KEEP YOUR EYES OPEN FOR LEMS IN YOUR PRACTICE

Lambert-Eaton myasthenic syndrome (LEMS) is a rare, immune-mediated neuromuscular disorder characterized by¹⁻³:

Proximal muscle weakness

Autonomic symptoms Hyporeflexia or areflexia



ABOUT 50% OF PATIENTS WITH LEMS ALSO PRESENT WITH OCULOBULBAR SYMPTOMS³

Commonly reported symptoms include^{4,5}:



Other signs and symptoms may occur in patients with LEMS such as disconjugate gaze, involuntary lid closure, prolonged upgaze, dilated pupils, and poorly reactive pupils.^{4,6}

The frequency of ocular symptoms may increase as LEMS progresses.

 One study found that the symptoms increased from 5% at disease onset to 42% at 6 months⁵ As a neuro-ophthalmologist, you can play a vital role in identifying, diagnosing, and treating LEMS.

SCAN THE CODE FOR A FREE LEMS TEST

Order a LEMS antibody test if you suspect your patient may have LEMS.





FIRDAPSE is the recommended first-line therapy for LEMS⁷

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 www.fda.gov/medwatch.

References: 1. Harms L, Sieb - [JP], Williams AE, et al. Long-term disease history, clinical symptoms, health status, and healthcare utilization in patients suffering from Lambert Eaton myasthenic syndrome: results of a patient interview survey in Germany. J Med Econ. 2012;15(3):521-530. 2. Rare disease database: Lambert-Eaton myasthenic syndrome. National Organization for Rare Disorders (NORD) website. https://rarediseases.org/rare-diseases/lambert-eaton-myasthenic-syndrome/. Accessed April 22, 2021. 3. Titulaer MJ, Lang B, Verschuuren JJ. Lambert-Eaton myasthenic syndrome: from clinical characteristics to therapeutic strategies. *Lancet Neurol.* 2011;10(12):1098-1107. 4. Young JD, Leavitt JA. Lambert-Eaton myasthenic syndrome: ocular signs and symptoms. J Neuroophthalmol. 2016;36(1):20-22.
5. Titulaer JM, Wirtz PW, Wintzen AR, et al. Lambert-Eaton myasthenic syndrome with pure ocular weakness. Neurology. 2008;70(1):86-87. 6. Gordon LK. Paraneoplastic syndromes in neuro-ophthalmology. J Neuroophthalmol. 2015;35(3):306-314. 7. 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.



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