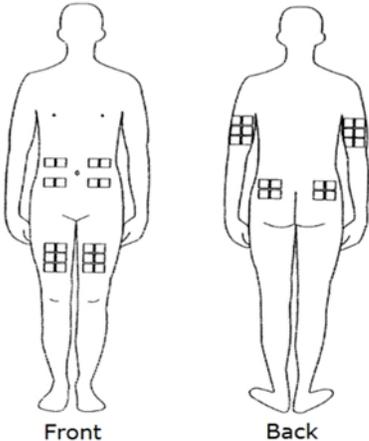


**Glatiramer Acetate**  
(Copaxone®, Glatopa®)

Patient Information

Updated: 10.2019

<p><b>USED FOR</b></p>	<ul style="list-style-type: none"> <li>Relapsing-remitting forms of multiple sclerosis (MS)</li> <li>Glatiramer acetate will not cure MS. It may prevent and reduce the number of flare-ups.</li> </ul>
<p><b>HOW IT WORKS</b></p>	<ul style="list-style-type: none"> <li>Glatiramer acetate consists of 4 naturally occurring amino acids thought to modify the immune processes responsible for injury to the nervous system from MS.</li> </ul>
<p><b>HOW IT IS SUPPLIED</b></p> 	<ul style="list-style-type: none"> <li>Glatiramer acetate comes in a single-dose prefilled syringe with an auto-injector</li> <li>Both Copaxone and Glatopa (a generic version of Copaxone) come in 20mg and 40mg syringes</li> </ul> 
<p><b>DOSE</b></p>	<ul style="list-style-type: none"> <li>There are two dosing options for taking Glatiramer acetate. You and your MS doctor can talk about which routine works best for you.</li> <li>20 mg injected under the skin daily (once every 24 hours)</li> <li>40 mg injected under the skin three times weekly (separated by at least 48 hours or you can choose to inject on Mondays, Wednesdays, Fridays)</li> </ul>
<p><b>HOW IT IS GIVEN</b></p>	<ul style="list-style-type: none"> <li>Glatiramer acetate is injected into fatty area just under the skin in the areas shown to the right.</li> <li>Rotate injection sites to avoid skin reactions.</li> </ul> 

STORAGE AND HANDLING	<ul style="list-style-type: none"> <li>When not used, glatiramer acetate should be stored in the refrigerator.</li> <li>If refrigeration is not possible, glatiramer acetate may be stored protected from light up to 30°C (86°F) for up to 30 days.</li> <li>Safely dispose of used syringes in a sharps container</li> </ul>	
DRUG INTERACTIONS	<ul style="list-style-type: none"> <li>There are no known drug interactions with glatiramer acetate</li> </ul>	
COMMON SIDE EFFECTS	<ul style="list-style-type: none"> <li>Injection site skin reactions may occur (redness, pain, swelling, itching, lumps) and permanent skin indentations are irreversible.</li> <li>Rarely, an immediate post-injection reaction may happen, but resolve quickly within 15 minutes. <ul style="list-style-type: none"> <li>⇒ May include flushing, chest pain, heart palpitations, anxiety, and trouble breathing.</li> </ul> </li> </ul>	
MONITORING	<ul style="list-style-type: none"> <li>You should always check your skin for changes at the injection site.</li> <li>Monitor for any chest pain, difficulty breathing, or flushing.</li> <li>Blood work is not required for glatiramer acetate.</li> </ul>	
MORE INFORMATION	<ul style="list-style-type: none"> <li>Websites: <a href="http://www.copaxone.com">www.copaxone.com</a>, <a href="http://www.nationalmssociety.org">www.nationalmssociety.org</a></li> <li>Clinical Trials: <ul style="list-style-type: none"> <li>Johnson KP, et al. Neurology. 1995;45:1268-76</li> </ul> </li> </ul>	