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Tools, Tips & Support

- My Action Plan
- When Plans Go Awry
- IOP Tracker
- How to Use Drops
- Reminder Service
- Asking for Help
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Savings Card & Other Resources

- Savings Card
- Terms and Conditions

Save up to $1,300 on your Alcon Medication Refills*

Pay as little as $25 for each 30-day supply of prescribed eyedrops from Alcon through December 2013

If you've been prescribed eyedrops, sign up for the OPENINGS™ Patient Support Program today for useful tips, helpful reminders and an opportunity to save money on your Alcon prescription.

You'll receive a welcome kit in the mail that includes our program savings card — which makes it a little easier to stay on track with your prescription. Here's how:

- If you fill your prescription every month: Alcon will pay up to $100 after you pay your first out-of-pocket cost of $25 for each 30-day supply. If you fill your prescription every month, your savings can amount to as much as $1,200 per product. If you fill your prescription every 3 months, your out-of-pocket cost could be as little as $17 per month, per product and your savings can amount to $1,300 per product.
- So, for instance, let's say the pharmacist tells you that you owe $75 for your prescription after accounting for any private insurance you may have, you will be responsible for $25 of the total, and the OPENINGS™ Patient Support Program will cover the rest (a $50 savings).

Click here for savings information if you get your prescription from mail order.

Sign up for your program savings card and other support materials from the OPENINGS Patient Support Program here.

SUBMIT

*Click here for Savings Card Terms and Conditions.

Scroll down or click here for important product safety information.

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*Click here for program Savings Card Terms and Conditions.

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Complete these questions to request or activate your savings card*

Save up to $1,300 on your Alcon prescription(s) when you join the OPENINGS™ Patient Support Program.

1. Please fill in the below required fields:

Month, year of birth: MM/YYYY

Important information about TRAVATAN Z® (travoprost ophthalmic solution) 0.004%

INDICATIONS AND USAGE

TRAVATAN Z® Solution is indicated for the reduction of elevated intraocular pressure (IOP) in patients with open-angle glaucoma or ocular hypertension.

Dosage and Administration

The recommended dosage is one drop in the affected eye(s) once daily in the evening. TRAVATAN Z® Solution should not be administered more than once daily since it has been shown that more frequent administration of prostaglandin analogs may reduce the IOP lowering effect.

TRAVATAN Z® Solution may be used concomitantly with other topical ophthalmic drug products to lower IOP. If more than one topical ophthalmic drug is being used, the drugs should be administered at least five (5) minutes apart.

IMPORTANT SAFETY INFORMATION

Warnings and Precautions

Pigmentation - Travoprost ophthalmic solution has been reported to increase the pigmentation of periorbital tissue (eyelid) and eyelashes. Pigmentation is expected to increase as long as travoprost is administered. After discontinuation of travoprost, pigmentation of the iris is likely to be permanent, while pigmentation of the periorbital tissue and eyelash changes have been reported to be reversible in some...

Important information about AZOPT® (brinzolamide ophthalmic suspension) 1%

INDICATIONS AND USAGE

AZOPT® Suspension is a carbonic anhydrase inhibitor (CAI) indicated in the treatment of elevated intraocular pressure in patients with ocular hypertension or open-angle glaucoma.

Dosage and Administration

The recommended dose is one drop of AZOPT® Suspension in the affected eye(s) three times daily. If more than one topical ophthalmic drug is being used, the drugs should be administered at least ten (10) minutes apart.

IMPORTANT SAFETY INFORMATION

Contraindications

AZOPT® Suspension is contraindicated in patients who are hypersensitive to any component of this product.

Warnings and Precautions

Sulfonamide Hypersensitivity Reactions - AZOPT® Suspension is a sulfonamide and although administered topically it is absorbed systemically. The same types of adverse reactions that are attributable to sulfonamides may occur with topical administration of AZOPT® Suspension. Fatalities have occurred, although rarely, due to severe reactions to sulfonamides. Sensitization may recur when a sulfonamide is re-administered irrespective of the route of administration. If signs of serious reactions or hypersensitivity occur, discontinue...

Important information about SIMBRINZA™ (brinzolamide/brimonidine tartrate ophthalmic suspension) 1%/0.2%

INDICATIONS AND USAGE

SIMBRINZA™ Suspension is indicated in the reduction of elevated intraocular pressure (IOP) in patients with open-angle glaucoma or ocular hypertension.

Dosage and Administration

The recommended dose is one drop of SIMBRINZA™ Suspension in the affected eye(s) three times daily. Shake well before use. SIMBRINZA™ Suspension may be used concomitantly with other topical ophthalmic drug products to lower intraocular pressure. If more than one topical ophthalmic drug is being used, the drugs should be administered at least five (5) minutes apart.

IMPORTANT SAFETY INFORMATION

Contraindications

SIMBRINZA™ Suspension is contraindicated in patients who are hypersensitive to any component of this product and neonates and infants under the age of 2 years.

Warnings and Precautions

Sulfonamide Hypersensitivity Reactions - Brinzolamide is a sulfonamide, and although administered topically, is absorbed systemically. Sulfonamide attributable adverse reactions may occur. Fatalities have occurred due to severe reactions to sulfonamides. Sensitization may recur when a sulfonamide is readministered irrespective of the...

gradually change eyelashes and vellus hair in treated eye. These changes include increase thickness, and number of lashes. Eyelash ch usually reversible upon discontinuation of tr

Intraocular Inflammation - TRAVATA should be used with caution in patie intraocular inflammation (e.g., uveit inflammation may be exacerbated.

Macular Edema - Macular edema, i macular edema, has been reported with travoprost ophthalmic solution. Solution should be used with cautio patients, in pseudophakic patients lens capsule, or in patients with know macular edema.

Angle-closure, Inflammatory or Neo TRAVATAN Z® Solution has not bee treatment of angle-closure, inflamma glaucoma.

Bacterial Keratitis - There have been reports of bacterial keratitis associated with the use of multiple-dose containers of topical ophthalmic products. These containers had been inadvertently contaminated by patients who, in most cases, had a concurrent corneal disease or a disruption of the ocular epithelial.

Use with Contact Lenses - Contact lenses should be removed prior to instillation of TRAVATAN Z® So and may be reinserted 15 minutes following its administration.

Adverse Reactions
The most common adverse reaction observ controlled clinical studies with TRAVATAN was ocular hyperemia which was rep of patients. Up to 3% of patients dis due to conjunctival hyperemia. Ocu reported at an incidence of 5 to 10% studies included decreased visual a discomfort, foreign body sensation, postmarketing use with prostaglan periorbital and lid changes including eyelid sulcus have been observed.

Use in Specific Populations
Use in pediatric patients below the a not recommended because of poten related to increased pigmentation fo chronic use.

Click here for full prescribing information for TRAVATAN® Z Solution

in patients with low endothelial cell c should be used when prescribing AZ to this group of patients.

Severe Renal Impairment - AZOPT® ot been studied in patients with sev airment (CrCl < 30 mL/min). Because AZOPT pension and its metabolite are excreted primarily by the kidney, AZOPT® Suspension is recommended in such patients.

Angle-Closure Glaucoma - The management of ts with acute angle-closure glaucoma requires ditional interventions in addition to ocular hypotensive agents. AZOPT® Suspension has not been studied in patients with acute angle-closure glaucoma.

Contact Lens Wear - The preservative in AZOPT® Suspension, benzalkonium chloride, may be absorbed by soft contact lenses. Contact lenses should be removed during instillation, but may be reinserted 15 minutes after instillation.

Adverse Reactions
In clinical studies of AZOPT® Suspension, the most frequently reported adverse events reported in 5-10% of patients were blurred vision and bitter, sour or unusual taste. Adverse events occurring in 1-5% of patients were blepharitis,dermatitis, dry eye, foreign body sensation, headache, hyperemia, ocular discharge, ocular discomfort, ocular keratitis, ocular pain, ocular pruritus and rhinitis.

Drug Interactions
Oral Carbonic Anhydrase Inhibitors - There is a potential for an additive effect on the known systemic effects of carbonic anhydrase inhibition in patients receiving an oral CAI and AZOPT® Suspension. The concomitant administration of AZOPT® Suspension and oral CAIs is not recommended.

-Dose Salicylate Therapy - In patients treated with CAIs, rare instances of acidbase alterations have rted with high-dose salicylate therapy. Therefore, otential for such drug interactions should be dered in patients receiving AZOPT® Suspension.

ick here for full prescribing information for AZOPT® Suspension

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Severe Cardiovascular Disease - Brimonidine tartrate, a component of SIMBRINZA™ Suspension, had a less than 5% mean decrease in blood pressure 2 hours after dosing in clinical studies; caution should be exercised in treating patients with severe cardiovascular disease.

Potentiation of Vascular Insufficiency - Brimonidine tartrate, a component of SIMBRINZA™ Suspension, may potentiate syndromes associated with vascular insufficiency. It should be used with caution in patients with depression, cerebral or coronary insufficiency, Raynaud's phenomenon, orthostatic hypotension, or thromboangiitis obliterans.

Contamination of Topical Ophthalmic Products After Use - There have been reports of bacterial keratitis associated with the use of multiple-dose containers of topical ophthalmic products. These containers have been inadvertently contaminated by patients who, in most cases, had a concurrent corneal disease or a disruption of the ocular epithelial surface.

Adverse Reactions
SIMBRINZA™ Suspension
In two clinical trials of 3 months' duration with SIMBRINZA™ Suspension, the most frequent reactions associated with its use occurring in approximately 3-5% of patients in descending order of incidence included: blurred vision, eye irritation, dysgeusia (bad taste), dry mouth, and eye allergy. Adverse reaction rates with SIMBRINZA™ Suspension were comparable to those of the individual components. Treatment discontinuation, mainly due to adverse reactions, was reported in 11% of SIMBRINZA™ Suspension patients.

Brinzolamide 1%
In clinical studies of brinzolamide ophthalmic suspension 1%, the most frequently reported adverse events reported in 5-10% of patients were blurred vision and bitter, sour, or unusual taste. Adverse events occurring in 1-5% of patients were blepharitis, dermatitis, dry eye, foreign body sensation, headache, hyperemia, ocular discharge, ocular discomfort, keratitis, ocular pain, ocular pruritus, and rhinitis.

Brimonidine Tartrate 0.2%
In clinical studies of brimonidine tartrate 0.2%, adverse events occurring in approximately 10-30% of the subjects, in descending order of incidence, included oral dryness, ocular hyperemia, burning and stinging, headache, blurring, foreign body sensation, fatigue/drowsiness, conjunctival follicles, ocular allergic reactions, and ocular pruritus.

Events occurring in approximately 3-9% of the subjects, in descending order, included corneal staining/erosion, photophobia, eyelid erythema, ocular ache/pain, ocular dryness, tearing, upper respiratory symptoms, eyelid edema, conjunctival edema, dizziness, blepharitis, ocular irritation, gastrointestinal symptoms, asthenia, conjunctival blanching, abnormal vision, and muscular pain.

- Parent
- Child
- Grandparent
- Friend

depressants may result in an additive or potentiating effect. Use with antihypertensives/cardiac glycosides may result in additive or potentiating effect on lowering blood pressure. Use with tricyclic antidepressants may blunt the hypotensive effect of systemic clonidine and it is unknown if use with this class of drugs interferes with IOP lowering. Use with monoamine oxidase inhibitors may result in increased hypotension.

- Spouse/Life Partner
- Sibling
- Other Relative
- My Patient

If you are researching on behalf of someone else, please enter the remaining information as if you were the patient.

Click here for important information for **SIMBRINZA™ Suspension**

You are encouraged to report neg… …otion drugs to the FDA. Visit www.fda.gov/medwatch, or call 1-800-FDA-1088.

Site Map Contact Us

Other Alcon informational websites: Dry eye Eye vitamins Allergy eyes Na… …pray Ear infection treatment Cataract surgery Intraocular lens Contact lens solution Eye infection treatment

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5. Which statement best describes you:

- I have been diagnosed with glaucoma and/or high intraocular pressure (IOP)
- I have not been diagnosed with glaucoma and/or high intraocular pressure (IOP) but am interested in learning more

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6. Which of the following methods has your doctor used or is planning to use, to manage your glaucoma and/or high intraocular pressure (IOP or eye pressure)?

- Prescription eyedrops

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- Yes
- Yes, and I have a future surgery scheduled
- No, but I am considering it
- No

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8. What type of glaucoma surgery?

- Laser Surgery–performed in your doctor's office
- Filtration Surgery– a procedure in the operating room where you have a raised bleb (similar to a blister) on the white part of your eye, sometimes called trabeculectomy
- Tube shunt – the doctor has placed a tube in your eye that drains to a plastic chamber that is placed under the muscles of the eye
- Surgery done at the time of cataract surgery that is done from the inside of your eye
- Other
- Don't know

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9. Which of the following prescription eyedrops are you on:

- TRAVATAN Z® (travoprost ophthalmic solution) 0.004%
- AZOPT® (brinzolamide ophthalmic suspension) 1%
- SIMBRINZA™ (brinzolamide/brimonidine tartrate ophthalmic suspension) 1%/0.2%
- Other prescription eyedrop(s) to control your eye pressure:
  - I am currently taking one other prescription eyedrop
  - I am currently taking two or more other prescription eyedrops

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10. How long ago did you first start your eye drops (including any samples you received in the doctor's office) to treat your high eye pressure?

- ○ Under 6 months
- ○ 4 to 12 months
- ○ 1-5 years
- ○ 5+ years

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11. Do you currently get your prescriptions through a state or federal program that provides prescription drug benefits, including Medicare Part D and Medicaid?

- ○ Yes
- ○ No

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