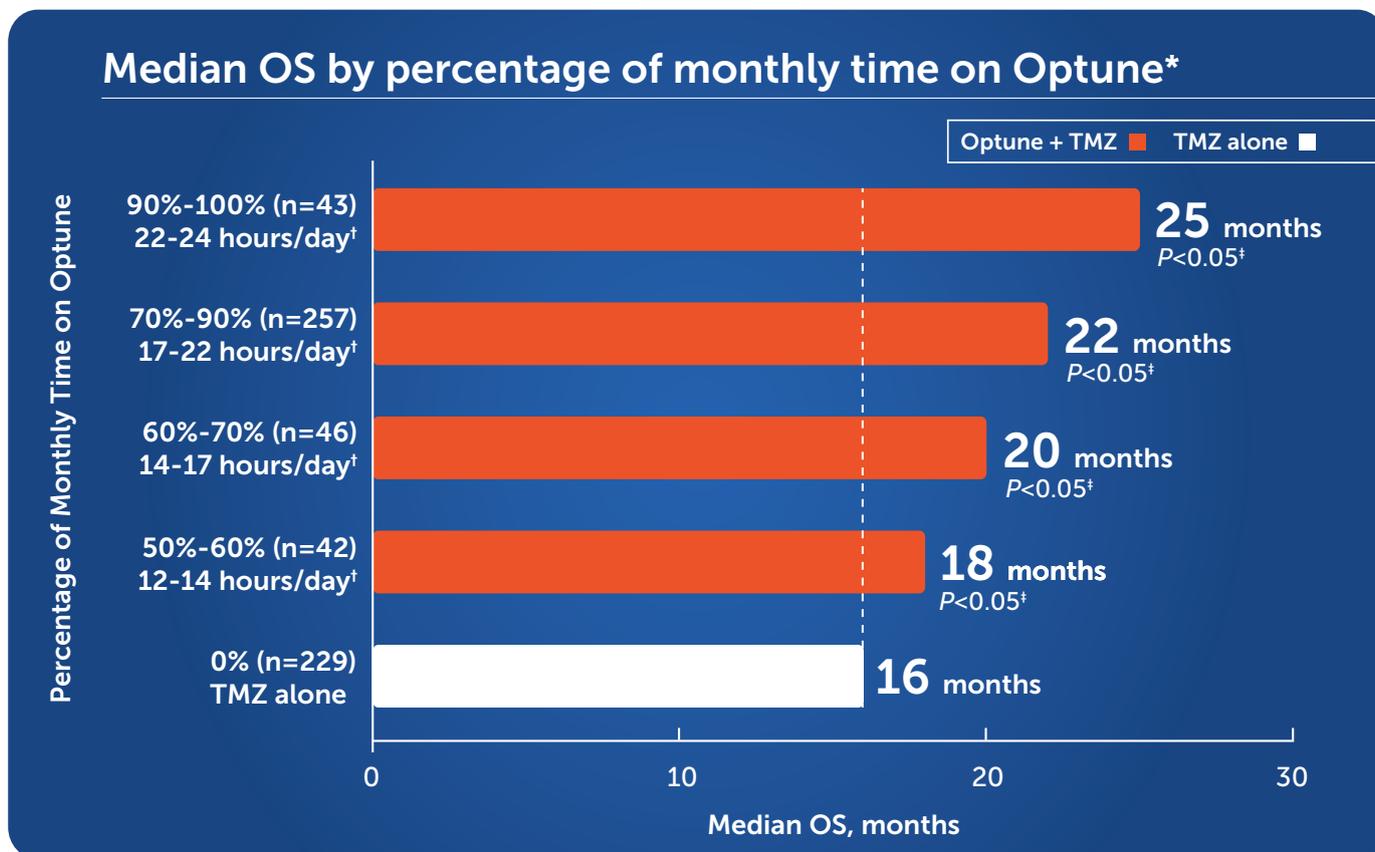


In newly diagnosed GBM

Optune[®] has a proven dose-response relationship over time

In a clinical trial, Optune used at incrementally higher ratios of time increased the median OS benefit vs TMZ alone¹



*Based on amount of time Optune was turned on and providing therapy over the course of a month. This data reflects the average patient usage of Optune for the first 6 months of treatment (months 1-6).²

[†]Approximation, based on monthly usage.

[‡]vs TMZ alone.

GBM, glioblastoma; OS, overall survival; TMZ, temozolomide.

Indications For Use

Optune is intended as a treatment for adult patients (22 years of age or older) with histologically-confirmed glioblastoma multiforme (GBM).

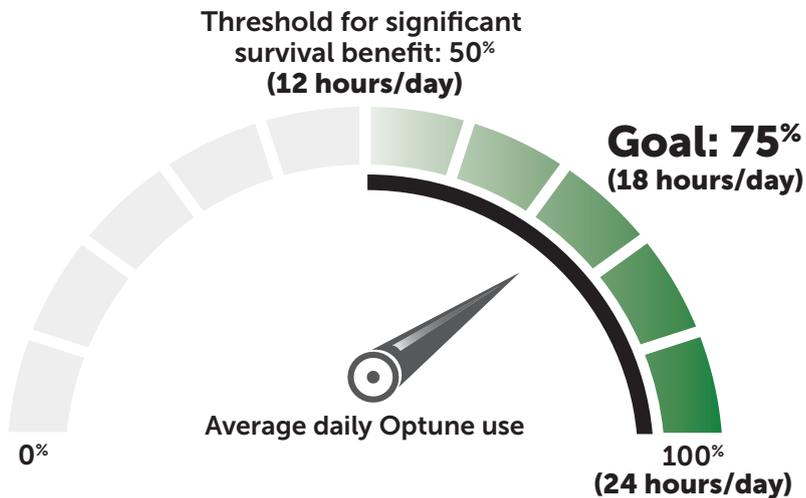
Optune with temozolomide is indicated for the treatment of adult patients with newly diagnosed, supratentorial glioblastoma following maximal debulking surgery, and completion of radiation therapy together with concomitant standard of care chemotherapy.

Please see the Important Safety Information for Optune on the reverse side and the Optune Instructions For Use (IFU) for complete information regarding the device's indications, contraindications, warnings, and precautions at Optune.com/IFU.



Optune® allows for flexible use that patients can readily adopt

Flexible use with Optune



Recommended usage is $\geq 75\%$ of time³

- Patients can benefit most from wearing Optune when turned on for 18 or more hours per day ($\geq 75\%$ of the time)
 - 75% of patients used Optune $\geq 75\%$ of the time in the pivotal trial⁵

Flexible use is available for various patient needs

- 50% daily use was the threshold for significant survival benefit over TMZ alone¹
 - 86% of patients received a survival benefit from Optune, because they used it more than half the time (n=388/450)¹

Important Safety Information

Contraindications

Do not use Optune in patients with an active implanted medical device, a skull defect (such as, missing bone with no replacement), or bullet fragments. Use of Optune together with implanted electronic devices has not been tested and may theoretically lead to malfunctioning of the implanted device. Use of Optune together with skull defects or bullet fragments has not been tested and may possibly lead to tissue damage or render Optune ineffective.

Do not use Optune in patients that are known to be sensitive to conductive hydrogels. In this case, skin contact with the gel used with Optune may commonly cause increased redness and itching, and rarely may even lead to severe allergic reactions such as shock and respiratory failure.

Warnings and Precautions

Optune can only be prescribed by a healthcare provider that has completed the required certification training provided by Novocure™ (the device manufacturer).

Do not prescribe Optune for patients that are pregnant, you think might be pregnant or are trying to get pregnant, as the safety and effectiveness of Optune in these populations have not been established.

The most common ($\geq 10\%$) adverse events involving Optune in combination with temozolomide were thrombocytopenia, nausea, constipation, vomiting, fatigue, medical device site reaction, headache, convulsions, and depression.

Use of Optune in patients with an inactive implanted medical device in the brain has not been studied for safety and effectiveness, and use of Optune in these patients could lead to tissue damage or lower the chance of Optune being effective.

If the patient has an underlying serious skin condition on the scalp, evaluate whether this may prevent or temporarily interfere with Optune treatment.

Please see the Optune Instructions For Use (IFU) for complete information regarding the device's indications, contraindications, warnings, and precautions at Optune.com/IFU.

References: 1. Ram Z, Kim CY, Nicholas GA, et al; on behalf of EF-14 trial investigators. Compliance and treatment duration predict survival in a phase 3 trial of Tumor Treating Fields with temozolomide in patients with newly diagnosed glioblastoma. Slides presented at: SNO Annual Meeting 2017; November 16-19, 2017; San Francisco, CA. 2. Novocure Data on File OPT-135. 3. Stupp R, Taillibert S, Kanner AA, et al. Effect of tumor-treating fields plus maintenance temozolomide vs maintenance temozolomide alone on survival in patients with glioblastoma: a randomized clinical trial. *JAMA*. 2017;318(23):2306-2316.