The article will be cross-posted at Storm King Reports and my old website, the Foundation for Financial Journalism. Disclosure: My funding comes from a revenue-sharing model with a short-seller. (They have no editorial input nor insight, and I don't have any engagement with trading.)

Any responses made will be featured prominently alongside the relative text in the article body

1. My reporting and research suggests that 7% of the 1,447 adverse event entries between 2020-22 reference claims of the Caplyta user experiencing an internal/external burning sensation or body temperature regulation issue. The article additionally references user forums at places like WebMD, Drugs.com and Reddit in which this effect is discussed. Also mentioned is the relative absence of this specific data in established Caplyta competitors like Risperdal, Seroquel and Abilify. Please comment.

2. One MD I interviewed for the article, Dr. David Healy, called this drug-induced peripheral neuropathy. Dr. Healy said that a properly designed and administered clinical trial for Caplyta should have detected at least some of this signal. Please comment.

3. The article discusses the chasm between the number of FDA adverse events claiming the aforementioned burning sensation/PN, and the total absence of this condition in the clinical trials, per the adverse reaction listings on the

schizophrenia and bipolar depression labels. Please comment.

4. Also referenced is the canine and rat neurotoxicity signal the FDA was concerned about, both in the 5/1/17 press release and in the CDER review. Is it fair to say that after three years at least some humans are experiencing elements of this aniline metabolite reaction?