

FOR ADULTS WITH MAJOR DEPRESSIVE DISORDER (MDD)

**ANTIDEPRESSANT
ALONE NOT ENOUGH?
ADDING CAPLYTA
MAY HELP**

CAPLYTA 
(lumateperone) capsules

THIS IS A CHANCE TO

LET IN
THE **LYTE** TM

Actor portrayal.

INDICATIONS

CAPLYTA is a prescription medicine used in adults along with an antidepressant to treat major depressive disorder (MDD); to treat depressive episodes associated with bipolar I or bipolar II disorder (bipolar depression) alone or with lithium or valproate; or to treat schizophrenia. It is not known if CAPLYTA is safe and effective in children.

IMPORTANT SAFETY INFORMATION

Medicines like CAPLYTA can raise the risk of death in elderly people who have lost touch with reality (psychosis) due to confusion and memory loss (dementia). CAPLYTA is not approved for treating people with dementia-related psychosis.

CAPLYTA and antidepressant medicines increase the risk of suicidal thoughts and actions in people 24 years of age and younger, especially within the first few months of treatment or when the dose is changed. Depression and other serious mental illnesses are the most important causes of suicidal thoughts and actions. Patients and their families or caregivers should watch for new or worsening depression symptoms, especially sudden changes in mood, behaviors, thoughts, or feelings. This is very important when CAPLYTA or an antidepressant medicine is started or when the dose is changed. Report any changes in these symptoms to your healthcare provider immediately.

Please see additional [Important Safety Information](#), including Boxed WARNINGS, on pages 10–11.

UNDERSTANDING MAJOR DEPRESSIVE DISORDER

When it comes to depression, you're not alone.

Major depressive disorder (MDD), also called clinical depression, is a chronic mental health condition. It can cause ongoing sadness or loss of interest, and may affect how a person feels, thinks, sleeps, and functions each day.¹ For many, symptoms continue even while taking an antidepressant.²

AROUND
22 MILLION
AMERICANS
LIVE WITH MDD³



1 IN 5 ADULTS
ARE AFFECTED BY
MDD IN THEIR LIFETIME⁴



ALMOST
75% OF PEOPLE WITH MDD
ALSO EXPERIENCE
ANXIETY SYMPTOMS ASSOCIATED WITH THEIR CONDITION⁴



CAPLYTA is not approved for the treatment of anxiety disorders.

For many people, antidepressants alone aren't enough.²

2 OUT OF 3 PEOPLE WITH MDD

**DON'T ACHIEVE
ADEQUATE RELIEF**

FROM THEIR FIRST ANTIDEPRESSANT ALONE⁵



STILL FEELING THE LOWS? IT'S TIME TO TALK ABOUT IT

Even on an antidepressant, many people may still struggle with depression symptoms like¹:

- Feelings of worthlessness or guilt
- Weight loss or gain (due to changes in how much you eat)
- Depressed mood most of the day
- Loss of interest in things you once enjoyed
- Trouble falling or staying asleep, or sleeping too much
- Feeling irritated easily
- Fatigue or loss of energy
- Difficulty thinking, concentrating, and making decisions
- Thoughts of harming yourself

If your depression symptoms haven't fully improved, speak up. Clinical guidelines recommend that an add-on treatment may be appropriate if your depression symptoms remain.⁶ CAPLYTA is a prescription medicine taken with an antidepressant to treat MDD in adults.⁷

Ask your healthcare provider if adding CAPLYTA could help.

Please see page 21 for references.

IMPORTANT SAFETY INFORMATION

Do not take CAPLYTA if you are allergic to any of its ingredients. Get emergency medical help if you are having an allergic reaction (e.g., rash, itching, hives, swelling of the tongue, lip, face, or throat).

CAPLYTA may cause serious side effects, including:

- **Stroke (cerebrovascular problems)** in elderly people with dementia-related psychosis that can lead to death.

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CAPLYTA
(lumateperone) capsules

Actor portrayals.

CAPLYTA + ANTIDEPRESSANT GREATER DEPRESSION SYMPTOM RELIEF THAN AN ANTIDEPRESSANT ALONE

**Build on the progress you've already made
without starting over.**

In clinical trials, when added to an antidepressant, CAPLYTA was clinically proven to:

**SIGNIFICANTLY RELIEVE
DEPRESSION SYMPTOMS
IN ADULTS AT 6 WEEKS
vs AN ANTIDEPRESSANT ALONE**



Actor portrayals.

How does depression work?

Depression is a complex condition that involves changes in the way certain brain chemicals, also known as neurotransmitters, and pathways work in the brain—especially those linked to mood, motivation, and emotional balance. Some of the brain chemicals believed to be involved with depression include **serotonin**, **norepinephrine**, **dopamine**, and **glutamate**.

Many antidepressants are thought to help by increasing levels of serotonin, norepinephrine, and some of these naturally occurring brain chemicals. But that is just one piece of the puzzle that may improve mood.

Serotonin: A brain chemical that helps regulate mood, sleep, anxiety, appetite, and sexual function.

Norepinephrine: A brain chemical involved in alertness, arousal, and the body's response to stress.

Dopamine: A brain chemical involved in motivation, pleasure, attention, and movement.

Glutamate: A brain chemical that plays a key role in learning and memory.

How does CAPLYTA work?



CAPLYTA works with your current antidepressant to help when symptoms aren't fully resolved—so you can continue the progress you've already made while working toward symptom relief.

While the exact way CAPLYTA works is not fully understood, it is thought to bind to several brain receptors, including dopamine and serotonin.

IMPORTANT SAFETY INFORMATION

CAPLYTA may cause serious side effects, including:

- **Neuroleptic malignant syndrome (NMS):** high fever, confusion, changes in your breathing, heart rate, and blood pressure, stiff muscles, and increased sweating; these may be symptoms of a rare but potentially fatal condition. Contact your healthcare provider or go to the emergency room if you experience signs and symptoms of NMS.
- **Uncontrolled body movements (tardive dyskinesia, TD)** in your face, tongue, or other body parts. TD may not go away, even if you stop taking CAPLYTA. It may also occur after you stop taking CAPLYTA.

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A ONCE-DAILY PILL TAKEN WITH YOUR ANTIDEPRESSANT

If your antidepressant alone isn't providing enough depression relief, adding once-daily CAPLYTA may help.



ONE PILL +
ANTIDEPRESSANT



ONCE A DAY



TAKEN WITH OR
WITHOUT FOOD



Even if you're not seeing changes right away, keep taking CAPLYTA with your antidepressant as prescribed by your healthcare provider. You're on the same dose of CAPLYTA from day one. There's no need to slowly increase or adjust your dose over time.

It may take several weeks to begin working with your body. Make sure to talk to your healthcare provider about any other medications you're taking, as some may interact with CAPLYTA.

What antidepressants could I take with CAPLYTA?

In CAPLYTA clinical trials, patients were taking commonly used antidepressants, including:

- Celexa® (citalopram)
- Lexapro® (escitalopram)
- Zoloft® (sertraline)
- Paxil® (paroxetine)
- Prozac® (fluoxetine)
- Trintellix® (vortioxetine)
- Viibryd® (vilazodone)
- Effexor® (venlafaxine)
- Pristiq® (desvenlafaxine)
- Cymbalta® (duloxetine)
- Fetzima® (levomilnacipran)
- Wellbutrin® (bupropion)

This is not a full list of antidepressants you can take with CAPLYTA. Ask your healthcare provider if adding CAPLYTA to your antidepressant could be right for you.

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CAPLYTA is an FDA-approved treatment with:

OVER **5 YEARS** — & — **MORE THAN 1 MILLION PRESCRIPTIONS***

*Based on total prescriptions dispensed across approved indications since CAPLYTA was FDA-approved in 2019. MDD indication was approved in November 2025.

IMPORTANT SAFETY INFORMATION

CAPLYTA may cause serious side effects, including:

- **Low white blood cell count.** Your healthcare provider may do blood tests during the first few months of treatment with CAPLYTA.
- **Decreased blood pressure (orthostatic hypotension).** You may feel lightheaded, dizzy, or faint when you rise too quickly from a sitting or lying position.
- **Falls.** CAPLYTA may make you sleepy or dizzy, may cause a decrease in your blood pressure when changing position (orthostatic hypotension), and can slow your thinking and motor skills which may lead to falls that can cause broken bones or other injuries.
- **Seizures (convulsions).**
- **Sleepiness, drowsiness, feeling tired, difficulty thinking and doing normal activities.** Until you know how CAPLYTA affects you, do not drive, operate heavy machinery, or do other dangerous activities.

WHAT TO EXPECT WITH CAPLYTA

The most common side effects of CAPLYTA with an antidepressant include sleepiness, dizziness, nausea, dry mouth, feeling tired, and diarrhea.

IN 6-WEEK CLINICAL TRIALS:



Weight gain was not common

In 6-week trials of people taking CAPLYTA with an antidepressant, weight gain with CAPLYTA was similar to an antidepressant alone.

IN A 6-MONTH CLINICAL TRIAL:

The average weight change for people taking CAPLYTA with their antidepressant was **-0.35 lbs**.

Weight gain may occur. You and your healthcare provider should monitor your weight.

IN 6-WEEK CLINICAL TRIALS:



Reported sexual side effects were not common

In 6-week trials, less than 1% of patients taking CAPLYTA with an antidepressant reported sexual side effects.

IMPORTANT SAFETY INFORMATION

CAPLYTA may cause serious side effects, including:

- **Problems with your metabolism** including high blood sugar, diabetes, increased fat (cholesterol and triglyceride) levels in your blood and weight gain. Your healthcare provider should check your blood sugar, fat levels, and weight before you start and during your treatment with CAPLYTA. Extremely high blood sugar levels can lead to coma or death. Call your healthcare provider if you have any of the following symptoms of high blood sugar: feeling very thirsty, hungry, sick to your stomach, needing to urinate more than usual, weak/tired, or confused, or your breath smells fruity.



Actor portrayal.



Actor portrayals.

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COMMON
SIDE EFFECTS

IMPORTANT SAFETY INFORMATION

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- **Neuroleptic malignant syndrome (NMS):** high fever, confusion, changes in your breathing, heart rate, and blood pressure, stiff muscles, and increased sweating; these may be symptoms of a rare but potentially fatal condition. Contact your healthcare provider or go to the emergency room if you experience signs and symptoms of NMS.
- **Uncontrolled body movements (tardive dyskinesia, TD)** in your face, tongue, or other body parts. TD may not go away, even if you stop taking CAPLYTA. It may also occur after you stop taking CAPLYTA.
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- **Decreased blood pressure (orthostatic hypotension).** You may feel lightheaded, dizzy, or faint when you rise too quickly from a sitting or lying position.

- **Falls.** CAPLYTA may make you sleepy or dizzy, may cause a decrease in your blood pressure when changing position (orthostatic hypotension), and can slow your thinking and motor skills which may lead to falls that can cause broken bones or other injuries.
- **Seizures (convulsions).**
- **Sleepiness, drowsiness, feeling tired, difficulty thinking and doing normal activities.** Until you know how CAPLYTA affects you, do not drive, operate heavy machinery, or do other dangerous activities.
- **Problems controlling your body temperature so that you feel too warm.** Avoid getting overheated or dehydrated while taking CAPLYTA.
- **Difficulty swallowing that can cause food or liquid to get into the lungs.**

The most common side effects of CAPLYTA include sleepiness, dizziness, nausea, dry mouth, feeling tired, and diarrhea.

These are not all the possible side effects of CAPLYTA. Tell your healthcare provider if you have or have had heart problems or a stroke, high or low blood pressure, diabetes, or high blood sugar, problems with cholesterol, have or have had a low white blood cell count, seizures (convulsions), or kidney or liver problems.

CAPLYTA may cause fertility problems in females and males. You should notify your healthcare provider if you become pregnant or intend to become pregnant while taking CAPLYTA. There is a pregnancy registry for females who are exposed to CAPLYTA during pregnancy. CAPLYTA may cause abnormal involuntary movements and/or withdrawal symptoms in newborn babies exposed to CAPLYTA during the third trimester. Talk to your healthcare provider if you breastfeed or are planning to breastfeed as CAPLYTA passes into breast milk.

Tell your healthcare provider about all the medicines you're taking. CAPLYTA may affect the way other medicines work, and other medicines may affect how CAPLYTA works, causing possible serious side effects. Do not start or stop any medicines while taking CAPLYTA without talking to your healthcare provider. You are encouraged to report negative side effects of prescription drugs. Contact Intra-Cellular Therapies, Inc. at **1-888-611-4824** or FDA at **1-800-FDA-1088** or www.fda.gov/medwatch.

CAPLYTA is available in 42 mg, 21 mg, and 10.5 mg capsules.

Please see **Medication Guide**, including **Boxed WARNINGS**.

QUESTIONS TO ASK YOUR HEALTHCARE PROVIDER ABOUT CAPLYTA

It can be hard to bring up questions during an appointment, especially if you're not sure where to start. If you're still experiencing symptoms of depression while on an antidepressant, this page can help guide the conversation.

Use these questions to talk with your healthcare provider about whether adding CAPLYTA to your current treatment may be right for you:

- Could adding CAPLYTA help improve my depression symptoms?
- How quickly will CAPLYTA start working?
- What are the common side effects of CAPLYTA?
- Will CAPLYTA make me gain weight?
- Can I take other medications with CAPLYTA?
- Is there a good time of day to take CAPLYTA?
- Will CAPLYTA make me sleepy?

ADDITIONAL QUESTIONS AND NEXT STEPS

Have additional questions or topics you'd like to discuss with your healthcare provider? Use the space below to note the date of your next appointment, what you need to bring, who you'll be meeting with, or anything else that's on your mind.

Notes:

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(lumateperone) capsules

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ONCE YOU AND YOUR DOCTOR HAVE DECIDED
THAT CAPLYTA IS RIGHT FOR YOU

FIND SAVINGS AND SUPPORT ON YOUR CAPLYTA PRESCRIPTION

CAPLYTA *with me* START AND STAY
WITH CONFIDENCE

Eligible* patients may
PAY AS LITTLE AS

\$0⁺

for 30-day or 90-day prescriptions
and for a **generic antidepressant**

*Maximum savings limit applies; patient out-of-pocket expense may vary. Please see Program Eligibility Criteria and Terms & Conditions on pages 15-17.

Get more savings with 90-day prescriptions.

- **Save time** – Fewer trips to the pharmacy
- **Save money** – Lower out-of-pocket costs

There are two ways to access your CAPLYTA Savings Card:

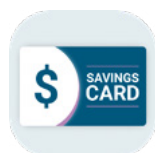


PREFER AN eCARD? Text "CAPLYTA" to 26789

to download a digital CAPLYTA Savings Card to your phone and receive useful text messages about your prescription.

- Alerts on prescription savings
- Updates on insurance coverage
- Refill reminders and the option to order refills via text

Message and data rates may apply. Message frequency varies. Text HELP for help. Text STOP to end. See [Terms and Conditions](#) and [Privacy Policy](#).



DOWNLOAD THE SAVINGS CARD

Scan or click the QR code to download and print your Savings Card from our website.

Then, simply bring it to your pharmacy, show it to the pharmacist, and start saving on your CAPLYTA prescriptions.



***By using the CAPLYTA Savings Card, you acknowledge that you currently meet all Eligibility Criteria and Terms & Conditions and will comply with the terms & conditions below.**

PROGRAM ELIGIBILITY CRITERIA AND TERMS & CONDITIONS:

This offer is valid for eligible new or existing patients who are filling a prescription for CAPLYTA.

Patients must be 18 years of age or older, residents of the United States, excluding Puerto Rico, and have a valid prescription for CAPLYTA.

Patients must have private commercial insurance. Offer is **not** valid for prescriptions reimbursed under Medicaid, a Medicare drug benefit plan, TRICARE, or other federal or state health programs (such as medical assistance programs). This offer is not insurance, has no cash value and may not be used in combination with any other discount, coupon, rebate, free trial, savings, or similar offer.

This savings card is not valid when the entire cost of your prescription drug is eligible to be reimbursed by your private insurance plan or other private health or pharmacy benefit programs. You must deduct the value of this savings card from any reimbursement request submitted to your private insurance plan, either directly by you or on your behalf. You are responsible for reporting use of the savings card to any private commercial insurer, health plan, or other third party who pays for or reimburses any part of the prescription filled using the savings card, as may be required. You should not use the savings card if your insurer or health plan prohibits use of manufacturer savings cards.

Please see **Important Safety Information**, including **Boxed WARNINGS**, on pages 10-11.

CAPLYTA
(lumateperone) capsules

This offer is good only at participating retail pharmacies. This card may not be redeemed for cash. Void if prohibited by law, taxed, or restricted. Eligible patients may pay as little as \$0 on the first two fills, up to the maximum lifetime benefit based on current list price of 30-day supply. On subsequent uses, eligible patients may pay as little as \$0, up to the maximum benefit of \$700 for a 30-day Rx; \$1,400 for a 60-day Rx; and \$2,100 for a 90-day Rx. Eligible, commercially insured patients who are taking CAPLYTA as an adjunctive or add-on treatment for Major Depressive Disorder may pay as little as \$0 per prescription fill for a generic antidepressant with a maximum benefit of \$100 per fill.

Program benefit calculated on FDA-approved dosing.

A valid Prescriber ID# is required on the prescription. Johnson & Johnson reserves the right to rescind, revoke, or amend this offer without notice at any time.

Data related to the redemption of this savings card may be collected, analyzed, and shared with Johnson & Johnson for market research and/or other purposes related to assessing the CAPLYTA Savings Program.

By using this offer, you authorize the CAPLYTA Savings Program to share your prescription information with CoverMyMeds so that CoverMyMeds may contact your healthcare provider to request submission of information to support coverage of your CAPLYTA prescription by your health insurance plan.

This program is valid through 09/30/2026.

No other purchase is necessary.

Johnson & Johnson reserves the right to rescind, revoke, or amend this offer without notice.

Patients with questions about the CAPLYTA Savings Card should call **1-800-639-4047**.

Pharmacist: When you apply this offer, you are certifying that you have not submitted a claim for reimbursement under any federal, state, or other governmental programs for this prescription. This offer is valid only for patients with commercial insurance. Participation in this program must comply with all applicable laws and regulations as a pharmacy provider.

By participating in this program, you are certifying that you will comply with the terms & conditions described in the Restrictions section below.

Pharmacist instructions for a patient with an Eligible Third Party: Submit the claim to the primary Third-Party Payer first, then submit the balance due to **Change Healthcare** as a Secondary Payer as a copay-only billing using a valid Other Coverage Code. Eligible patients may pay as little as \$0 on the first two uses, up to the maximum lifetime benefit based on current list price of 30-day supply. On subsequent uses, eligible patients may pay as little as \$0 up to the maximum benefit of \$700 for a 30-day Rx; \$1,400 for a 60-day Rx; and \$2,100 for a 90-day Rx. Eligible, commercially insured patients who are taking CAPLYTA as an adjunctive or add-on treatment for Major Depressive Disorder may pay as little as \$0 per prescription fill for a generic antidepressant with a maximum benefit of \$100 per fill. Reimbursement will be received from **Change Healthcare**.

For any questions regarding **Change Healthcare** online processing, please call the Help Desk at **1-800-433-4893**.

Restrictions: This offer is valid in the United States, excluding Puerto Rico. Offer not valid for prescriptions reimbursed under Medicaid, a Medicare drug benefit plan, TRICARE, or other federal or state health programs (such as medical assistance programs). This offer is valid only for patients with commercial insurance. Cash Discount Cards and other non-insurance plans are not valid as primary under this offer. If the patient is eligible for drug benefits under any such program, the patient cannot use this offer. **By using this offer, the patient certifies that he or she will comply with any terms of his or her health insurance contract requiring notification to his or her payer of the existence and/or value of this offer.** It is illegal to (or offer to) sell, purchase, or trade this offer. Program expires 09/30/2026. This offer is not transferable and is limited to one offer per person. Not valid if reproduced.

Void where prohibited by law. Program managed by ConnectiveRx on behalf of Johnson & Johnson.

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TIPS AND RESOURCES TO HELP SUPPORT YOUR ROUTINE

Use these helpful tips as you manage depression and continue treatment. Talk to your doctor about what may work best for you.



Try waking up, eating, and going to bed around the same time each day to bring more structure.



Reach out to someone by phone, text, or in person to feel a little more connected.



Jot down how you're feeling and sleeping each day so you can discuss it at your next doctor's visit.



Eat regular, balanced meals and healthy snacks throughout the day to keep your energy steady.



Move your body when you can with a short walk, stretch, or time outside.



Take a few minutes somewhere quiet to reset and reduce distractions.



If something doesn't feel right, let your healthcare provider know—they're there to help.

GROUPS TO LEAN ON

If you're living with depression, there are organizations that can provide education, support, and important connections.

Intra-Cellular Therapies, Inc. does not control or endorse third-party organizations. As such, Intra-Cellular Therapies, Inc. makes no representation as to the accuracy or any other aspect of the information supplied by these organizations or contained on these websites. The information provided is meant for informational purposes only. It is not meant to replace your physician's medical advice.

DBSA (Depression and Bipolar Support Alliance)

Website: dbsalliance.org

Provides hope, help, support, and education to improve the lives of people who have mood disorders (depression and bipolar disorder).

NAMI (National Alliance on Mental Illness)

Website: nami.org

Offers education, support groups, and helplines for people managing mental health conditions.

MHA (Mental Health America)

Website: mhanational.org

A nonprofit focused on supporting people with mental health challenges. Offers online tools and community resources.

AFSP (American Foundation for Suicide Prevention)

Website: afsp.org

Provides education, research, and resources for those affected by suicide or suicidal thoughts.

YOUR NOTES

References: 1. Depression. Substance Abuse and Mental Health Services Administration (SAMHSA). Updated April 24, 2023. Accessed June 11, 2025. <https://www.samhsa.gov/mental-health/what-is-mental-health/conditions/depression> 2. Gaynes BN, Rush AJ, Trivedi MH, Wisniewski SR, Spencer D, Fava M. The STAR*D study: treating depression in the real world. *Cleve Clin J Med*. 2008;75(1):57–66. 3. Substance Abuse and Mental Health Services Administration. *Key substance use and mental health indicators in the United States: Results from the 2023 National Survey on Drug Use and Health* (HHS Publication No. PEP24-07-021, NSDUH Series H-59). Center for Behavioral Health Statistics and Quality, Substance Abuse and Mental Health Services Administration; 2024. Accessed June 11, 2025. <https://www.samhsa.gov/data/report/2023-nsduh-annual-national-report> 4. Hasin DS, Sarvet AL, Meyers JL, et al. Epidemiology of adult DSM-5 major depressive disorder and its specifiers in the United States. *JAMA Psychiatry*. 2018;75(4):336–346. doi:10.1001/jamapsychiatry.2017.4602 5. Rush AJ, Trivedi MH, Wisniewski SR, et al. Acute and longer-term outcomes in depressed outpatients requiring one or several treatment steps: a STAR*D report. *Am J Psychiatry*. 2006;163(11):1905–1917. doi:10.1176/ajp.2006.163.11.1905 6. American Psychiatric Association. *Practice guideline for the treatment of patients with major depressive disorder (third edition)*; 2010. 7. CAPLYTA Prescribing Information. 8. Kao CH. Neurotransmitters and their influence on mental health disorders. *Neurosci Psych Open Access*. 2024;7(6):284–286. doi:10.47532/npoa.2024.7(6).284-286 9. Montano CB, Jackson WC, Vanacore D, Weisler R. Considerations when selecting an antidepressant: a narrative review for primary care providers treating adults with depression. *Postgrad Med*. 2023;135(5):449–465. doi:10.1080/00325481.2023.2189868 10. Shankar GS. Serotonin and sexual dysfunction. *J Autacoids Horm*. 2015;5(1):e129. doi:10.4172/2161-0479.1000e129 11. Data on File.

Actor portrayal.

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