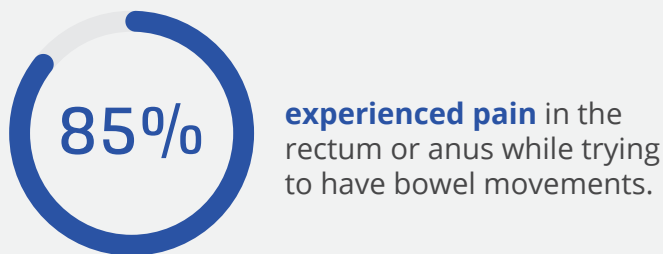
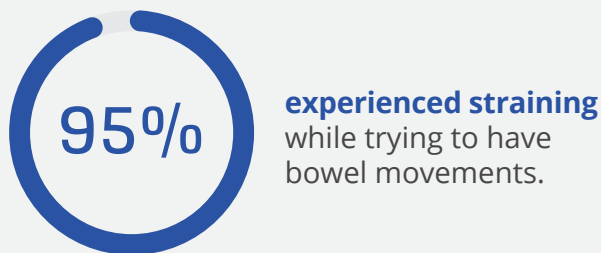


Patient Perspectives: IBS In America 2024 Real-World Survey Results

Ardelyx, Inc., in partnership with Health Union, has surveyed almost 300 patients diagnosed with IBS-C in the United States to better understand their symptoms and the impact of IBS-C on their overall health status and quality of life.



In the **previous 7 days:**



90% of patients reported **"some" or "significant" negative** impact of IBS-C on their life.



More than **one-third** (39%) of patients described their QoL as **"poor"** or **"fair."**

This was often attributed to having multiple health conditions.



Shah E, et al. Irritable bowel syndrome with constipation poses a substantial burden to patient overall health status and quality of life: results from the IBS In America 2024 real-world survey. Poster presented at: the American College of Gastroenterology 2024 Annual Meeting; Oct 25-30, 2024; Philadelphia, PA.



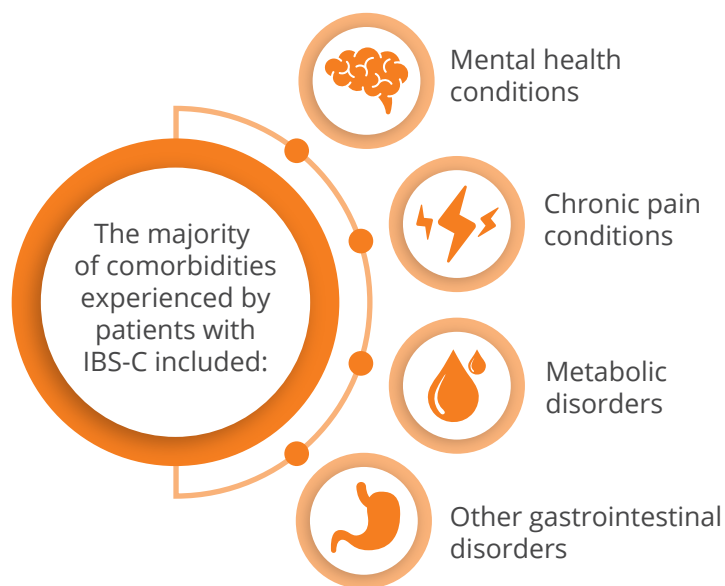
Moshiree B, et al. Patients with irritable bowel syndrome with constipation from the IBS In America 2024 real-world survey experience burdensome symptoms beyond constipation. Poster presented at: the American College of Gastroenterology 2024 Annual Meeting; Oct 25-30, 2024; Philadelphia, PA.

Study Design: IBS In America 2024 was a 15-minute, real-world, online survey fielded by Health Union from January 15-April 14, 2024, in United States residents aged ≥ 18 years. The survey covered demographics, comorbidities, QoL/impact, treatments, and HCP interactions. Patients who completed the survey were invited to participate in an institutional review board-approved extension survey if they met the following criteria: diagnosed with IBS-C or IBS with alternating diarrhea and constipation by an HCP, currently seeing an HCP to treat IBS, and had ever used an over-the-counter or prescription treatment for IBS. Four questions addressed patients' menstrual status and the impact of menstruation on constipation. These analyses only include patients diagnosed with IBS-C who completed the extension survey. Respondents with IBS-C (N=284) had a mean (range) age of 51 (18-86) years and were predominantly female (92%; 48% postmenopausal) and White (87%). Most respondents had been living with IBS-C for ≥ 2 years, and 80% of respondents reported IBS episodes occurring weekly or daily over the past year. This survey was designed to learn about patients' experience with IBS-C and did not investigate safety or efficacy of any prescription drugs for management of IBS-C.

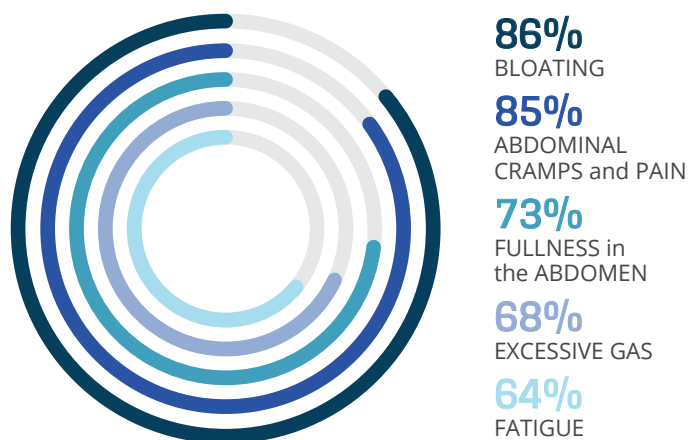
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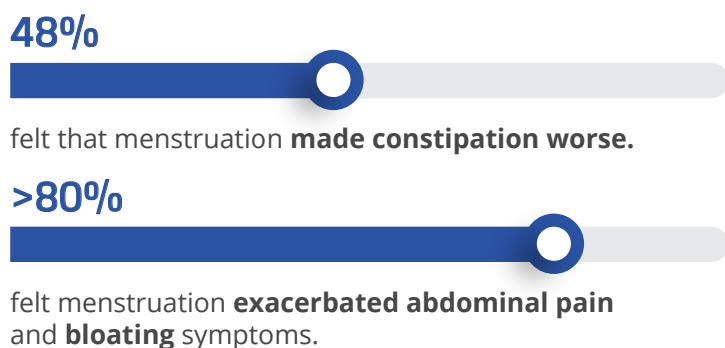




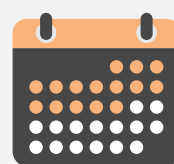
The majority of patients experienced **other symptoms** in addition to constipation.



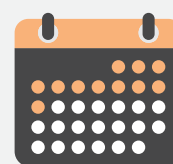
Of 104 respondents currently perimenopausal or having menstrual periods:



Patients reported that in the previous 30 days



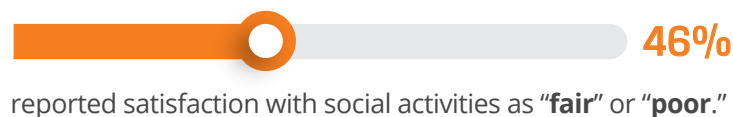
their **physical health** had been "**not good**" for an average of **15 days**.



their **mental health** had been "**not good**" for an average of **11 days**.

The majority reported negative impact on:

- **Mental** and **emotional health**.
- **Sexual health** and **intimacy**.
- **Relationships** with friends and family.
- Sense of **independence**.



IBS-C was considered a **financial hardship** to patients and their families:



Study Design: IBS In America 2024 was a 15-minute, real-world, online survey fielded by Health Union from January 15-April 14, 2024, in United States residents aged ≥ 18 years. The survey covered demographics, comorbidities, QoL/impact, treatments, and HCP interactions. Patients who completed the survey were invited to participate in an institutional review board-approved extension survey if they met the following criteria: diagnosed with IBS-C or IBS with alternating diarrhea and constipation by an HCP, currently seeing an HCP to treat IBS, and had ever used an over-the-counter or prescription treatment for IBS. Four questions addressed patients' menstrual status and the impact of menstruation on constipation. These analyses only include patients diagnosed with IBS-C who completed the extension survey. Respondents with IBS-C (N=284) had a mean (range) age of 51 (18-86) years and were predominantly female (92%; 48% postmenopausal) and White (87%). Most respondents had been living with IBS-C for ≥ 2 years, and 80% of respondents reported IBS episodes occurring weekly or daily over the past year. This survey was designed to learn about patients' experience with IBS-C and did not investigate safety or efficacy of any prescription drugs for management of IBS-C.

HCP, health care provider; IBS, irritable bowel syndrome; IBS-C, irritable bowel syndrome with constipation; QoL, quality of life.

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