



A Dream Back On Track

(NAPSA)—There is encouraging news for the 400,000 Americans who are diagnosed with multiple sclerosis (MS), an autoimmune disease affecting the central nervous system. Medication makes it possible for patients to manage the potentially debilitating disease and help regain control of their lives.

It took Timothy Garrett a long time to come to terms with the diagnosis of relapsing-remitting MS (RRMS) he received in 1989. At first he was overcome with a sense of hopelessness, not knowing how the diagnosis would affect his ability to work and pursue his dream of building and flying his own airplane.

Shortly after his diagnosis, Garrett began treatment with an interferon beta (IFN- β) therapy, Betaseron, but after several years he developed neutralizing antibodies (NABs), which may interfere with—or neutralize—the activity of IFN- β therapies, and his symptoms began to worsen.

“In 2000, after testing positive for NABs, my doctor recommended Copaxone (glatiramer acetate injection), a noninterferon therapy, which is not associated with the development of NABs,” said Garrett.

In November 2006, after spending over 1,800 hours building his airplane, his dream came true—he took his plane for its first flight. “When I was diagnosed with MS, I lost power and control—the power of my dreams and control of my life,” said Garrett. “While everyone responds differently to treatment, with the help of my daily injection of Copaxone, healthy diet and exercise, I have regained the power of my dreams and control to proactively manage my disease and live my dream of planning, building and flying my aircraft.”

While individual results may vary, after more than six years on Copaxone, Garrett’s magnetic reso-



Medications are making it possible for people with MS to realize their dreams and live active lives.

nance imaging (MRI) tests showed that his disease had not worsened. Because Garrett was feeling so well, he decided to see if his body could fight the disease without therapy, but instead with a strict organic diet, increased exercise and an even stronger positive attitude. Unfortunately, a six-month follow-up MRI confirmed three new lesions on his brain during the time he was off the treatment. After talking with his neurologist about the disappointing test results, Garrett resumed treatment with Copaxone and has had no new lesions since.

“Now, I know I need to stay on therapy even though I feel okay,” said Garrett. To those who are on a therapy and are considering stopping it, he suggests talking with your neurologist and discussing all of your options. “My goal is to inspire those affected by MS not to give up,” said Garrett. “I now understand the importance of proactively managing my disease so that I can continue to live my dream.”

Copaxone® is indicated for the reduction of the frequency of relapses in relapsing-remitting multiple sclerosis.

Call (800) 887-8100 or visit www.copaxone.com for more information about Copaxone or multiple sclerosis.

*Note to Editors: **Important Safety Information:** The most common side effects of Copaxone® are redness, pain, swelling, itching, or a lump at the site of injection, flushing, chest pain, weakness, infection, pain, nausea, joint pain, anxiety and muscle stiffness. These reactions are usually mild and seldom require professional treatment. Patients should tell their doctor about any side effects. Some patients report a shortterm 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 go away by themselves without further problems. A permanent indentation under the skin at the injection site may occur, due to a local destruction of fat tissue. Patients should follow proper injection technique and inform their doctor of any skin changes. After injecting Copaxone®, patients should call their doctor right away if they develop hives, skin rash with irritation, dizziness, sweating, chest pain, trouble breathing, severe pain at the injection site or other uncomfortable changes in their general health. Patients should not give themselves any more injections until their doctor tells them to begin again. 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. Teva Neuroscience, Inc. markets Copaxone®. Copaxone® is a registered trademark of Teva Pharmaceutical Industries Ltd. Teva Neuroscience, Inc. is a subsidiary of Teva Pharmaceutical Industries Ltd. See additional important information at <http://www.copaxone.com/pi/index.html> or call 1 800-887-8100. Please see enclosed additional important information.*