic syndrome (LEMS) in adults and pediatric patients 6 years of age and older.

## **CONTRAINDICATIONS**

FIRDAPSE is contraindicated in patients with:

- A history of seizures
- Hypersensitivity to amifampridine phosphate or another aminopyridine

### WARNINGS AND PRECAUTIONS

**Seizures:** FIRDAPSE can cause seizures. Consider discontinuation or dose-reduction of FIRDAPSE in patients who have a seizure while on treatment.

**Hypersensitivity:** If a hypersensitivity reaction such as anaphylaxis occurs, FIRDAPSE should be discontinued and appropriate therapy initiated.

### **ADVERSE REACTIONS**

The most common (> 10%) adverse reactions are: paresthesia, upper respiratory tract infection, abdominal pain, nausea, diarrhea, headache, elevated liver enzymes, back pain, hypertension, and muscle spasms.

Please see full Prescribing Information for additional Important Safety Information.

To report SUSPECTED ADVERSE REACTIONS, contact Catalyst Pharmaceuticals at 1-844-347-3277 (1-844-FIRDAPSE) or FDA at 1-800-FDA-1088 or <a href="https://www.fda.gov/medwatch">www.fda.gov/medwatch</a>.

References: 1. Lehnerer S, Herdick M, Stegherr R, et al. Burden of disease in Lambert-Eaton myasthenic syndrome: taking the patient's perspective. J Neurol. 2024;271:2824–2839. 2. Data on file, Catalyst Pharmaceuticals. 3. Yoon CH, Owusu-Guha J, Smith A, Buschur P. Amifampridine for the management of Lambert-Eaton myasthenic syndrome: a new take on an old drug. Ann Pharmacother. 2020;54(1):56-63. 4. Full Prescribing Information for FIRDAPSE (amifampridine). Catalyst Pharma; 2024. 5. Oh SJ, Shcherbakova N, Kostera-Pruszczyk A, et al; LEMS Study Group. Amifampridine phosphate (FIRDAPSE\*) is effective and safe in a phase 3 clinical trial in LEMS. J Clin Neuromuscul Dis. 2019;20(3):111-119.



