

Relapsing MS

Teva's COPAXONE®

Taking Teva's COPAXONE®

Shared Solutions®

Living With MS



Experience the freedom to...

# Be Bold. Be True. Be You.

Celebrating over a year of 3-times-a-week COPAXONE® 40 mg



Take control with clinically proven results

Make the move

## COPAXONE® Perspectives

Hear what others are saying about 3-times-a-week COPAXONE® 40 mg.



Watch videos

## COPAXONE CO-PAY SOLUTIONS®

If you are eligible, your COPAXONE® 40 mg co-pay could be



[Terms and Conditions](#)

Find out more

Ask me about COPAXONE®...

Meet Claire—  
Your virtual health assistant, support and connection to **Shared Solutions®**

Show Conversation

Voice: **On** Off

### Use:

COPAXONE® (glatiramer acetate injection) is prescription medicine used for the treatment of people with relapsing forms of multiple sclerosis (MS).

### IMPORTANT SAFETY INFORMATION ABOUT COPAXONE®

Do not take COPAXONE® if you are allergic to glatiramer acetate or mannitol.

Some patients report a short-term reaction right after injecting COPAXONE®. This reaction can involve flushing (feeling of warmth and/or redness), chest tightness or pain with heart palpitations, anxiety, and trouble breathing. These symptoms generally appear within minutes of an injection, last about 15 minutes, and do not require specific treatment. During the postmarketing period, there have been reports of patients with similar symptoms who received emergency medical care. If symptoms become severe, call the emergency phone number in your area. Call your doctor right away if you develop hives, skin rash with irritation, dizziness, sweating, chest pain, trouble breathing, or severe pain at the injection site. If any of the

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Chest pain may occur either as part of the immediate postinjection reaction or on its own. This pain should only last a few minutes. You may experience more than one such episode, usually beginning at least one month after starting treatment. Tell your doctor if you experience chest pain that lasts for a long time or feels very intense.

A permanent indentation under the skin (lipoatrophy or, rarely, necrosis) at the injection site may occur, due to local destruction of fat tissue. Be sure to follow proper injection technique and inform your doctor of any skin changes.

The most common side effects in studies of COPAXONE® are redness, pain, swelling, itching, or a lump at the site of injection, flushing, rash, shortness of breath, and chest pain. These are not all of the possible side effects of COPAXONE®. For a complete list, ask your doctor or pharmacist. Tell your doctor about any side effects you have while taking COPAXONE®.

You are encouraged to report negative side effects of prescription drugs to the FDA. Visit [www.fda.gov/medwatch](http://www.fda.gov/medwatch) or call 1-800-FDA-1088.

Please see [full Prescribing Information](#) for Teva's COPAXONE®.

#### RELAPSING MS

- What is Relapsing MS?
- Relapsing MS Symptoms
- Relapsing MS Diagnosis
- Relapsing MS Treatment
- Talk to Your Doctor

#### TEVA'S COPAXONE®

- 3-times-a-week COPAXONE® 40 mg
- Your COPAXONE® Prescription
- Be Proactive About Your Prescription
- A Therapy With Proven Results
- Tolerability Profile
- How Teva's COPAXONE® Works

#### TAKING TEVA'S COPAXONE®

- How to Start
- Preparation
- Injecting with **autoject**®2 for glass syringe
- Injecting with the COPAXONE® Pre-filled Syringe
- Syringe Storage & Disposal
- Injection Tracking

#### SHARED SOLUTIONS®

- Financial Support
- Training and Nurse Support
- Educational Resources
- Virtual Health Assistant

#### LIVING WITH MS

- COPAXONE webTracker™
- COPAXONE® Perspectives
- Video Library
- Resources
- Travel Tips
- Live Event Locator
- Teleconferences
- Insurance FAQ

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**Injections for 3-times-a-week COPAXONE® 40 mg should be at least 48 hours apart.**

†Applies only to daily COPAXONE® 20 mg. Certain limits and restrictions apply.

Terms and Conditions for daily COPAXONE® include: COPAXONE Co-pay Solutions® is open to both new and existing patients who are residents of the US or Puerto Rico and who have commercial prescription insurance coverage for COPAXONE® 20 mg. The offer is not valid for patients covered in whole or in part by Medicaid, Medicare, TRICARE, or any other federal or state government pharmaceutical assistance plan or program (regardless of whether a specific prescription is covered), or by private health benefit programs that reimburse for the entire cost of prescription drugs. Use of this offer must be consistent with the terms of any drug benefit provided by a health insurer, health plan, or private third-party payor. This offer is void in Massachusetts and where otherwise prohibited by law, taxed, or restricted. No additional purchase is required. This offer is valid only at participating pharmacies and may be changed or discontinued at any time without notice. This program is not health insurance.

††Applies only to 3-times-a-week COPAXONE® 40 mg. Certain limits and restrictions apply.

Terms and Conditions for 3-times-a-week COPAXONE® include: COPAXONE Co-pay Solutions® is open to both new and existing patients who are residents of the US or Puerto Rico and who have commercial prescription insurance coverage for COPAXONE® 40 mg. The offer is not valid for uninsured patients or patients covered in whole or in part by Medicaid, Medicare, TRICARE, or any other federal or state government pharmaceutical assistance plan or program (regardless of whether a specific prescription is covered), or by private health benefit programs that reimburse for the entire cost of prescription drugs. Use of this offer must be consistent with the terms of any drug benefit provided by a health insurer, health plan, or private third-party payor. This offer is void in Massachusetts and where otherwise prohibited by law, taxed, or restricted. No additional purchase is required. This offer is valid only at participating pharmacies and may be changed or discontinued at any time without notice. This program is not health insurance.

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