SICK OF HEADACHES AND MIGRAINES? SAY SOMETHING TODAY.
TRY ANY OF THESE CONVERSATION STARTERS THAT BEST FIT YOUR SITUATION:

• I’m not sure how Chronic Migraine is different from other headache and migraine conditions. What’s the difference between episodic and Chronic Migraine?
• I’ve been having headaches and migraines, should I be tracking how often?
• I’m currently on treatment for my headaches and migraines. Based on the number of headache days I had before treatment, could I still have Chronic Migraine?
• What is the difference between an acute treatment and a preventive treatment, like BOTOX®?
• What makes BOTOX® for Chronic Migraine a different type of treatment from other headache and migraine treatments?
• What can you tell me about BOTOX® side effects?
• Do you have experience using BOTOX® for Chronic Migraine? (If your headache specialist does not have experience with BOTOX® for Chronic Migraine, find a BOTOX® specialist at BOTOXChronicMigraine.com)
• What kind of results could I expect with BOTOX®? How long before BOTOX® starts to work?
• What do the injections feel like? How many injections will I need in a single treatment? How long does it take? How often will I need treatment?
• I’m wondering how much BOTOX® will cost. Does BOTOX® have a savings program to help with my out-of-pocket costs?

How are headaches and migraines affecting your life?
Text TRACK to 50334 to find out*

*See Privacy & Terms at https://www.chronicmigrainesupport.com/
Msg & data rates may apply. Msg Freq May Vary. Text HELP for help, STOP to end.

Indication
For adults with Chronic Migraine, 15 or more headache days a month, each lasting 4 hours or more. It is not approved for 14 or fewer headache days a month.

IMPORTANT SAFETY INFORMATION
BOTOX® may cause serious side effects that can be life threatening. Get medical help right away if you have any of these problems any time (hours to weeks) after injection of BOTOX®:
• Problems swallowing, speaking, or breathing, due to weakening of associated muscles, can be severe and result in loss of life. You are at highest risk if these problems are pre-existing before injection. Swallowing problems may last for several months.

Please see additional Important Safety Information and Summary of Information about BOTOX® on the following pages.
KEY FACTS ABOUT BOTOX®

PRESCRIBED BRANDED CHRONIC MIGRAINE TREATMENT*

• BOTOX® prevents on average 8 to 9 headache days and migraine/probable migraine days a month (vs 6 to 7 for placebo)

• You may feel results as early as 4 weeks (after treatment #1). Full effects of BOTOX® begin after 2 treatments, 12 weeks apart—at week 24

• One treatment session takes place in your doctor’s office (injections using a thin needle last about 15 minutes) every 12 weeks

• Like all medicines, there’s a risk of side effects with BOTOX®. Neck pain is the most common side effect with BOTOX®, experienced by 9% of BOTOX® patients vs 3% for placebo patients in Chronic Migraine clinical trials. This does not cover all possible side effects of BOTOX®. Please see the Important Safety Information including Boxed Warning, and talk to your doctor

• You may pay as little as $0 for BOTOX® treatment if you’re eligible for the BOTOX® Savings Program†

NOTES FROM YOUR DOCTOR VISIT

IMPORTANT SAFETY INFORMATION (continued)

• Spread of toxin effects. The effect of botulinum toxin may affect areas away from the injection site and cause serious symptoms including: loss of strength and all-over muscle weakness, double vision, blurred vision and drooping eyelids, hoarseness or change or loss of voice, trouble saying words clearly, loss of bladder control, trouble breathing, trouble swallowing.

Please see additional Important Safety Information and Summary of Information about BOTOX® on the following pages.
IMPORTANT SAFETY INFORMATION (continued)

There has not been a confirmed serious case of spread of toxin effect away from the injection site when BOTOX® has been used at the recommended dose to treat chronic migraine.

BOTOX® may cause loss of strength or general muscle weakness, vision problems, or dizziness within hours to weeks of taking BOTOX®. If this happens, do not drive a car, operate machinery, or do other dangerous activities.

Do not receive BOTOX® if you: are allergic to any of its ingredients (see Medication Guide for ingredients); had an allergic reaction to any other botulinum toxin product such as Myobloc® (rimabotulinumtoxinB), Dysport® (abobotulinumtoxinA), or Xeomin® (incobotulinumtoxinA); have a skin infection at the planned injection site.

The dose of BOTOX® is not the same as, or comparable to, another botulinum toxin product.

Serious and/or immediate allergic reactions have been reported, including itching, rash, red itchy welts, wheezing, asthma symptoms, or dizziness or feeling faint. Get medical help right away if you experience symptoms; further injection of BOTOX® should be discontinued.

Tell your doctor about all your muscle or nerve conditions such as ALS or Lou Gehrig’s disease, myasthenia gravis, or Lambert-Eaton syndrome, as you may be at increased risk of serious side effects including difficulty swallowing and difficulty breathing from typical doses of BOTOX®.

Tell your doctor about all your medical conditions, including if you: have or have had bleeding problems; have plans to have surgery; had surgery on your face; weakness of forehead muscles; trouble raising your eyebrows; drooping eyelids; any other abnormal facial change; are pregnant or plan to become pregnant (it is not known if BOTOX® can harm your unborn baby); are breastfeeding or plan to (it is not known if BOTOX® passes into breast milk).

Tell your doctor about all the medicines you take, including prescription and over-the-counter medicines, vitamins, and herbal supplements. Using BOTOX® with certain medicines may cause serious side effects. Do not start any new medicines until you have told your doctor that you received BOTOX® in the past.

Tell your doctor if you received any other botulinum toxin product in the last 4 months; have received injections of botulinum toxin such as Myobloc®, Dysport®, or Xeomin® in the past (tell your doctor exactly which product you received); have recently received an antibiotic injection; take muscle relaxants; take allergy or cold medicines; take sleep medicine; take aspirin-like products or blood thinners.

Other side effects of BOTOX® include: dry mouth, discomfort or pain at injection site, tiredness, headache, neck pain, eye problems: double vision, blurred vision, decreased eyesight, drooping eyelids, swelling of eyelids, dry eyes; and drooping eyebrows.

For more information refer to the Medication Guide or talk 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.

Indication

BOTOX® is a prescription medicine that is injected to prevent headaches in adults with Chronic Migraine who have 15 or more days each month with headache lasting 4 or more hours each day in people 18 years or older.

It is not known whether BOTOX® is safe or effective to prevent headaches in patients with migraine who have 14 or fewer headache days each month (episodic migraine).

Please see accompanying Summary of Information about BOTOX®.
Program Terms, Conditions, and Eligibility Criteria: 1. This offer is good for use only with a valid prescription for BOTOX® (onabotulinumtoxinA). 2. Based on insurance coverage, Chronic Migraine patients can receive up to $700 off per treatment for up to 5 treatments over a 12-month period. Maximum savings limit of $3500 over a 12-month period for people with Chronic Migraine applies; patient out-of-pocket expense may vary. 3. This offer is not valid for use by patients enrolled in Medicare, Medicaid, or other federal or state programs (including any state pharmaceutical assistance programs), or private indemnity or HMO insurance plans that reimburse you for the entire cost of your prescription drugs. Patients may not use this offer if they are Medicare-eligible and enrolled in an employer-sponsored health plan or prescription drug benefit program for retirees. This offer is not valid for cash-paying patients. 4. This offer is valid for 5 treatments over a 12-month period. 5. Offer is valid only for BOTOX® and BOTOX® treatment-related costs not covered by insurance. 6. A BOTOX® Savings Program check will be provided upon approval of a claim. The claim must be submitted with treatment details from an Explanation of Benefits (EOB) or a Specialty Pharmacy Provider (SPP) receipt. (If the BOTOX® prescription was filled by a Specialty Pharmacy Provider, both EOB and SPP details must be provided.) All claims must be submitted within 120 days of treatment date. You may be required to provide a copy of your EOB or SPP receipt for your claim to be approved. 7. A BOTOX® Savings Program check may be sent either directly to you or to your selected healthcare provider who provided treatment. For payment to be made directly to your healthcare provider, you must authorize an assignment of benefit during each claim submission. You are not obligated to assign your BOTOX® Savings Program benefit to your healthcare provider to participate in the program. 8. Allergan reserves the right to rescind, revoke, or amend this offer without notice. 9. Offer good only in the USA, including Puerto Rico, at participating retail locations. 10. Void where prohibited by law, taxed, or restricted. 11. This offer is not health insurance. 12. By participating in the BOTOX® Savings Program, you acknowledge that you are an eligible patient and that you understand and agree to comply with the terms and conditions of this offer.

For questions about this program, please call 1-800-44-BOTOX.