

Genetic testing to help in your diagnostic journey

TALK TO YOUR DOCTOR TO REQUEST A NO-COST GENETIC TEST FOR PERIODIC PARALYSIS

Primary Periodic Paralysis (PPP) is a rare and potentially progressive genetic condition.¹⁻³ Xeris Pharmaceuticals® has partnered with PreventionGenetics to offer a periodic paralysis genetic test for those who have episodes of muscle weakness or temporary paralysis provoked by common triggers for PPP.

A Periodic Paralysis genetic test can bring you closer to uncovering the genetic cause behind the attacks of paralysis and muscle weakness caused by PPP.

For more information, please visit Uncovering Periodic Paralysis.com



ABOUT PRIMARY PERIODIC PARALYSIS (PPP)

- PPP is a very rare condition that affects ~4,000-5,000 individuals in the US⁴
- PPP causes often debilitating episodes of muscle weakness or temporary paralysis often affecting muscles in the arms and legs¹
- PPP is usually inherited from a parent and may affect multiple people within a family⁵

ABOUT THE UNCOVERING PERIODIC PARALYSIS GENETIC TESTING PROGRAM

The Uncovering Periodic Paralysis genetic test includes an analysis for both hyperkalemic and hypokalemic periodic paralysis on the following 6 genes:

ATP1A2

CACNAIS

MCM3AP

SCN4A

KCNJ2

RYR1

Additionally, through the Uncovering Periodic Paralysis Program, you have access to a licensed genetic counselor, who can help you prepare for your test and help you understand how your results may influence your next steps - all at no cost.

Once the lab at PreventionGenetics receives your sample, your doctor will receive your results within 18 to 21 days.

TESTING FOR FAMILY MEMBERS

If your genetic test result is positive for any one of the 6 genes listed above, any blood relative of yours can be tested for PPP through the Uncovering Periodic Paralysis program at no cost.

ELIGIBILITY FOR TESTING UNCOVERING PERIODIC PARALYSIS PROGRAM

You must:

- Be 18+ years of age
- Have a history of episodic muscle weakness, paralysis attacks, or episodic pain after attacks
- Have episodes provoked by at least 1 of the common triggers for PPP.
 Visit UncoveringPeriodicParalysis.com to view the common triggers of PPP

A NEGATIVE TEST DOES NOT RULE OUT A PPP DIAGNOSIS⁵

A negative test result does not mean you don't have PPP. Genetic testing confirms a diagnosis in about 70% of those who have PPP. The remaining 30% of individuals may have a negative test that does not identify a genetic mutation but may still be considered to have PPP based on clinical symptoms, family history, and/or other diagnostic tests.

If you're seeking a diagnosis, ensure your doctor considers the following:

- Clinical presentation of symptoms
- History of attacks (as well as serum potassium levels during attacks)
- Response to specific PPP triggers
- Family history
- · Ruling out other conditions that mimic PPP
- Other testing such as electrocardiogram (EKG), electromyography (EMG), and compound muscle action potential (CMAP)

HOW TO ORDER A GENETIC TEST

- Your doctor can order a test for you at UncoveringPeriodicParalysis.com.
 Once ordered, you will be shipped a testing kit for either blood, saliva,
 OR buccal collection
 - » For blood collection, you have the ability to schedule a no-cost blood draw appointment at a doctor's office or at your home (within the US) OR
- 2. To schedule a telehealth appointment with a genetic counselor who can confirm your eligibility, address questions about genetic testing, and order the test for you, visit genomemedical.com/programs/uncovering-periodic-paralysis



ENSURING YOU NEVER WALK ALONE

Providing patients and their providers with expertise in managing critical aspects of the PPP treatment journey



Scan the QR code to connect with someone who understands. Get free, 1-on-1 support from our PPP Patient Access Managers and access to support services specifically for PPP patients.

REFERENCES: 1. Charles G, Zheng C, Lehmann- Horn F. Jurkat-Rott K, Levitt J. Characterization of hyperkalemic periodic paralysis: a survey of genetically diagnosed individuals. *J Neurol* 2013;260:2606-2613. 2. Cavel-Greant D, Lehmann-Horn F, Jurkat-Rott K. The impact of permanent muscle weakness on quality of life in periodic paralysis; a survey of 66 patients. Acta Myol. 2012;31:126-133. 3. Statland JM, Fontaine B, Hanna MG, et al. Review of the diagnosis and treatment of periodic paralysis. *Muscle Nerve*. 2018;57:522-530 4. Data on file. Chicago, IL: Xeris Pharmaceuticals, Inc. 5. Fontaine B, Philips LH 2nd. A newly approved drug for a rare group of diseases: dichlorphenamide for periodic paralysis. Neurology. 2016;86:1366-1367.

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