

- **Dosing frequency / less injections / convenient (63%)**

"Equally effective, more frequent frequency."

Rationale for Discussing 20mg and 40mg for First Line Patients

Physicians

Rationale for Discussing 20mg & 40mg

physicians who discuss both 20mg and 40mg
Aug-15 (n=57)

Top Responses

- **Cost / insurance considerations (28%)**
"Because the 40mg dosing may not be an option with insurance coverage"
- **Make sure they have correct / full info (28%)**
"Purely for the completeness of information. Most patients really only think about TIW at that point."
- **I discuss all options / pts need to know options (23%)**
"I think it is important they are well-informed about ALL options, including these two."
- **Dosing frequency / number of injections / convenience (18%)**
"Injection frequency may be an issue."
- **So patient can decide / have preference (9%)**
"To give patient a choice."

What Discussed about 20mg

physicians who discuss both 20mg and 40mg
Aug-15 (n=57)

Top Responses

- **Efficacious (40%)**
"Efficacious but daily."
- **Safe (26%)**
"Proven, safe, efficacious long term, no monitoring but daily injection with significant injection site reactions."
- **Tolerable / few side effects (26%)**
"It is a very safe and effective treatment which is well tolerated."
- **Dosing frequency (26%)**
"Equally effective, more frequent injections."
- **Long data / experience / history / original product (23%)**
"Long term safety and efficacy."
- **Similar/Same as 40 mg (12%)**
"Same medication but different dosage."

What Discussed about 40mg

physicians who discuss both 20mg and 40mg
Aug-15 (n=57)

Top Responses

- **Dosing frequency / less injections / convenient (63%)**
"Equally effective, more convenient frequency."
- **Same medication as 20MG (23%)**
"Similar to 20mg but less injections and therefore likely less reactions."
- **Efficacious (14%)**
"hat it appears to have similar efficacy, but better tolerability."
- **Tolerable / less SE (12%)**
"It's the safest drug and well tolerated."
- **Safe (11%)**
"Good product, safe, known molecule, better schedule, safety of brand product."



C38a: Earlier you mentioned that you typically discuss Daily Copaxone 20mg/mL AND 3-times-a-week Copaxone 40mg/mL with patients initiating their first DMT. Why do you discuss both options? What do you tell your patients about each one? (Open end, responses coded)

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