Johnson&Johnson

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Johnson & Johnson data presentations at the 2026 APA and ASCP Annual Meetings:

Meeting	Poster #	Title
Major Depressive Disorder		
Lumateperone		
APA	4922	Lumateperone 42 mg in Major Depressive Disorder: Demographic and Clinical Subgroups Efficacy Analysis in a Phase 3 Randomized Placebo-Controlled Trial
ASCP	T40	Adjunctive Lumateperone 42 mg Treatment in Major Depressive Disorder: Efficacy Across Patient-Reported Depression Symptoms
ASCP	W38	Efficacy of Lumateperone 42 mg for the Treatment of Major Depressive Disorder: Analysis of Demographic and Clinical Subgroups in a Phase 3 Randomized Placebo-Controlled Trial
ASCP	T41	First Onset and Duration of Treatment-Emergent Adverse Events in Patients With Major Depressive Disorder Treated With Adjunctive Lumateperone 42 mg: A Pooled Analysis of 2 Randomized Placebo-Controlled Trials
ASCP	T42	Remission With Lumateperone 42 mg Adjunctive to Antidepressant Therapy in Patients With Major Depressive Disorder: Analysis of Short-Term and Long-Term Trials
ASCP	T36	Lumateperone Versus Other Adjunctive Atypical Antipsychotics for Major Depressive Disorder: A Network Meta-Analysis of Comparative Efficacy and Safety
ASCP	W37	Lumateperone 42 mg in Major Depressive Disorder: Demographic and Clinical Subgroups Efficacy Analysis in a Phase 3 Randomized Placebo-Controlled Trial
ASCP	W36	Metabolic Profile of Adjunctive Lumateperone 42 mg in Major Depressive Disorder: A Pooled Analysis of 2 Randomized, Placebo-Controlled Trials
Seltorexant		
ASCP	Oral presentation	Seltorexant, Adjunctive to Antidepressants, in Adults with Major Depressive Disorder with Insomnia Symptoms: Phase 3 Studies
ASCP	W33	Association of Major Depressive Disorder with Insomnia Symptoms with Healthcare Resource Use and Cardiovascular and Metabolic Conditions - Analysis of National Health & Nutrition Examination Survey
ASCP	W24	Seltorexant versus Quetiapine Extended Release as Adjunctive Treatment in Major Depressive Disorder with Insomnia Symptoms: Phase 3 Trial
ASCP	T30	Metabolic Profiles of Participants with Major Depressive Disorder with Insomnia Symptoms in a Phase 3 Trial of Seltorexant versus Quetiapine Extended Release as Adjunctive Therapy
ASCP	W74	Impact of Seltorexant on Cognitive Performance of Adults with Major Depressive Disorder with Insomnia Symptoms
Treatment-Resistant Depression		
Esketamine		
APA	4910	Long-Term Safety and Efficacy of Esketamine Nasal Spray Among Latino/Hispanic Adults With Treatment-Resistant Depression in the SUSTAIN-3 Study
ASCP	T111	Esketamine Nasal Spray for Relapse Prevention in Patients With Treatment-Resistant Depression: A Post Hoc Analysis of Predictors of Relapse in Placebo-Treated Patients in SUSTAIN-1
Schizophrenia		
Lumateperone		
APA	Oral presentation	Lumateperone for the Prevention of Relapse in Patients with Schizophrenia: Results From a Double-Blind, Placebo-Controlled, Randomized Withdrawal, Phase 3 Trial
Long-Acting Injectables		
ASCP	T107	Perspectives of Nurse Practitioners and Physician Associates on Presenting Long-Acting Injectables to Adults with Schizophrenia: A Delphi Panel Study
ASCP	4364	Schizophrenia-related Hospitalization History Before Long-acting Injectable Antipsychotic Initiation and Its Association with Subsequent Adherence and Hospitalizations among Dual-Eligibles: The CRITICAL PERIOD Study

About CAPLYTA® (lumateperone)
CAPLYTA® 42 mg is an oral, once daily atypical antipsychotic approved in adults as an adjunctive therapy with antidepressants for major depressive disorder (MDD), schizophrenia, and depressive episodes associated with bipolar I or II disorder (bipolar depression), as monotherapy, and as adjunctive therapy with lithium or valproate.
While the mechanism of action of CAPLYTA® is unknown, the efficacy of CAPLYTA® could be mediated through a combination of antagonist activity at central serotonin 5-HT_{2A} receptors and partial agonist activity at central dopamine D_2 receptors.

About Seltorexant
Seltorexant, an investigational first-in-class therapy, is a selective antagonist of the human orexin-2 receptor currently being developed as an adjunctive treatment for adults with MDD with insomnia symptoms. Seltorexant selectively antagonizes the orexin-2 receptors, potentially improving mood symptoms associated with depression and restoring sleep without next-day sedation in patients with depression. When orexin-2 receptors are stimulated for too long or at inappropriate times, their activation can cause hyperarousal manifestations, including insomnia and excessive cortisol release, which may contribute to depression and insomnia. Seltorexant is the only investigational therapy under study for the treatment of MDD that is believed to work by normalizing the overactivation of the orexin-2 receptors, thereby targeting the underlying biology that contributes to depression and insomnia symptoms.

ABOUT SPRAVATO® (esketamine) CIII nasal spray
SPRAVATO® is approved by the U.S. Food and Drug Administration alone or in conjunction with an oral antidepressant for adults with MDD when they have inadequate response to at least two oral antidepressants (TRD) and depressive symptoms in adults with major depressive disorder with acute suicidal ideation or behavior in conjunction with an oral antidepressant. It is a non-selective, non-competitive antagonist of the N-methyl-D-aspartate (NMDA) receptor and is believed to work differently than traditional antidepressants by acting on a pathway in the brain that affects glutamate. The mechanism by which esketamine exerts its antidepressant effect is unknown. To date, SPRAVATO® has been approved in 77 markets and administered to more than 235,000 patients worldwide.

ABOUT J&J'S SCHIZOPHRENIA LONG-ACTING INJECTABLE (LAI) PORTFOLIO
Johnson & Johnson's portfolio of long-acting injectable (LAI) offerings for schizophrenia offers the a varied range of dosing options and the longest-lasting schizophrenia treatments with each dose available, including INVEGA SUSTENNA® (1-month paliperidone palmitate), INVEGA TRINZA® (3-month paliperidone palmitate), and INVEGA HAFYERA® (6-month paliperidone palmitate), all of which are administered in a clinical setting by a medical professional.

About Johnson & Johnson
At Johnson & Johnson, we believe health is everything. Our strength in healthcare innovation empowers us to build a world where complex diseases are prevented, treated, and cured, where treatments are smarter and less invasive, and solutions are personal. Through our expertise in Innovative Medicine and MedTech, we are uniquely positioned to innovate across the full spectrum of healthcare solutions today to deliver the breakthroughs of tomorrow and profoundly impact health for humanity.

Learn more at https://www.jnj.com/ or at www.innovativemedicine.jnj.com. Follow us at @JNJInnovMed.

Cautions Concerning Forward-Looking Statements
This press release contains "forward-looking statements" as defined in the Private Securities Litigation Reform Act of 1995 related to product development and the potential benefits and treatment impact of CAPLYTA® (lumateperone), SPRAVATO® (esketamine) CIII nasal spray, and seltorexant. The reader is cautioned not to rely on these forward-looking statements. These statements are based on current expectations of future events. If underlying assumptions prove inaccurate or known or unknown risks or uncertainties materialize, actual results could vary materially from the expectations and projections of Johnson & Johnson. Risks and uncertainties include, but are not limited to: challenges and uncertainties inherent in product research and development, including the uncertainty of clinical success and of obtaining regulatory approvals; uncertainty of commercial success; manufacturing difficulties and delays; competition, including technological advances, new products and patents attained by competitors; challenges to patents; product efficacy or safety concerns resulting in product recalls or regulatory action; changes in behavior and spending patterns of purchasers of health care products and services; changes to applicable laws and regulations, including global health care reforms; and trends toward health care cost containment. A further list and descriptions of these risks, uncertainties and other factors can be found in Johnson & Johnson's most recent Annual Report on Form 10-K, including in the sections captioned "Cautionary Note Regarding Forward-Looking Statements" and "Item 1A. Risk Factors," and in Johnson & Johnson's subsequent Quarterly Reports on Form 10-Q and other filings with the Securities and Exchange Commission.

Copies of these filings are available online at www.sec.gov, www.jnj.com, www.investor.jnj.com or on request from Johnson & Johnson. Johnson & Johnson does not undertake to update any forward-looking statement as a result of new information or future events or developments.

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