Neurocrine Biosciences to Spotlight Its Scientific Journey and Growing Neuropsychiatry Pipeline at 2026 NEI Fall Congress

November 3, 2026

SAN DIEGO, Nov. 3, 2026 /PRNewswire/ -- Neurocrine Biosciences, Inc. (Nasdaq: NBIX) today announced its participation in the 2026 Neuroscience Education Institute (NEI) Fall Congress, taking place Nov. 5-8 in Colorado Springs, Colo. Through a special industry-sponsored session, "Inspired by Patients, Driven by Science: The Neurocrine Story," Neurocrine will take attendees behind the science, challenges, and breakthroughs that have shaped the company over more than three decades and explore how those experiences are informing its vision for the future of neuroscience and the treatment of neuropsychiatric conditions. Additionally, the company will share poster presentations highlighting the breadth of its expanding work in neuropsychiatry, including major depressive disorder and schizophrenia, alongside continued research in tardive dyskinesia.

"We're proud to share more of Neurocrine's scientific journey with the neuroscience community at NEI, including the challenges and lessons that have shaped our approach over more than three decades and the work underway today across psychiatry," said Dimitri E. Grigoriadis, Ph.D., Distinguished Scholar, Neurocrine Biosciences. "Our progress has always been grounded in following the science, learning along the way, and staying focused on the needs of patients. We look forward to sharing new insights across major depressive disorder, schizophrenia and tardive dyskinesia, and to continuing to build on that foundation as we pursue new medicines for people living with serious neuropsychiatric conditions."

Details of Neurocrine's Industry-Sponsored Session:

Title: Inspired by Patients, Driven by Science: The Neurocrine Story
Presenters: Dimitri E. Grigoriadis, Ph.D., Distinguished Scholar, Neurocrine Biosciences and Christopher F. O'Brien, M.D., Former Chief Medical Officer, Neurocrine Biosciences
Date/Time: November 6, from **6:45-7:45 p.m. MT**

Details of Neurocrine's Poster Presentations at NEI (all times are MT):

Major Depressive Disorder (MDD): An analysis of glutamatergic dysfunction in MDD, as well as a qualitative study examining patient experiences with cognitive impairment and real-world antidepressant treatment patterns.

Title: Beyond Monoamines: The Role of Glutamatergic Signaling and AMPA Receptor Modulation in Major Depressive Disorder **(Poster Presentation #130)**
Authors: Samantha E. Yohn, Ph.D., et al.
Date/Time: November 7, from **2:40-3:40 p.m.**

Title: Cognitive Impairment in Major Depressive Disorder: A Patient-Identified Priority for Functional Recovery **(Poster Presentation #39)**
Authors: Chris Wallick, Pharm.D., et al.
Date/Time: November 7, from **2:40-3:40 p.m.**

Title: Major Depressive Disorder Treatment Sequencing, Continuity and Combinations by Healthcare Provider Specialty in Adults Treated with Antidepressants (**Poster Presentation #140**)
Authors: Swarnali Goswami, Ph.D., et al.
Date/Time: November 7, from **2:40-3:40 p.m.**

Schizophrenia: An analysis of cardiometabolic comorbidities following initiation of oral atypical antipsychotics.

Title: Cardiometabolic Comorbidity Development and its Pharmacologic Treatment Following Oral Atypical Antipsychotic Initiation in Adults with Schizophrenia (**Poster Presentation #146**)
Authors: Spencer Cheng, Pharm.D., et al.
Date/Time: November 7, from **2:40-3:40 p.m.**

Tardive Dyskinesia (TD): Findings on the impact of TD on employment and productivity, alongside new analyses from KINECT-PRO™, the first and only study to evaluate the effects of a VMAT2 inhibitor (INGREZZA®) on quality of life and functioning in TD patients across multiple validated PRO measures.

Title: Survey Results Demonstrate Substantial Burden of Tardive Dyskinesia on Employment/Productivity and the Positive Effects of FDA-Approved Treatments **(Poster Presentation #145)**
Authors: M. Mercedes Perez-Rodriguez, M.D., et al.
Date/Time: November 7, from **2:40-3:40 p.m.**

Title: Valbenazine Meaningfully Improves Socio-Emotional and Physical Impacts on the Tardive Dyskinesia Impact Scale (TDIS™): Post Hoc Analyses of KINECT-PRO ™ Data **(Poster Presentation #144)**
Authors: Ashok Parameswaran, M.D., et al.
Date/Time: November 7, from **2:40-3:40 p.m.**

Title: Evidence-Based Recommendations for Treating Tardive Dyskinesia with a Vesicular Monoamine Transporter 2 (VMAT2) Inhibitor **(Poster Presentation #69)**
Authors: Amita Patel, M.D., et al.
Date/Time: November 7, from **2:40-3:40 p.m.**

Title: Once-Daily Valbenazine Demonstrates Greater and More Predictable Exposure Than Deutetrabenazine Extended Release: Results from a PET Study in Healthy Male Adults **(Poster Presentation #68)**
Authors: Daniel Albrecht, Ph.D., et al.
Date/Time: November 7, from **2:40-3:40 p.m.**

Title: Symptomatic Remission of Tardive Dyskinesia in Two Distinct Studies of Once-Daily Valbenazine: Results from the KINECT® 4 and KINECT-PRO ™ Clinical Trials **(Poster Presentation #52)**
Authors: Christoph Correll, M.D., et al.
Date/Time: November 7, from **2:40-3:40 p.m.**

Title: Association between Valbenazine Initiation and Antipsychotic Discontinuation among Medicare Beneficiaries with Tardive Dyskinesia **(Poster Presentation #33)**
Authors: Rimal Bera, M.D., et al.
Date/Time: November 7, from **2:40-3:40 p.m.**

About Major Depressive Disorder
Major depressive disorder (MDD) is a serious disorder characterized by a persistently depressed mood, loss of interest, poor concentration, and decreased energy, among other symptoms. According to the World Health Organization, MDD is one of the leading causes of disability, is a serious condition that presents an increased risk of suicide and self-harm, and is associated with increased all-cause mortality rates. More than 21 million people in the U.S. live with MDD and it is estimated that roughly a third of those do not respond to available antidepressants.

About Schizophrenia
Schizophrenia is a serious and complex syndrome with heterogeneous symptoms. The World Health Organization estimates that the disorder impacts approximately 24 million people worldwide. Annual associated costs for schizophrenia are estimated to be more than $150 billion in the U.S. As one of the leading causes of disability worldwide, it often results in significant emotional and functional burden for those who experience symptoms, as well as their family and friends. This chronic and disabling mental health condition is thought to result from a complex interplay of genetic and environmental risk factors. Traditional treatment approaches for schizophrenia rely on the use of antipsychotic medications that can lead to considerable short- and long-term health impacts.

About Tardive Dyskinesia
Tardive dyskinesia (TD) is a movement disorder that is characterized by uncontrolled, abnormal and repetitive movements of the face, torso, and/or other body parts, which may be disruptive and negatively impact patients. The condition is associated with taking certain kinds of mental health medicines (antipsychotics) that help control dopamine receptors in the brain. Taking antipsychotics commonly prescribed to treat mental illnesses such as major depressive disorder, bipolar disorder, schizophrenia and schizoaffective disorder and other prescription medicines (metoclopramide and prochlorperazine) used to treat gastrointestinal disorders are associated with TD. In patients with TD, these treatments are thought to result in irregular dopamine signaling in a region of the brain that controls movement. The symptoms of TD can be mild to severe and are often persistent and irreversible. TD is estimated to affect at least 800,000 adults in the U.S.

About the KINECT-PRO™ Phase 4 Study
The KINECT-PRO™ Phase 4, open-label study was designed to evaluate patient-reported outcomes on the use of INGREZZA® (valbenazine) capsules in a tardive dyskinesia (TD) patient population reflective of real-world clinical practice. Participants had at least mild TD, were aware of and experiencing at least mild distress from their abnormal, involuntary movements, and had a clinical diagnosis of schizophrenia, schizoaffective disorder, bipolar disorder, or major depression. The KINECT-PRO study included a four-week screening period, a 24-week treatment period during which participants received 40 mg of INGREZZA once-daily for the first four weeks, followed by flexible dosing of 40 mg, 60 mg, or 80 mg once-daily based on individual treatment needs and a two-week safety follow-up period. Baseline socio-demographic and clinical characteristics of the

participants were broadly similar to those of the KINECT® 3 and KINECT® 4 studies.

About the Tardive Dyskinesia Impact Scale
The Tardive Dyskinesia Impact Scale (TDIS™) is a novel, psychometrically validated patient-reported outcome measure in TD. It was developed by Neurocrine Biosciences from qualitative studies and Phase 3 trials of INGREZZA for the treatment of TD (KINECT® 3 and KINECT® 4) as a comprehensive measure of impact and burden of TD from a patient's perspective. The TDIS consists of 11 questions evaluating physical and socio-emotional impact. Six domains are assessed: mouth/throat, dexterity, mobility, pain, social, and emotional. The TDIS allows people with TD to rate how their symptoms affect daily activities and how their uncontrollable movements make them feel. The questionnaire captures relevant information about the impact of TD to provide a more holistic assessment of the condition. Validation of this scale was published in the *Journal of Patient-Reported Outcomes*.

About INGREZZA® (valbenazine) Capsules and INGREZZA® SPRINKLE (valbenazine) Capsules
INGREZZA is a selective vesicular monoamine transporter 2 (VMAT2) inhibitor approved by the U.S. Food and Drug Administration for the treatment of adults with tardive dyskinesia and the treatment of chorea associated with Huntington's disease (HD). Only INGREZZA offers a therapeutic dose from day one with no required titration.

INGREZZA, developed by Neurocrine Biosciences, selectively inhibits VMAT2 with no appreciable binding affinity for VMAT1, dopaminergic (including D2), serotonergic, adrenergic, histaminergic or muscarinic receptors. While the specific way INGREZZA works to treat TD and HD chorea is not fully understood, INGREZZA is unique in that it selectively and specifically targets VMAT2 to inhibit the release of dopamine, a chemical in the brain that helps control movement. INGREZZA is believed to reduce extra dopamine signaling, which may lead to fewer uncontrollable movements.

INGREZZA is studied across the widest range of patients. It is always one capsule, once daily and can be taken together with most stable mental health regimens such as antipsychotics or antidepressants. Only INGREZZA offers the benefit of a sprinkle formulation, INGREZZA SPRINKLE, for those who experience dysphagia, have difficulty swallowing or prefer not to swallow a pill. INGREZZA and INGREZZA SPRINKLE dosages approved for use are 40 mg, 60 mg and 80 mg capsules.

Important Information
Approved Uses
INGREZZA® (valbenazine) capsules or INGREZZA® SPRINKLE (valbenazine) capsules are prescription medicines used to treat adults with:

- movements in the face, tongue or other body parts that cannot be controlled (tardive dyskinesia).
- involuntary movements (chorea) of Huntington's disease. INGREZZA or INGREZZA SPRINKLE do not cure the cause of involuntary movements, and do not treat other symptoms of Huntington's disease, such as problems with thinking or emotions.

It is not known if INGREZZA or INGREZZA SPRINKLE is safe and effective in children.

IMPORTANT SAFETY INFORMATION

INGREZZA or INGREZZA SPRINKLE can cause serious side effects in people with Huntington's disease, including: depression, suicidal thoughts or suicidal actions. Tell your healthcare provider before you start taking INGREZZA or INGREZZA SPRINKLE if you have Huntington's disease and are depressed (have untreated depression or depression that is not well controlled by medicine) or have suicidal thoughts. Pay close attention to any changes, especially sudden changes, in mood, behaviors, thoughts or feelings. This is especially important when INGREZZA or INGREZZA SPRINKLE is started and when the dose is changed. Call your healthcare provider right away if you become depressed, have unusual changes in mood or behavior or have thoughts of hurting yourself.

Do not take INGREZZA or INGREZZA SPRINKLE if you:

- are allergic to valbenazine, or any of the ingredients in INGREZZA or INGREZZA SPRINKLE.

INGREZZA or INGREZZA SPRINKLE can cause serious side effects, including:

- **Allergic reactions.** Allergic reactions, including an allergic reaction that causes sudden swelling called angioedema, can happen after taking the first dose or after many doses of INGREZZA or INGREZZA SPRINKLE. Signs and symptoms of allergic reactions and angioedema include: trouble breathing or shortness of breath, swelling of your face, lips, eyelids, tongue or throat, or other areas of your skin, trouble with swallowing or rash, including raised, itchy red areas on your skin (hives). Swelling in the throat can be life-threatening and can lead to death. Stop taking INGREZZA or INGREZZA SPRINKLE and go to the nearest emergency room right away if you develop these signs and symptoms of allergic reactions and angioedema.

- **Sleepiness and tiredness that could cause slow reaction times (somnolence and sedation).** Do not drive a car or operate dangerous machinery until you know how INGREZZA or INGREZZA SPRINKLE affects you. Drinking alcohol and taking other medicines may also cause sleepiness during treatment with INGREZZA or INGREZZA SPRINKLE.

- **Heart rhythm problems (QT prolongation).** INGREZZA or INGREZZA SPRINKLE may cause a heart rhythm problem known as QT prolongation. You have a higher chance of getting QT prolongation if you also take certain other medicines during treatment with INGREZZA or INGREZZA SPRINKLE. Tell your healthcare provider right away if you develop any signs or symptoms of QT prolongation, including: fast, slow or irregular heartbeat (heart palpitations), shortness of breath, dizziness or lightheadedness or fainting or feeling like you are going to faint.

- **Neuroleptic Malignant Syndrome (NMS).** NMS is a serious condition that can lead to death. Call a healthcare provider right away or go to the nearest emergency room if you develop these symptoms and they do not have another obvious cause: high fever, stiff muscles, problems thinking, irregular pulse or blood pressure, increased sweating or very fast or uneven heartbeat.

- **Parkinson-like symptoms.** Symptoms include: body stiffness, drooling, trouble moving or walking, trouble keeping your balance, shaking (tremors) or falls.

Before taking INGREZZA or INGREZZA SPRINKLE, tell your healthcare provider about all of your medical conditions including if you: have liver or heart problems, are pregnant or plan to become pregnant or are breastfeeding or plan to breastfeed.

Tell your healthcare provider about all the medicines you take, including prescription and over-the-counter medicines, vitamins and herbal supplements. Make sure you tell all of your healthcare providers that you are taking INGREZZA or INGREZZA SPRINKLE. Taking INGREZZA or INGREZZA SPRINKLE with certain other medicines may cause serious side effects. Especially tell your healthcare provider if you: take digoxin or take or have taken a monoamine oxidase inhibitor (MAOI) medicine. You should not take INGREZZA or INGREZZA SPRINKLE if you are taking, or have stopped taking, a MAOI within the last 14 days.

The most common side effects of INGREZZA or INGREZZA SPRINKLE in people with tardive dyskinesia are sleepiness and tiredness.

The most common side effects of INGREZZA or INGREZZA SPRINKLE in people with chorea associated with Huntington's disease include sleepiness and tiredness, raised itchy red areas on your skin (hives), rash and trouble getting to sleep or staying asleep.

These are not all of the possible side effects of INGREZZA or INGREZZA SPRINKLE. Call your doctor for medical advice about side effects. You are encouraged to report negative side effects of prescription drugs to the FDA. Visit MedWatch at **www.fda.gov/medwatch** or call **1-800-FDA-1088.**

Dosage Forms and Strengths: INGREZZA and INGREZZA SPRINKLE are available in 40 mg, 60 mg and 80 mg capsules.

Please see full Prescribing Information including Boxed Warning, and Medication Guide.

About Neurocrine Biosciences, Inc.
Neurocrine Biosciences is a leading biopharmaceutical company with a simple purpose: to relieve suffering for people with great needs. We are dedicated to discovering, developing and commercializing life-changing treatments for patients with under-addressed neurological, psychiatric, endocrine and immunological disorders. The company's diverse portfolio includes FDA-approved treatments for tardive dyskinesia, chorea associated with Huntington's disease, classic congenital adrenal hyperplasia, hyperphagia in Prader-Willi syndrome, endometriosis* and uterine fibroids*, as well as a robust pipeline including multiple compounds in mid- to late-phase clinical development across our core therapeutic areas. For more than three decades, we have applied our unique insight into neuroscience and the interconnections between brain and body systems to treat complex conditions. We relentlessly pursue medicines to ease the burden of debilitating diseases and disorders, because you deserve brave science. For more information, visit neurocrine.com, and follow the company on LinkedIn, X, Facebook and YouTube. (**in collaboration with AbbVie*)

The NEUROCRINE BIOSCIENCES Logo, NEUROCRINE, YOU DESERVE BRAVE SCIENCE, KINECT and INGREZZA are registered trademarks of Neurocrine Biosciences, Inc. TDIS and KINECT-PRO are trademarks of Neurocrine Biosciences, Inc.

Forward-Looking Statements
In addition to historical facts, this press release contains forward-looking statements that involve a number of risks and uncertainties. These statements include, but are not limited to, statements regarding our business strategy, objectives, and future development plans, including the advancement of our psychiatry pipeline and our research in major depressive disorder, schizophrenia, and tardive dyskinesia; our planned presentations and discussions at the 2026 Neuroscience Education Institute (NEI) Fall Congress, and the interpretation and potential relevance of the research and data to be presented; the potential benefits to be derived from our products and products candidates; and the value our products and/or our product candidates may be bring to patients. Factors that could cause actual results to differ materially from those stated or implied in the forward-looking statements, include but are not limited to the following: risks and uncertainties as to whether the findings from the studies and analyses to be presented will be replicated in additional studies or will be predictive of clinical outcomes in subsequent studies or clinical practice; risks and uncertainties associated with our business and finances in general; risks and uncertainties associated with the commercialization of our products; risks related to the development of our product candidates; risks associated with our dependence on third parties for development, manufacturing, and commercialization activities for our products and product candidates, and our ability to manage these third parties; risks that the FDA or other regulatory authorities may make adverse

decisions regarding our products or product candidates; risks that development activities may not be initiated or completed on time or at all, or may be delayed for regulatory, manufacturing, or other reasons, may not be successful or replicate previous clinical trial results, may fail to demonstrate that our product candidates are safe and effective, or may not be predictive of real-world results or of results in subsequent clinical trials; risks that the potential benefits of the agreements with our collaboration partners may never be realized; risks that our products, and/or our product candidates may be precluded from commercialization by the proprietary or regulatory rights of third parties, or have unintended side effects, adverse reactions or incidents of misuse; risks associated with government and third-party regulatory and/or policy efforts which may, among other things, impose sales and pharmaceutical pricing controls on our products or limit coverage and/or reimbursement for our products; risks associated with competition from other therapies or products, including potential generic entrants for our products; risks associated with our ability to manage the growth of our organization; and other risks described in our periodic reports filed with the Securities and Exchange Commission, including our Quarterly Report on Form 10-Q for the quarter ended September 30, 2026. Neurocrine Biosciences disclaims any obligation to update the statements contained in this press release after the date hereof other than as required by law.

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