



Shared Solutions®

Teleconference Report

Stacia D.,
on COPAXONE®
since 2002

Getting a full night's rest

Presented by **Dr. Glen Ackerman**, Clinical Associate Professor, Department of Neurology, Michigan State University; Neurology Consultants, P.C. and **Larissa N.**, MS Peer

Dr. Glen Ackerman and **Larissa N.** discussed the importance of sleep, how multiple sclerosis symptoms may affect your sleep, and tips for getting a full night's rest. One study showed that 36% of MS patients experienced some form of sleep disorder.¹



Sleep: Your mind and body rejuvenator

- Most adults require 7 to 8 hours of sleep per night²
- A good night's rest is important for proper physical and mental repair and development³
- Sleep deprivation can deprive you of your quality of life

MS symptoms that may contribute to sleep disorders

- Both physical and emotional symptoms of MS may contribute to sleep disorders
 - Bladder or bowel disorders causing frequent trips to the bathroom during the night
 - Spasticity: the feeling of stiffness and involuntary muscle spasms interfering with sleep
 - Leg movements or jerks that typically occur every 20 to 40 seconds during the night
 - Depression, anxiety, and stress
- Consult with your doctor to discuss possible medications and other strategies that will help manage your MS symptoms and let you rest easier

Tips for getting the sleep you need

- Avoid eating heavy meals at night, and reduce fluid intake in the evening
- Relax your mind, and try to avoid dwelling on the day's activities or tomorrow's plans
- Make yourself comfortable with the right pillow, room temperature, and night clothes
- If you don't fall asleep within 10 to 15 minutes, get up and do something active: read, work on a puzzle, write a letter, etc

You may be reassured to know that COPAXONE® (glatiramer acetate injection) is the only relapsing-remitting MS (RRMS) therapy that is not associated with increases in treatment-related fatigue or depression.^{4,7}



Shared Solutions®

Teleconference Report

Stacia D.,
on COPAXONE®
since 2002

Highlights from the Annual Meeting of the Consortium of MS Centers (CMSC)

Presented by **June Halper**, MSN, ANP, FAAN, Executive Director of the Gimbel MS Center, Teaneck, NJ and **Sue K.**, MS Peer

June Halper and **Sue K.** discussed this year's meeting of the CMSC (the largest professional MS organization in the world), which focused on comprehensive approaches to the complex challenges of MS. Topics included the following:



The importance of early treatment

- Data were presented to reinforce the importance of starting on therapy right away and staying on it over the long term—as well as information supporting early intervention in treating MS symptoms
- Numerous studies confirm that damage to axons and neurons can occur early in the MS disease process, suggesting that even early relapses that appear benign may have permanent neurologic consequences⁸
- These findings strengthen the argument for early intervention with a disease-modifying agent⁸

New research supports the prescribed daily regimen of COPAXONE®

- Teva Neuroscience, Inc. analyzed a database of more than 800 people who were prescribed COPAXONE® (glatiramer acetate injection)⁹
 - The result: the more compliant people were when taking their COPAXONE® therapy, the lower their possibility was of having a relapse

A team approach to MS management

- Optimal disease management requires a team approach
 - A core health care team that includes neurologists, physical therapists, nurses, and CarePartners
 - Comprehensive care, including patient education, wellness visits, rehabilitation, support groups, and counseling
 - Support from MS advocacy organizations such as the National Multiple Sclerosis Society (NMSS) and local support networks such as **Shared Solutions®**



Shared Solutions®

Teleconference Report

Stacia D.,
on COPAXONE®
since 2002

The role of MRI today

Presented by **Dr. Robert Fox**, Staff Neurologist and Medical Director, Mellen Center for Multiple Sclerosis, Cleveland Clinic and **Lee G.**, MS Peer

Dr. Fox and **Lee G.** discussed magnetic resonance imaging (MRI): what it is, what it measures, its importance, and exciting new MRI measures that are emerging in the field.



What is MRI?

- A noninvasive technique for showing signs of neurologic disorders in the brain and spinal cord
- It uses a high-strength magnet, rather than radiation, to produce high-resolution images of soft tissue structures within the body
- It is a safe technique that can be repeated at frequent intervals

The importance of MRI

- MRI is a powerful tool in helping to establish a diagnosis of MS; it can track the progress of the disease and determine whether a patient is responding to therapy
- There are currently no set guidelines for when to perform MRIs, so talk to your doctor about what MRI schedule may be appropriate for you

Emerging MRI measures

- Brain atrophy
 - Research has shown that MS can cause the brain to atrophy, or shrink, through loss of tissue
 - This MRI measures tissue loss and a reduction in volume of brain white or gray matter, including axons and myelin¹⁰
 - Brain atrophy has a strong correlation with MS-related disability¹¹⁻¹³
- In a recent 5-year open-label imaging study of 255 patients, COPAXONE® (glatiramer acetate injection) was shown to reduce brain atrophy more than interferon therapy^{14,15}



Upcoming

Teleconferences

Get connected at
1-800-823-1880

Our free monthly teleconferences offer advice on a variety of MS issues. We'll even be happy to remind you to call in before the teleconference starts. Just call 1-800-823-1880 today to set up your reminder call. Here's a list of some of the upcoming topics:

Getting the most from your office visit

October 28 at 8:00 PM ET, 5:00 PM PT

October 29 at 9:00 PM ET, 6:00 PM PT

Richard Blanck, MD

Clinical Associate Professor of Neurology,

New York University

Neurological Associates of Long Island

Laura K., MS Advocate

Managing MS as partners

November 18 at 8:00 PM ET, 5:00 PM PT

November 19 at 9:00 PM ET, 6:00 PM PT

Andrea and Paul L.

MS Advocates

Nashville, TN

Update from Shared Solutions®

December 16 at 8:00 PM ET, 5:00 PM PT

December 17 at 9:00 PM ET, 6:00 PM PT

Michelle B., RN, BSN, MSCN

MS-certified Nurse,

Shared Solutions®,

Therapy Information Specialist

Shawna H., RN, MSCN,

Teva Neuroscience, Inc.,

Kansas City, MO

COPAXONE®
(glatiramer acetate injection)



References: 1. Long L. Revealing the uncommon symptoms of multiple sclerosis. Multiple Sclerosis Association of King County Web site. http://www.msac.org/articles/uncommonsymptoms_ofms.htm. Accessed June 12, 2008. 2. Sleep disorders: sleep 101. WebMD Web site. <http://www.webmd.com/content/article/105/107660.htm>. Accessed June 12, 2008. 3. Larson H, Kemp G, Segal R. Getting the sleep you need: sleep stages, sleep tips and aids. Helpguide Web site. <http://www.helpguide.org/life/sleeping.htm>. Updated June 3, 2008. Accessed June 12, 2008. 4. Avonex® prescribing information, 11/06. Biogen Idec Inc. 5. Betaseron® prescribing information, 10/07. Bayer HealthCare Pharmaceuticals Inc. 6. Rebif® prescribing information, 4/08. EMD Serono, Inc. 7. COPAXONE® prescribing information, 11/07. Teva Neuroscience, Inc. 8. Disease management consensus statement summary. National Multiple Sclerosis Society Web Site. <http://www.nationalmssociety.org/download.aspx?id=8>. Accessed July 24, 2008. 9. Castelli-Haley J, Oleen-Burkey MA, Lage MJ. Poster presented at: 10th Annual European Congress of the International Society for Pharmacoeconomics and Outcomes Research; October 20-23, 2007; Dublin, Ireland. 10. King M. Bright spots and black holes: what doctors are learning from advanced MRI. Inside MS. 2002;Oct-Dec. Find Articles.com Web site. http://www.findarticles.com/p/articles/mi_m0850/is_4_20/I_9404948?tag=artBody;col1. Accessed August 20, 2008. 11. Barkhof F. *Neurology*. 2004;251(suppl 4):IV/6-IV/12. 12. Miller DH, Barkhof F, Frank JA, et al. *Brain*. 2002;125:1676-1695. 13. Fisher E, Rudick RA, Simon JH, et al. *Neurology*. 2002;59:1412-1420. 14. Khan O, Mackenzie M, Bao F, et al. Abstract presented at: 23rd Congress of the European Committee for Treatment and Research in Multiple Sclerosis; October 11-14, 2007; Prague, Czech Republic. 15. Data on file. Teva Neuroscience, Inc.

You are encouraged to report negative side effects of prescription drugs to the FDA. Visit www.fda.gov/medwatch, or call 1-800-FDA-1088.

Please see additional important information for COPAXONE® on this site.



COPAXONE® is a registered trademark of Teva Pharmaceutical Industries Ltd. Shared Solutions® is a registered trademark of Teva Neuroscience, Inc.

© 2008 Teva Neuroscience, Inc.

086213416/081520