JAMP Teriflunomide Patient Brochure

This material was developed by JAMP Pharma, as part of the risk minimization plan for JAMP Teriflunomide. This material is not intended for promotional use.

INDICATION

JAMP Teriflunomide (teriflunomide) is a prescription medicine used to treat adult patients with relapsing remitting multiple sclerosis (RRMS).

IMPORTANT SAFETY INFORMATION

Do not take JAMP Teriflunomide if you have severe liver problems, are pregnant or of childbearing potential and not using effective birth control, have had an allergic reaction to teriflunomide or leflunomide, or are taking a medicine called leflunomide for rheumatoid arthritis.

Please see Important Safety Information on this brochure and Patient Medication Information section of the Canadian Product Monograph.

JAMP care™

IF ONE OF YOUR GOALS IS TO PUT

RELAPSING REMITTING MS IN THE BACKGROUND

ONCE-DAILY JAMP Teriflunomide MAY HELP

Each person's relapsing remitting MS is unique to them. But thinking about effectiveness, side effects, and how you take your medication are all things to consider when choosing a relapsing remitting MS treatment. So, whether you're looking to change your relapsing remitting MS treatment, or newly diagnosed, JAMP Teriflunomide may be right for you

Do not take JAMP Teriflunomide if you have severe liver problems. JAMP Teriflunomide may cause serious liver problems, which can be life-threatening.

Please see Important Safety Information on this brochure and Patient Medication Information section of the Canadian Product Monograph.

JAMP TERIFLUNOMIDE IS AN OPTION FOR PEOPLE LIVING WITH RELAPSING REMITTING MS WHO ARE:

- **Newly diagnosed or have never used treatment**
- **Changing therapies because of side effects from current relapsing MS medication**
- **Switching therapies due to disease activity**
- **Dissatisfied with their current treatment**

Your risk may be higher if you take other medicines that affect your liver. Your doctor or healthcare professional (HCP) should do blood tests to check your liver within 6 months before you start JAMP Teriflunomide and monthly for 6 months after starting JAMP Teriflunomide. Tell your doctor/HCP right away if you develop any of these symptoms of liver problems: yellow skin or yellowing of the whites of your eyes (jaundice), unexplained nausea or vomiting, abdominal pain or darker urine than normal. .

IF YOU'RE *STARTING* TREATMENT

IF YOU'RE CONSIDERING *CHANGING* TREATMENT

Please see Important Safety Information on this brochure and Patient Medication Information section of the Canadian Product Monograph.

CONSIDER
JAMP TERIFLUNOMIDE,
A PILL THAT MAY HELP

PUT RELAPSING REMITTING MS IN THE BACKGROUND

FIND OUT WHAT ONE PILL, ONCE A DAY CAN DO

JAMP Teriflunomide 14 mg is a once-daily pill that's been proven to treat relapsing MS, and has a well-established safety profile.

You can take JAMP Teriflunomide any time of day, with or without food. Ask your doctor/HCP if JAMP Teriflunomide may help put your relapsing remitting MS in the background. Your doctor/HCP will run certain tests before you start treatment. Once on JAMP Teriflunomide, your doctor/HCP will monitor your liver enzyme levels monthly for the first 6 months and conduct periodic blood pressure checks.

Do not take JAMP Teriflunomide if you are pregnant. JAMP Teriflunomide may harm an unborn baby. You should have a pregnancy test before starting JAMP Teriflunomide. After stopping JAMP Teriflunomide, continue to use effective birth control until you have made sure your blood levels of JAMP Teriflunomide are lowered. If you become pregnant while taking JAMP Teriflunomide or within 2 years after stopping, tell your doctor/HCP away. Your doctor/HCP may suggest treatment with certain medicines to speed up the removal of teriflunomide from your body, as this may decrease the risk to your baby. Your doctor/HCP will encourage you to enroll in the JAMP Teriflunomide Enhanced Pharmacovigilance Pregnancy Active Surveillance Program conducted by JAMP Pharma: Phone: 1 866 399 9091. Email: medinfo@jamppharma.com ;
Program Website: www.jampinfo.com.

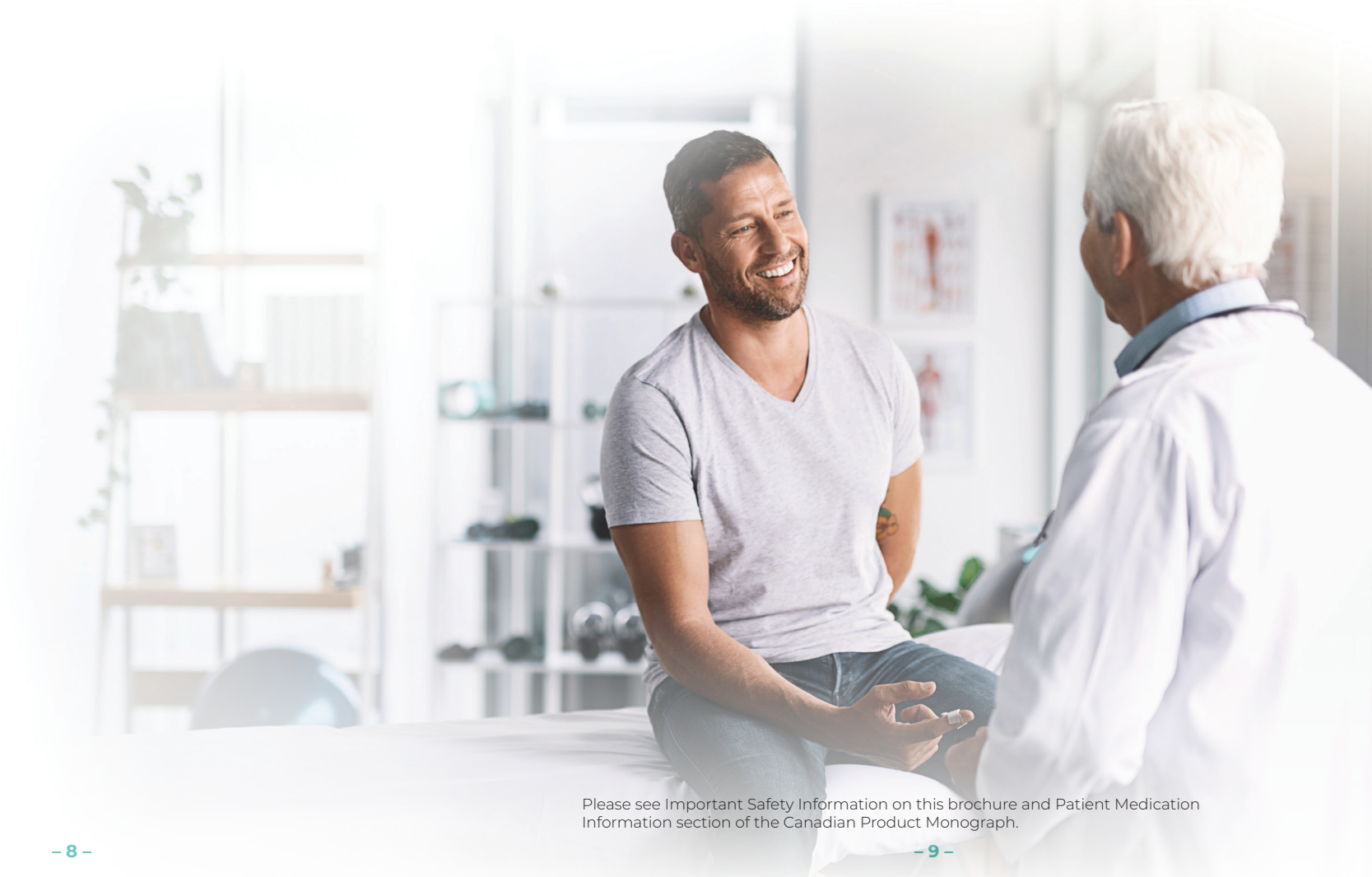
Please see Important Safety Information on this brochure and Patient Medication Information section of the Canadian Product Monograph.

TERIFLUNOMIDE HAS A WELL-ESTABLISHED HISTORY OF SAFETY IN TREATING RELAPSING MS

Talk to your doctor/HCP about Teriflunomide's long-term safety profile.

Do not take JAMP Teriflunomide if you are of childbearing potential and not using effective birth control.

It is not known if JAMP Teriflunomide passes into breast milk. Your doctor/HCP can help you decide if you should take JAMP Teriflunomide or breastfeed — you should not do both at the same time.



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JAMP TERIFLUNOMIDE IS EFFECTIVE IN TREATING RELAPSING REMITTING MS

JAMP Teriflunomide is used to treat adult patients with relapsing remitting multiple sclerosis (RRMS).

What it does:

JAMP Teriflunomide can alter the way the body's immune system works. JAMP Teriflunomide does not cure RRMS, but it can help decrease the number of attacks (relapses) that occur.

JAMP Teriflunomide can help slow the build-up of physical problems (disability progression) that RRMS causes.

If you are a man whose partner plans to become pregnant, you should stop taking JAMP Teriflunomide and talk with your doctor/HCP about reducing the levels of JAMP Teriflunomide in your blood. If your partner does not plan to become pregnant, use effective birth control while taking JAMP Teriflunomide.

WHEN YOU ASK QUESTIONS, YOU GET ANSWERS

A lot of questions occur when considering treatment options. Here are a few things to think about and to discuss with your healthcare team.

1. What's an appropriate treatment option for where I am today?
2. Will I take it as prescribed?
3. Am I doing what I can to reduce relapses and slow my disability progression?
4. Am I confident in the safety profile?
5. Are side effects something that I'm concerned about?

REEVALUATION IS PART OF LIFE

We do it every day. For anyone considering a treatment change, use all you've learned about your relapsing MS to reevaluate your needs today.

And if you are looking to start your first treatment, keep reading to learn about a once-daily pill that may help put relapsing MS in the background.

* Doctors/HCPs measure disability progression using a test called the Expanded Disability Status Scale, or EDSS. Your first score – or your "baseline" – will determine how your disability is gauged moving forward. If your baseline score is ≤5.5, you're considered to have sustained disability progression if that score goes up by one point (lasting at least 12 weeks). If your baseline score is >5.5, you're considered to have sustained disability progression if that score goes up by at least 0.5 points (lasting at least 12 weeks).

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TERIFLUNOMIDE HAS BEEN STUDIED IN THREE PHASE 3 TRIALS

In three Phase 3 clinical trials, teriflunomide 14 mg was effective against placebo (pills with no medicine) in 3 key measures: reduced relapses, decreased number of new lesions, and slowed disability progression.

TERIFLUNOMIDE WAS STUDIED VS. PLACEBO

- **In 3 clinical trials**
- **With more than 2,800 people**
- **For up to 108 weeks**

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CLINICAL TRIAL 1

TEMSO

1,088 PEOPLE who had at least 1 relapse during 1 year prior to trial, or 2 relapses during 2 years prior to trial

CLINICAL TRIAL 2

TOWER

1,165 PEOPLE who had at least 1 relapse during 1 year prior to trial, or 2 relapses during 2 years prior to trial

CLINICAL TRIAL 3

TOPIC

614 PEOPLE who had their 1st clinical event within 3 months prior to trial, and 2 or more lesions characteristic of relapsing MS

* The clinical trials were each given a name by the sponsor. Trial 1 was called TEMSO; Trial 2 was called TOWER; and Trial 3 was called TOPIC.

REDUCING RELAPSES IS KEY

All relapses, whether mild or severe, are signs that MS is active.

TERIFLUNOMIDE REDUCED THE RISK OF RELAPSES

In 2 clinical trials, teriflunomide helped reduce the risk of relapses vs. placebo.

CLINICAL TRIAL 1

→ **31% REDUCTION IN RELAPSE RATE**
on teriflunomide 14mg vs. placebo

CLINICAL TRIAL 2

→ **36% REDUCTION IN RELAPSE RATE**
on teriflunomide 14mg vs. placebo

TERIFLUNOMIDE KEPT MORE PEOPLE FREE OF RELAPSES

CLINICAL TRIAL 1

→ **57% REMAINED RELAPSE-FREE**
on teriflunomide 14mg vs. 46% with placebo

CLINICAL TRIAL 2

→ **57% REMAINED RELAPSE-FREE**
on teriflunomide 14mg vs. 47% with placebo

CLINICAL TRIAL 3

→ **72% REMAINED RELAPSE-FREE**
on teriflunomide 14mg vs. 62% with placebo

Do not take JAMP Teriflunomide if you have had an allergic reaction to JAMP Teriflunomide or a medicine called leflunomide.

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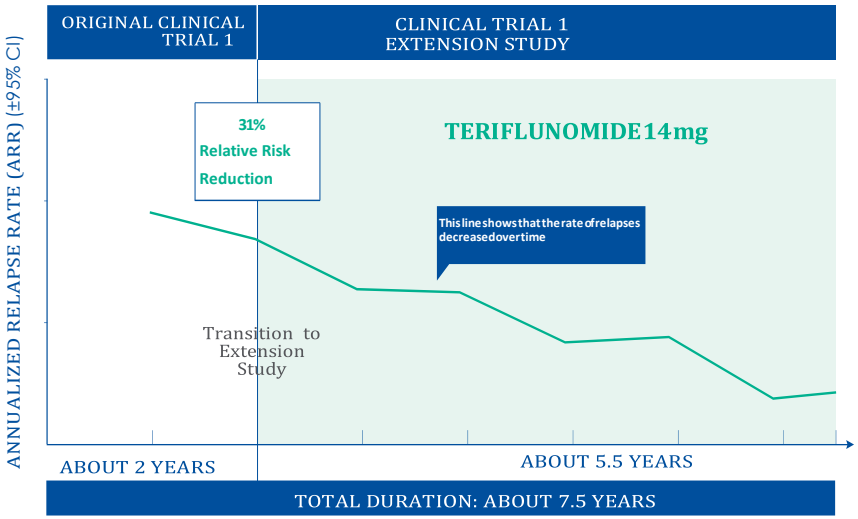
TERIFLUNOMIDE REDUCED RELAPSES OVER TIME

Teriflunomide 14 mg maintained its impact on relapses for up to 7.5 years, in a clinical trial and an extension study.



PEOPLE EXPERIENCED ABOUT 1 RELAPSE OVER 6 YEARS IN THE EXTENSION STUDY

An extension study follows participants after the original trial has ended and looks at their long-term experience with the medication.

- Original clinical study: ~1 relapse over 2 years for patients taking placebo
- Extension study: ~1 relapse over 6 years for patients taking teriflunomide 14 mg

A DOCTOR'S NOTE:

Symptoms of relapses may not always be visible. This is why it's important to partner closely with your doctor/HCP.

Do not take JAMP Teriflunomide if you take a medicine called leflunomide for rheumatoid arthritis.

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TAKE NEW LESIONS INTO ACCOUNT

New lesions can be a “silent” sign that relapsing MS is getting worse. You may not have symptoms but your disease is still active.

A DOCTOR’S NOTE:

It’s recommended that people living with RRMS have regular MRIs. Use your first MRI as a baseline and then compare to any MRIs performed after that.

TERIFLUNOMIDE DECREASED THE NUMBER OF NEW LESIONS.

One clinical trial looked at brain lesions as a key measure of disease activity. People taking teriflunomide had fewer new brain lesions vs. placebo.

CLINICAL TRIAL 1

→ **80%* FEWER NEW LESIONS**
with teriflunomide 14mg vs. with placebo

JAMP Teriflunomide may stay in your blood for up to 2 years after you stop taking it. Your doctor/HCP can prescribe a medicine that can remove JAMP Teriflunomide from your blood quickly.

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* Average contrast-enhancing lesions per scan.

SLOW THE PROGRESSION OF DISABILITY

Disability progression can affect functions of the body, such as motor, sensory, bowel and bladder, visual and mood.

A DOCTOR'S NOTE:

It's never too early to think about slowing disability progression. If you're newly diagnosed, talk to your doctor/HCP about making this a goal.

Before taking JAMP Teriflunomide, talk with your doctor/HCP if you have: liver or kidney problems; a fever or infection, or if you are unable to fight infections; numbness or tingling in your hands or feet that is different from your MS symptoms; diabetes; serious skin problems when taking other medicines; breathing problems; or high blood pressure. Your doctor/HCP will check your blood cell count and TB test before you start JAMP Teriflunomide. Talk with your doctor/HCP if you take or are planning to take other medicines (especially medicines for treating cancer or controlling your immune system), vitamins or herbal supplements.

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TERIFLUNOMIDE SLOWED DISABILITY PROGRESSION

Teriflunomide 14 mg was shown to help keep people free of disability progression.

Disability progression* was looked at in 2 of the clinical trials. In both of those trials, teriflunomide 14 mg was shown to help keep more people free from disability progression.

CLINICAL TRIAL 1

→ **80% SHOWED NO DISABILITY PROGRESSION**
with teriflunomide 14mg vs. 73% with placebo

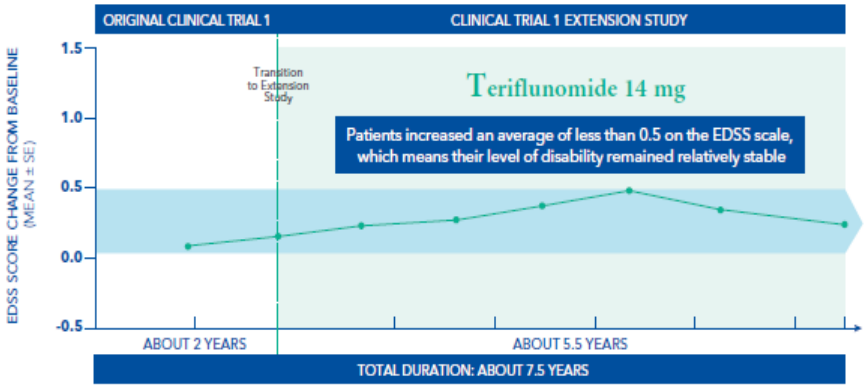
CLINICAL TRIAL 2

→ **80% SHOWED NO DISABILITY PROGRESSION**
with teriflunomide 14mg vs. 73% with placebo

* Doctors/HCPs s measure disability progression using a test called the Expanded Disability Status Scale, or EDSS. Your first score—or your "baseline"—will determine how your disability is gauged moving forward. If your baseline score is ≤5.5, you're considered to have sustained disability progression if that score goes up by 1 point (lasting at least 12 weeks). If your baseline score is >5.5, you're considered to have sustained disability progression if that score goes up by at least 0.5 points (lasting at least 12 weeks). The mean EDSS at baseline was 2.7 in both Clinical Trial 1 and Clinical Trial 2.

TERIFLUNOMIDE CONTINUED TO SLOW DISABILITY PROGRESSION OVER TIME

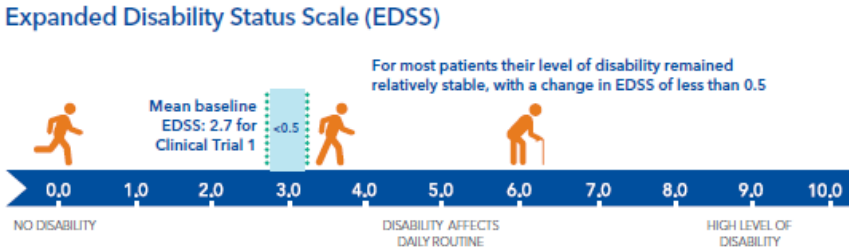
In the original and extension study of Clinical Trial 1, the majority of people taking teriflunomide 14 mg remained free of disability progression for up to 7.5 years.



61% of people on teriflunomide 14 mg remained free of disability progression for up to 7.5 years in the original and extension study of Clinical Trial 1.

This extension study followed participants for 5.5 years after Clinical Trial 1 ended and looked at their long-term experience with the medication.

- 59% of people taking placebo for 2 years and then switching to teriflunomide 14 mg in the extension study remained free of disability progression for up to 7.5 years



When your level of disability remains stable, that means you may continue doing the things you enjoy for as long as possible.

JAMP Teriflunomide may cause serious side effects, including: reduced white blood cell count—this may cause you to have more infections; numbness or tingling in your hands or feet that is different from your MS symptoms; allergic reactions, including serious skin problems; breathing problems (new or worsening); and high blood pressure. Patients with low white blood cell count should not receive certain vaccinations during JAMP Teriflunomide treatment and 6 months after.

Tell your doctor if you have any side effect that bothers you or does not go away.

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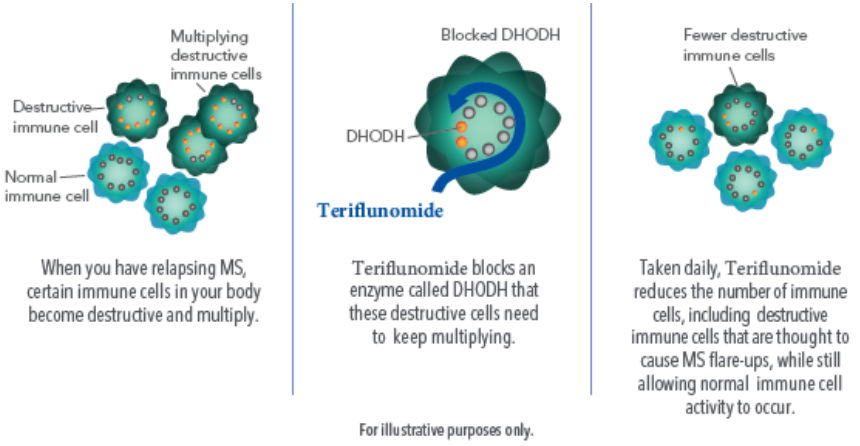
SEE HOW TERIFLUNOMIDE IS THOUGHT TO WORK

MS is thought to occur when a distinct set of immune cells become destructive and attack the central nervous system, specifically targeting the outer covering of the nerves known as the myelin sheath. When you take JAMP Teriflunomide it blocks an enzyme that's needed for these cells to multiply. Blocking this enzyme is like a dimmer switch that dials down the cell's ability to multiply. While we don't fully understand how JAMP Teriflunomide works in relapsing remitting MS, we do know that it works differently from other relapsing MS medicines.



For illustrative purposes only.

CHOOSING A TREATMENT THAT WORKS FOR YOU

MS is different for everyone. So what works well for one person might not work so well for another. It's important to understand this. Whether you're new to treatment or considering a change, don't settle for less than you deserve. Consider your own goals, relay them to your healthcare team, and together make the choice you think is best for your relapsing remitting MS treatment.

JAMP Teriflunomide may stay in your blood for up to 2 years after you stop taking it. Your doctor/HCP can prescribe a medicine that can remove JAMP Teriflunomide from your blood quickly.

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LEARN ABOUT SIDE EFFECTS

Different treatments have different side effects. It's important to know the serious risks of any medication you take.

If you experience any of the following side effects while taking JAMP Teriflunomide, speak with your doctor/HCP right away. In addition to the risk of liver problems and the risk of harm to an unborn baby, other serious side effects include:

- Reduced white blood cell count—this may cause you to have more infections
- Numbness or tingling in your hands or feet that is different from your MS symptoms
- Allergic reactions, including serious skin problems
- Breathing problems (new or worsening)
- High blood pressure
- Certain vaccinations should be avoided during treatment with JAMP Teriflunomide and for at least 6 months after discontinuation

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THE MOST COMMON SIDE EFFECTS ASSOCIATED WITH TERIFLUNOMIDE

Here are some of the most common side effects reported in clinical trials. These are not all the side effects. Tell your HCP if you have any side effect that bothers you or does not go away.

SIDE EFFECTS	Teriflunomide 14mg	PLACEBO
	(1002 people)	(997 people)
Headache	16%	15%
Abnormal liver test results	15%	9%
Diarrhea	14%	8%
Hair thinning or loss	13%	5%
Nausea	11%	7%

Here are the discontinuation rates due to the common side effects in clinical trials.

SIDE EFFECTS	Teriflunomide	PLACEBO
	14 mg (1002 people)	(997 people)
Headache	0% = 0 people	0.3% = 3 people
Abnormal liver test results	2.6% = 26 people	2.3% = 23 people
Diarrhea	0.4% = 4 people	0.1% = 1 person
Hair thinning or loss	1.3% = 13 people	0.1% = 1 person
Nausea	0.3% = 3 people	0% = 0 people

ABOUT HAIR THINNING OR LOSS

Hair thinning with JAMP Teriflunomide is similar to hair thinning that may happen with childbirth, stress, and iron deficiency. Some people may worry that their hair thinning with JAMP Teriflunomide is similar to what may happen with chemotherapy. That's not the case.

With JAMP Teriflunomide, clinical studies found hair loss is usually temporary and may occur around 3 months after beginning treatment.

DOSAGE	OUTCOME	PERCENTAGE
Teriflunomide 14 mg	REPORTED HAIR LOSS*	13%
	DID NOT REPORT HAIR LOSS*	87%

In clinical trials, 15 out of more than 2,000 people stopped taking teriflunomide due to hair thinning or loss.

This means that most people who reported experiencing hair thinning or loss did not stop taking teriflunomide as a result.

* In clinical trials, about 1 in 20 people taking placebo (5% of 997 patients) reported experiencing hair thinning or loss

Considering changing treatment? Ask yourself these questions:

1. **Has my experience with side effects changed or gotten worse since I first began my treatment?**
2. **Are side effects getting in the way of my everyday activities and responsibilities?**
3. **Do I sometimes wish I could skip my treatment because of side effects?**
4. **Which potential side effects do I feel I can manage and which are deal breakers?**

If side effects are getting in the way of your daily life, it may be time to reevaluate your relapsing MS treatment. And if you are looking to start your first treatment, remember different treatments have different side effects. So take a moment to think about which ones are deal breakers for you.

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BEGINNING TREATMENT WITH JAMP TERIFLUNOMIDE

BEFORE YOU START

Your doctor/HCP will need to run a few tests before beginning treatment, including:

- Blood tests to check your liver function
- TB (tuberculosis) skin test or blood test for mycobacterium tuberculosis infection
- Pregnancy test, if you are a woman of childbearing potential
- Complete blood cell count
- Periodic blood pressure checks.

These tests are often done at the same time.

AFTER YOU START

Your doctor/HCP will need to:

- Monitor your liver enzymes for the first 6 months
- Check your blood pressure periodically after starting treatment
- Check your complete blood cell count periodically.

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GETTING THE SUPPORT YOU NEED

JAMP TERIFLUNOMIDE PROVIDES SUPPORT THAT'S TRULY PERSONAL

Contact JAMP Medical Information Services by phone at 1-866-399-9091 or email medinfo@jamppharma.com

INDICATION AND IMPORTANT SAFETY INFORMATION

INDICATION

JAMP Teriflunomide (teriflunomide) is a prescription medicine used to treat relapsing remitting multiple sclerosis (RRMS) in adults.

IMPORTANT SAFETY INFORMATION

DO NOT TAKE JAMP Teriflunomide IF YOU:

- **Have severe liver problems. JAMP Teriflunomide may cause serious liver problems, which can be life-threatening.** Your risk may be higher if you take other medicines that affect your liver. Your doctor/HCP should do blood tests to check your liver within 6 months before you start JAMP Teriflunomide and monthly for 6 months after starting JAMP Teriflunomide. Tell your doctor/HCP right away if you develop any of these symptoms of liver problems: yellow skin or yellowing of the whites of your eyes (jaundice), unexplained nausea or vomiting, abdominal pain or darker urine than normal.
- **Are pregnant. JAMP Teriflunomide may harm an unborn baby.** You should have a pregnancy test before starting JAMP Teriflunomide. After stopping JAMP Teriflunomide, continue to use effective birth control until you have made sure your blood levels of JAMP Teriflunomide are lowered. If you become pregnant while taking JAMP Teriflunomide or within 2 years after stopping, tell your doctor/HCP right away. Your doctor/HCP will encourage you to enroll in the JAMP Teriflunomide Enhanced Pharmacovigilance Pregnancy Active Surveillance Program conducted by JAMP Pharma: Phone: 1 866 399 9091. Email: medinfo@jamppharma.com ; Program Website: www.jampinfo.com .
- **Are of childbearing potential and not using effective birth control. It is not known if JAMP Teriflunomide passes into breast milk.** Your doctor/HCP can help you decide if you should take JAMP Teriflunomide or breastfeed — you should not do both at the same time. **If you are a man whose partner plans to become pregnant**, you should stop taking JAMP Teriflunomide and talk with your doctor/HCP about reducing the levels of JAMP Teriflunomide in your blood. If your partner does not plan to become pregnant, use effective birth control while taking JAMP Teriflunomide.
- **Have had an allergic reaction to JAMP Teriflunomide or a medicine called leflunomide.**
- **Take a medicine called leflunomide for rheumatoid arthritis.**

JAMP Teriflunomide may stay in your blood for up to 2 years after you stop taking it. Your doctor/HCP can prescribe a medicine that can remove JAMP Teriflunomide from your blood quickly.

Before taking JAMP Teriflunomide, talk with your doctor/HCP if you have: liver or kidney problems; a fever or infection, or if you are unable to fight infections; numbness or tingling in your hands or feet that is different from your MS symptoms; diabetes; serious skin problems when taking other medicines; breathing problems; or high blood pressure. Your doctor/HCP will check your blood cell count and TB test before you start JAMP Teriflunomide. Talk with your doctor/HCP if you take or are planning to take other medicines (especially medicines for treating cancer or controlling your immune system), vitamins or herbal supplements.

JAMP Teriflunomide may cause serious side effects, including: reduced white blood cell count — this may cause you to have more infections; numbness or tingling in your hands or feet that is different from your MS symptoms; allergic reactions, including serious skin problems; breathing problems (new or worsening); and high blood pressure. Patients with low white blood cell count should not receive certain vaccinations during JAMP Teriflunomide treatment and 6 months after.

Interstitial lung disease (ILD), including acute interstitial pneumonitis, has been reported with teriflunomide tablets in the post marketing setting. ILD and worsening of interstitial lung disease have been reported during treatment with leflunomide, the parent compound of teriflunomide. ILD is a potentially fatal disorder and may occur acutely at any time during treatment with a variable clinical presentation. The risk is increased in patients with a history of ILD. New onset or worsening of pulmonary symptoms, such as persistent cough and dyspnea, with or without associated fever, may be a reason for discontinuation of the therapy and for further investigation, as appropriate. If discontinuation of the drug is necessary, consider initiation of an accelerated elimination procedure.

JAMP Teriflunomide (teriflunomide) is contraindicated in patients with immunodeficiency states (e.g. AIDS) and with serious active infections. Patients with active acute or chronic infections should not start treatment until the infection(s) is resolved. If a patient develops a serious infection during treatment, consider suspending treatment with JAMP Teriflunomide and using an accelerated elimination procedure. Reassess the benefits and risks prior to resumption of therapy. Instruct patients receiving JAMP Teriflunomide to report symptoms of infections to a physician. JAMP Teriflunomide is contraindicated in patients with severe immunodeficiency, bone marrow disease, or severe, uncontrolled infections. Medications like teriflunomide that have immunomodulatory potential may cause patients to be more susceptible to infections, including opportunistic infections.

Tell your doctor if you have any side effect that bothers you or does not go away.

The most common side effects when taking JAMP Teriflunomide include: headache; diarrhea; nausea; hair thinning or loss; and abnormal liver test results. These are not all the side effects of JAMP Teriflunomide. Tell your doctor/HCP about any side effect that bothers you. Consult your doctor/HCP if you have questions about your health or any medications you may be taking, including JAMP Teriflunomide.

NOTES

NOTES

HAVE A QUESTION?

Contact JAMP Medical Information Services
by phone at 1-866-399-9091 or
email: medinfo@jamppharma.com

REFERENCES:

1. PrJAMP Teriflunomide Product Monograph

2. Confavreux C, O'Connor P, Comi G, et al; TOWER Trial Group. Oral teriflunomide for patients with relapsing multiple sclerosis (TOWER): a randomised, double-blind, placebo-controlled, phase 3 trial. *Lancet Neurol*. 2014;13(3):247-256. doi:10.1016/S1474-4422(13)70308-9.

3. Miller AE, Wolinsky JS, Kappos L, et al; TOPIC Study Group. Oral teriflunomide for patients with a first clinical episode suggestive of multiple sclerosis (TOPIC): a randomised, double-blind, placebo-controlled, phase 3 trial. *Lancet Neurol*. 2014;13(10):977-986. doi:10.1016/S1474-4422(14)70191-7.

4. O'Connor P, Wolinsky JS, Confavreux C, et al; TEMSO Trial Group. Randomized trial of oral teriflunomide for relapsing multiple sclerosis. *N Engl J Med*. 2011;365(14):1293-1303. doi:10.1056/NEJMoa1014656.

5. O'Connor P, Comi G, Freedman MS, et al; TEMSO Trial Group and the MRI-AC in Houston, Texas. Long-term safety and efficacy of teriflunomide: nine-year follow-up of the randomized TEMSO study. *Neurology*. 2016;86(10):920-930. doi:10.1212/WNL.0000000000002441.

JAMP care™