

*The medical uses of BOTOX<sup>®</sup>*

*More than  
skin deep*

 **BOTOX<sup>®</sup>**  
Botulinum Toxin Type A

# *The medical uses of BOTOX<sup>®</sup>* *(Botulinum Toxin Type A)*

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# What is BOTOX®?

You may have heard of BOTOX® Cosmetic. But as you will learn in this brochure, the BOTOX® story is more than skin deep.

BOTOX® (Botulinum Toxin Type A) is an effective therapy that has been used to treat patients for a variety of conditions for more than 18 years. One of the most researched medicines in the world, BOTOX® treatment is approved for medical use in more than 75 countries.

First identified in the 1890s, BOTOX® is a purified protein that comes from the bacterium *Clostridium botulinum*. In slightly more than 100 years, our knowledge of botulinum toxin type A has expanded from the identification of the bacterium *C. botulinum* to the commercialization of botulinum toxin type A, as BOTOX® therapy.

In 1989, BOTOX® neurotoxin was approved by the Food and Drug Administration (FDA) for the treatment of blepharospasm (clenched eyelids) and strabismus (crossed or misaligned eyes). In 2000, the FDA approved BOTOX® for the treatment of uncontrollable muscle tightening



or turning in the neck, known as cervical dystonia. Another milestone in the history of BOTOX® was its approval in 2004 to treat severe underarm sweating unresponsive to topical agents. The same formulation used to treat frown lines between the eyes was approved in 2002 as BOTOX® Cosmetic.

BOTOX® is different from other treatment options available to physicians and is made *only* by Allergan—a global specialty pharmaceutical and medical device company offering innovative products in more than 100 countries. BOTOX® treatment is produced under strict quality control standards by Allergan and is to be administered to patients only by licensed doctors.

*Every drug approved by the FDA has product safety information for doctors and for patients. The highlighted gold sections in this brochure contain information about BOTOX® treatment, as well as detailed information about the drug itself. If you have any questions or concerns about any of the information contained in these sections, please do not hesitate to ask your doctor.*

**BOTOX® is approved for the treatment of cervical dystonia in adults to decrease the severity of abnormal head position and neck pain associated with cervical dystonia.**

[www.BOTOXMedical.com](http://www.BOTOXMedical.com)

## How BOTOX<sup>®</sup> neurotoxin treatment works

When you experience muscle spasms and the associated pain of cervical dystonia, it is because your nerve cells are sending signals directly to your muscles, which cause these effects. BOTOX<sup>®</sup> (Botulinum Toxin Type A) treatment works by blocking these signals, which prevents the release of a substance known as *acetylcholine*.<sup>1</sup> Too much acetylcholine causes your muscles to become overactive and tense up. With BOTOX<sup>®</sup>, muscle spasms may stop or become greatly reduced, resulting in relief.<sup>1</sup> There is also evidence from a study of patients that shows BOTOX<sup>®</sup> treatment may significantly reduce pain even before it achieves a significant muscle relaxation effect.<sup>2</sup>

Please discuss with your doctor any questions you may have about your treatment.

BOTOX<sup>®</sup> is approved for the treatment of strabismus (crossed eyes) and blepharospasm (eyelid spasms) associated with dystonia (muscle tightening), including benign essential blepharospasm or VII nerve disorders in patients 12 years of age and above.

The efficacy of BOTOX<sup>®</sup> treatment in deviations over 50 prism diopters, in restrictive strabismus, in Duane's syndrome with lateral rectus weakness, and in secondary strabismus caused by prior surgical over-recession of the antagonist has not been established. BOTOX<sup>®</sup> is ineffective in chronic paralytic strabismus except when used in conjunction with surgical repair to reduce antagonist contracture.

*BOTOX<sup>®</sup> works by stopping nerves from releasing acetylcholine, a substance that transmits signals from nerves to muscles.*



*The signals that can cause muscle contractions and pain reach muscles through the nerves.*



*BOTOX<sup>®</sup> neurotoxin works in the muscle where it is injected to block signals that tell the muscle to contract.*



*As a result, muscle spasms stop or are greatly reduced, resulting in relief, which may last up to 3 months.*

# *What to expect from your BOTOX® treatment*

Once you and your doctor have determined that BOTOX® (Botulinum Toxin Type A) is right for you, your treatment will consist of a number of injections into the muscles selected by your doctor. BOTOX® injections will be given right in your doctor's office. The amount of BOTOX® and the locations of the injections will depend on your individual needs. You may have mild and temporary pain, tenderness, and/or bruising at the injection sites.

Because BOTOX® neurotoxin is injected directly into your affected muscles, it is not expected to be present in your bloodstream after injection at the recommended dosage. You should be able to leave your doctor's office after a brief recovery period.

How long does it take to see results? Not long at all. You may begin seeing an improvement in your symptoms within a few days (a few weeks for some conditions) of BOTOX® treatment and you may not have to visit your doctor for another injection for up to 3 months.



*BOTOX® injections are given right in your doctor's office.*

## **Important Safety Information**

### **Who should not be treated with BOTOX®**

BOTOX® injections should not be given to people who have an infection where the physician proposes to inject. They should not be given to people who are known to be sensitive to any ingredient in the BOTOX® product.

*You may begin seeing positive effects within a few days of BOTOX® treatment, and you may not have to visit the doctor for another injection for up to 3 months.*

*Please talk to your doctor about any prescription and over-the-counter medications you may be taking for other medical conditions.*

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# *Frequently asked questions about BOTOX® treatment*

## ***Does BOTOX® treatment hurt?***

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The needles used to administer BOTOX® (Botulinum Toxin Type A) treatment are very fine, so most people experience only mild discomfort. It is uncommon for pain relief to be required, although some doctors suggest the use of a topical anesthetic cream before treatment.

## ***Is BOTOX® Cosmetic the same as BOTOX®?***

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Yes. BOTOX® Cosmetic and BOTOX® are the same formulation. BOTOX® neurotoxin is one of the most widely researched medicines in the world and has been used for more than 18 years to effectively treat a variety of medical conditions. The same formulation with dosing specific to glabellar lines (frown lines between the brows) was approved in 2002 as BOTOX® Cosmetic.

## ***Is it safe to get repeated injections of BOTOX®?***

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BOTOX® treatment is FDA approved for repeat injections. Patients around the world receive repeated injections of BOTOX® neurotoxin to effectively treat a variety of medical conditions.

## ***Are there other treatments that are as effective as BOTOX® treatment?***

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BOTOX® is different from other therapies available to your physician. It has a unique formulation and mechanism of action that effectively stop muscle contractions and relieves pain in CD patients.

## ***Is it true that some patients do not always have the same response to repeated BOTOX® injections?***

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There are many factors that impact the results of BOTOX® treatment. A very small percentage of people develop immunity to BOTOX®. Other factors that impact results include the accuracy of injections, dosing, and changes in patients' conditions over time.

## ***How do I know that I am receiving BOTOX® treatment and not a substitute product?***

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BOTOX® is a registered trademark of Allergan, Inc. The BOTOX® product is packaged in a glass vial with a purple lid labeled as BOTOX® and has an Allergan hologram on the side. You may want to ask your injector to see the vial to confirm that this is the product he or she is using for your treatment.

# ***BOTOX® treatment and your insurance coverage***

## ***BOTOX® Reimbursement Solutions***

Many insurance plans, including Medicare and Medicaid, cover the cost of BOTOX® (Botulinum Toxin Type A) treatment for certain conditions. Allergan, the maker of BOTOX®, has made a service available to you and your doctor to determine if your plan covers the cost of BOTOX® treatment. The program is called **BOTOX® Reimbursement Solutions**, and our representatives are specially trained to help resolve BOTOX® insurance issues, answer questions, and file claims.

For more information about BOTOX® Reimbursement Solutions, call 1-800-44-BOTOX, Option 4. The hours are Monday through Friday, 9 AM to 8 PM, EST.

## ***Cervical Dystonia Fund***

If you are an eligible cervical dystonia patient, you may qualify for assistance from the Cervical Dystonia Fund. This program helps patients who are insured but unable to afford the out-of-pocket costs associated with any FDA-approved treatment for cervical dystonia. To receive help from the Cervical Dystonia Fund, you must:

- Meet certain criteria established by the National Organization for Rare Disorders (NORD) such as insurance criteria, financial needs, and medical needs
- Be a resident of the United States or Puerto Rico

For more information, call 1-800-44-BOTOX, Option 6.

## ***BOTOX PATIENT ASSISTANCE® Program***

The BOTOX PATIENT ASSISTANCE® Program is dedicated to helping financially eligible patients. There are certain financial and other requirements that you must meet in order to qualify for the program. You may qualify if you do not have insurance or if your insurance is not sufficient to meet your medical needs.

To receive help from the BOTOX PATIENT ASSISTANCE® Program, you must:

- Be uninsured or underinsured
- Have income less than or equal to 300% of the Federal Poverty Level. This is a figure defined by the US Federal Poverty Guidelines and is adjusted based on the number of household members. For more information, please visit <http://aspe.hhs.gov/poverty>
- Have a diagnosis supported by clinical studies that validate the use of BOTOX®
- Be a resident of the United States or Puerto Rico

If you think you may be eligible for the BOTOX PATIENT ASSISTANCE® Program, visit our Web site at [www.BOTOXPatientAssistance.com](http://www.BOTOXPatientAssistance.com) to get more information or to download an application. You may also call us at 1-800-44-BOTOX, Option 6, where you will receive step-by-step help with the application process.

[www.BOTOXMedical.com](http://www.BOTOXMedical.com)

# *Cervical dystonia and BOTOX<sup>®</sup> treatment*

## *Cervical dystonia definitions and symptoms*

Cervical dystonia is a condition that causes the muscles in your neck to tighten or spasm without your control.<sup>3</sup> If you have cervical dystonia, your head may turn in an unusual way, or it may be forced into an abnormal posture. The symptoms can make it hard to do simple daily tasks, such as dressing yourself or driving a car. But cervical dystonia can be treated. Getting treatment may help you return to your regular activities.

The first step to feeling better is talking to your doctor about your symptoms. Common signs of cervical dystonia often vary from person to person and may include any combination of the following:

- Muscle spasms or tightness<sup>3</sup>
- Neck pain (reported in up to 91% of patients)<sup>4</sup>
- Aches and pains around the neck that worsen over time<sup>3</sup>
- Head turning, pulling, or shifting to one side<sup>3</sup>
- Shaking or tremor<sup>3</sup>
- Symptoms that improve after sleep or rest<sup>3</sup>
- Symptoms that worsen after stress or activity<sup>3</sup>
- Problems swallowing<sup>5</sup>

If you suspect that you have cervical dystonia, be sure to talk to your doctor.

*“It all started with a pain in the base of my neck. Then my neck started to pull and shake when I tried to pull it back. It was tough. I was fighting it every day. I was at war with my neck.”*

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***Gus, cervical dystonia patient***

### **Important Safety Information**

#### **Warnings**

Serious heart problems and serious allergic reactions have been reported rarely. If you think you're having an allergic reaction or other unusual symptoms such as difficulty swallowing, speaking or breathing, call your doctor immediately.

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# *Cervical dystonia and BOTOX® treatment*

## *Diagnosing cervical dystonia*

Diagnosing cervical dystonia can be a challenge, especially in its early or mild stages.<sup>3</sup> This is because the symptoms may be subtle, or slight at first, and differ from person to person. Cervical dystonia is sometimes diagnosed incorrectly because it resembles other physical complaints such as stiff neck or stress. In some cases, patients may suffer with cervical dystonia for a year or more before being diagnosed and treated.<sup>6</sup>

In testing for cervical dystonia, many different tests may be used including brain imagings, blood tests, electroencephalographies (EEGs), electromyographies (EMGs), and video monitoring, among others. When people see their doctors, the blood tests, magnetic resonance imagings (MRIs), and neurological examinations are usually normal.<sup>7,8</sup> An evaluation may also include genetic testing in some situations.<sup>3</sup> These tests may be used to rule out other conditions, leaving cervical dystonia as the diagnosis.

To provide additional information that can help doctors diagnose cervical dystonia, movement disorder experts have developed these simple screening questions<sup>9</sup>:

- *Do you find your head involuntarily turning, tilting, or shifting in any direction, with or without pain?*
- *Does your head involuntarily shake or jerk, with or without pain?*

## *Cervical dystonia is a progressive disease*

Cervical dystonia is a progressive disease, meaning that the symptoms may get worse with time. In approximately 20% of people, cervical dystonia symptoms go away completely. This is known as remission. However, it is important to understand that the symptoms often return.<sup>3</sup> For most people with cervical dystonia, their symptoms usually stop worsening after 5 years.<sup>6</sup>

Generally, if you begin to experience cervical dystonia while young, it may spread to other parts of your body, whereas, if you begin to experience symptoms as an adult, it may only involve the neck muscles.<sup>10</sup>

There are many causes of cervical dystonia; through an accident, through inherited genes, or through some unknown cause. If you are interested in more information, please talk to your doctor.

### **Important Safety Information**

#### **Warnings**

Patients with certain neuromuscular disorders such as ALS, myasthenia gravis, or Lambert-Eaton syndrome may be at increased risk of serious side effects.

Patients with neuromuscular disorders may be at increased risk of clinically significant systemic effects, including severe dysphagia (difficulty swallowing) and respiratory compromise from typical doses of BOTOX®.

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# Cervical dystonia and BOTOX® treatment

## How cervical dystonia impacts daily activities

If you have cervical dystonia, you may find it hard to do simple things. Dressing, shaving, housework, driving a car, or using a computer can become a challenge. Also, cervical dystonia often affects people who have spent years in jobs or hobbies that require repetitive movements such as musicians, writers, artists, golfers, rowers, and tennis players.<sup>10</sup>

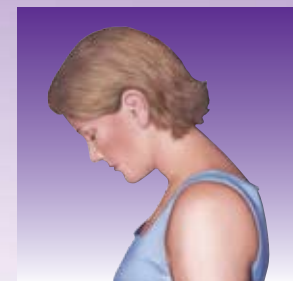
Although there is no cure for cervical dystonia, there is a good chance that your symptoms can be successfully managed with proper treatment. It may help to know that there are healthcare professionals who understand your condition and are experienced in helping patients find relief.

As medical knowledge about cervical dystonia continues to grow, and with wider availability of helpful medicines, there is more reason than ever to be hopeful about treatment.

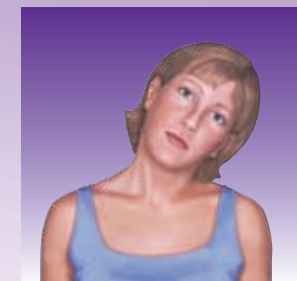
## Types of cervical dystonia

Cervical dystonia causes constant muscle tension—that's the dystonia part—and it occurs mainly in the neck area, in what is called the cervical spine. Tense muscles in the neck pull the head in abnormal movements and postures

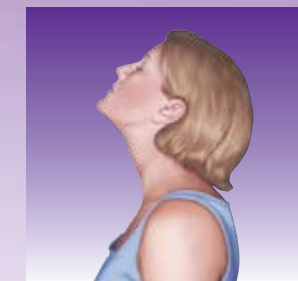
There are 4 main types of cervical dystonia, defined by which way the head is tilting:



*Forward*  
**Anterocollis**



*To the side*  
**Laterocollis**



*Backward*  
**Retrocollis**



*Rotated*  
**Torticollis**

Sometimes the head is pulled in 2 or more directions at the same time, such as forward and to the side.<sup>11</sup> Most patients (up to 80%) have a combination of these postures.<sup>12</sup> Cervical dystonia may also be called *spasmodic*, if there are sudden, involuntary muscle contractions, or *sustained*, if the muscle tension is continuous.<sup>11</sup>

### Important Safety Information

#### Warnings

Dysphagia (difficulty swallowing) is a commonly reported adverse event following treatment of cervical dystonia patients with all botulinum toxins. In these patients, there are reports of rare cases of dysphagia severe enough to warrant the insertion of a gastric feeding tube.

# *Cervical dystonia and BOTOX® treatment*

## *Treatments for cervical dystonia*

Doctors have a number of options for treating cervical dystonia. The most commonly chosen treatment is BOTOX® (Botulinum Toxin Type A) neurotoxin. BOTOX® is considered a first-line therapy for cervical dystonia,<sup>13</sup> which means that doctors may choose to go straight to BOTOX® neurotoxin, without trying other options. Your physician determines exactly which muscles are troubling you and injects BOTOX® neurotoxin into them.

BOTOX® is often used in combination with physical therapy.<sup>14</sup> Oral prescription drugs may also be used. These include primarily muscle relaxants, antiseizure medications, and anticholinergics—a type of drug that blocks impulses from the nervous system.<sup>11</sup> Surgery on the involved nerves may also be an option, but surgery is rarely used, now that BOTOX® neurotoxin is available.<sup>11</sup>

With BOTOX® treatment, many cervical dystonia patients get relief from their overly active or tense neck muscles. BOTOX® may also decrease their pain associated with cervical dystonia even before it relaxes their neck muscles.

## *How BOTOX® can help*

For the vast majority of people with cervical dystonia, BOTOX® injections are very effective. BOTOX® therapy stops or greatly reduces neck pain and muscle spasms. Results from a key clinical study showed that after receiving BOTOX® neurotoxin injections, patients with cervical dystonia had improved head posture, pain that was less intense and occurred less often, and an improved ability to function in certain daily activities.<sup>15</sup> Another study showed that pain relief may happen even before muscles become significantly relaxed.<sup>2</sup>

These are all important benefits for people with cervical dystonia. For many of them, BOTOX® injections can be an effective cervical dystonia treatment. After a BOTOX® neurotoxin treatment, many cervical dystonia patients experience up to 3 months of relief from muscle spasms. That is how long it takes the nerves to resume the release of acetylcholine.

### *Here's what BOTOX® neurotoxin can do for you:*

- Stop or greatly reduce neck pain and muscle spasms
- Improve head posture
- Reduce intensity and frequency of neck pain
- Improve your ability to perform certain daily activities

## *BOTOX<sup>®</sup> success story*



### *Kathleen, age: 34*

#### *Treatments preceding cervical dystonia diagnosis:*

- Massage
- Acupuncture
- Traction
- Steroids
- Psychotropics
- Chiropractic adjustment

#### *Duration of time from initial symptoms to diagnosis: 17 years*

#### *Presenting symptoms:*

- Neck pain
- Tremor
- Stiffness
- Limited range of motion

#### *Treatment regimen:*

BOTOX<sup>®</sup> (Botulinum Toxin Type A) injections

*“Occasionally, my neck might grab for a second...and then it just releases. It just doesn't have that power anymore, to hold onto me. So no more neck pain.”*



[www.BOTOXMedical.com](http://www.BOTOXMedical.com)

# BOTOX<sup>®</sup> success story



*Gus, age: 32*

*Treatments preceding cervical dystonia diagnosis:*

- Analgesics
- Anti-inflammatories
- Physical therapy

*Duration of time from initial symptoms to diagnosis: 1 year*

*Presenting symptoms:*

- Neck pain
- Tremor
- Right torticollis

*Treatment regimen:*

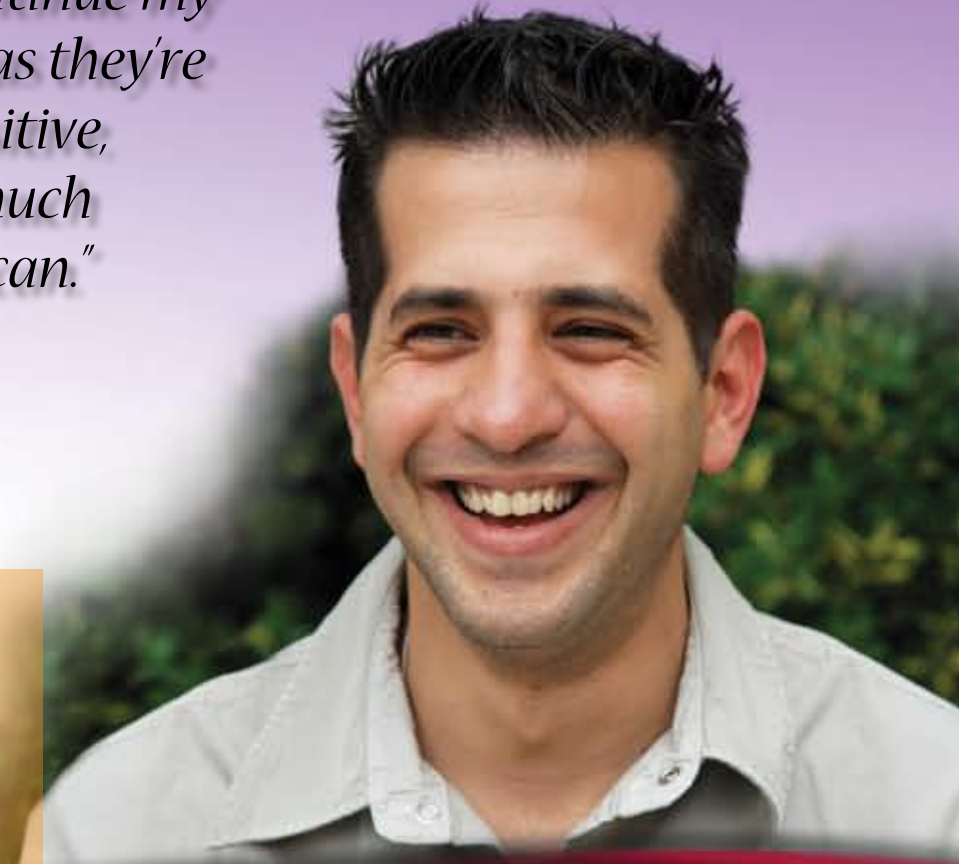
BOTOX<sup>®</sup> (Botulinum Toxin Type A) injections and physical therapy

*“My outlook is to continue my treatments as long as they’re needed and stay positive, live life, just live as much of a normal life as I can.”*

*Ask your doctor if BOTOX<sup>®</sup> treatment is right for you*

## **Important Safety Information Precautions**

Patients or caregivers should be advised to seek immediate medical attention if swallowing, speech, or respiratory disorders arise.



[www.BOTOXMedical.com](http://www.BOTOXMedical.com)

# Living with cervical dystonia – tips for patients

In addition to taking your medications and following your doctor's advice, there is more you can do to relieve your cervical dystonia symptoms:

- Avoid stress and stressful situations, whether they occur in the workplace, in public places, or at home
  - *It is important to understand that stress can exacerbate the symptoms of cervical dystonia*<sup>14</sup>
- Stay well rested (which can improve the symptoms of cervical dystonia) and avoid overexertion
- Eat sensibly and nutritionally
  - *Avoid those foods that stimulate the nerves. Caffeine, sugar, and chocolate can sometimes activate cervical dystonia symptoms*<sup>16</sup>
- Consult with your doctor regarding an exercise program
  - *Light yoga, simple calisthenics, water exercises, and deep breathing exercises can help relax both mind and body*<sup>16</sup>
- Connect with support groups in your area for additional resources and education (some are listed at the back of this brochure)

## ***Here is a sensory exercise you may want to try...***

Cervical dystonia is the most common focal dystonia that responds to *sensory tricks*.

For example, patients with cervical dystonia may place their hand on the side of their face, chin, or back of the head. This may help reduce the intensity of the symptoms. Lightly touching or applying pressure to certain areas of the head—on the side that is opposite to that which the head is turned—may temporarily allow correction of abnormal head position.<sup>14</sup>

If your doctor decides you should be treated for cervical dystonia, be sure to keep track of any improvements or worsening of your symptoms as well as how you react to treatment. Share all your observations with your doctor—be an active partner in managing your cervical dystonia.

### **Important Safety Information**

#### **Side effects**

Localized pain, tenderness, and/or bruising may be associated with the injection.

In cervical dystonia, the most common side effects following injection include difficulty swallowing (19%), upper respiratory infection (12%), neck pain (11%), and headache (11%).

# Blepharospasm and BOTOX® treatment



## ***Blepharospasm definitions and symptoms***

Blepharospasm is a muscle disorder characterized by involuntary spasm of the muscles around the eye, resulting in uncontrolled narrowing or closing of the eyelid.<sup>17</sup> The gravest consequence of blepharospasm is impairment of vision. Approximately 56% of people with blepharospasm are female, and the average age of onset is 56 years.<sup>17,18</sup>

## ***Diagnosing blepharospasm***

Doctors diagnose blepharospasm based on key signs and symptoms. In the early stages of blepharospasm, patients may complain of irritation and discomfort of the eyelids as well as increased blinking.<sup>17</sup>

As blepharospasm progresses, blinking usually becomes more frequent, forceful, and uncontrollable. Bright light, noise, stress, polluted air, or wind can make the symptoms worse.<sup>19</sup> Without proper medical treatment, few blepharospasm patients get better on their own.<sup>17</sup>

## ***How BOTOX® treatment can help***

BOTOX® (Botulinum Toxin Type A) neurotoxin has been the principal treatment for blepharospasm since FDA approval in 1989. When injected directly in the affected muscles around the eyes, the neurotoxin relieves the muscle spasm and the forceful involuntary closing of the eyelid. BOTOX® treatment can be repeated approximately every 3 months as long as the patient continues to respond and does not have an allergic reaction.<sup>13</sup>

BOTOX® is approved for the treatment of strabismus (crossed eyes) and blepharospasm (eyelid spasms) associated with dystonia (muscle tightening), including benign essential blepharospasm or VII nerve disorders in patients 12 years of age and above.

The efficacy of BOTOX® treatment in deviations over 50 diopters, in restrictive strabismus, in Duane's syndrome with lateral rectus weakness, and in secondary strabismus caused by prior surgical over-recession of the antagonist has not been established. BOTOX® is ineffective in chronic paralytic strabismus except when used in conjunction with surgical repair to reduce antagonist contracture.

# Strabismus and BOTOX® treatment



## Strabismus definitions and symptoms

Strabismus is the name doctors give a group of disorders in which muscles tighten around the eye, resulting in pulling of the eyeball to the side. Strabismus is also known as *crossed eyes*. A common form is *esotropia*, or convergent strabismus, which is when one or both eyes turn toward the nose.<sup>20</sup> Other symptoms include squinting, tilting the head to look at things, frequent eye movements, headache, rubbing the eyes, tearing, and double vision.

Today, strabismus is typically treated early in childhood (before 4 to 6 years of age) by orthoptic training (eye exercises) and/or corrective lenses. In some cases where strengthening techniques are not successful, surgery may be required to realign the eye muscles.<sup>20</sup>

In adults, strabismus can occur gradually or rapidly. When it happens gradually, strabismus is usually the result of loss of muscle tone. When it happens rapidly, strabismus may be a result of an injury or a serious illness.<sup>20</sup>

## Diagnosing strabismus

When it occurs in children, strabismus is usually noticed first by parents or a doctor because the child's eyes appear to be positioned abnormally. An eye examination confirms the diagnosis and identifies the type of strabismus.

Strabismus should never be ignored on the assumption that a child will outgrow it. Unless treated before age 9, strabismus can lead to permanent loss of sight in the deviating eye.<sup>20</sup>

## How BOTOX® treatment can help

In treating strabismus, only BOTOX® (Botulinum Toxin Type A) treatment is believed to have an effect on pairs of muscles. Upon being injected with BOTOX® neurotoxin, the muscles weaken and become slightly relaxed. This allows the muscles on the other side of the eye to contract.<sup>13,21</sup>

Through this double action, BOTOX® treatment is thought to help the eyes align, or look in the same direction.

### Important Safety Information

#### Side effects

In blepharospasm, the most common side effects following injection include ptosis (20.8%), inflammation of the cornea (6.3%), and eye dryness (6.3%).

In strabismus, the most common side effects following injection include ptosis (15.7%) and vertical deviation (16.9%).

[www.BOTOXMedical.com](http://www.BOTOXMedical.com)



## ***Finding a doctor who injects BOTOX<sup>®</sup>***

If you would like to discuss your condition with a doctor who injects BOTOX<sup>®</sup> (Botulinum Toxin Type A), you can find one by visiting [www.BOTOXMedical.com](http://www.BOTOXMedical.com) and using our Physician Locator.

*To locate a doctor who injects BOTOX<sup>®</sup> neurotoxin, simply visit these Web sites:*

The official BOTOX<sup>®</sup> Web site:

**[www.BOTOXMedical.com](http://www.BOTOXMedical.com)**

WebMD<sup>®</sup> Physician Directory:

**[http://doctor.webmd.com/physician\\_finder](http://doctor.webmd.com/physician_finder)**

AMA DoctorFinder:

**<http://webapps.ama-assn.org/doctorfinder/home.html>**

*For more information about BOTOX<sup>®</sup>,  
please visit our Web site at*

**[www.BOTOXMedical.com](http://www.BOTOXMedical.com)**

*or call*

**1-800-44-BOTOX**

The logo for BOTOX, featuring the word "BOTOX" in a bold, white, sans-serif font with a registered trademark symbol. Below it, the words "Botulinum Toxin Type A" are written in a smaller, white, sans-serif font. To the left of the text is a stylized graphic consisting of three curved lines in red, orange, and yellow, suggesting a dynamic or energetic movement.

**BOTOX<sup>®</sup>**  
Botulinum Toxin Type A

## ***Patient support groups***

Your healthcare provider is the best source of information for your condition and its treatment. In addition, there are many organizations that offer support, education, and services for patients. Some of them may even have local chapters in your area.

***Benign Essential Blepharospasm Research Foundation (BEBRF)***  
***1-409-832-0788***  
***[www.blepharospasm.org](http://www.blepharospasm.org)***

***Care4Dystonia, Inc.***  
***[www.care4dystonia.org](http://www.care4dystonia.org)***

***Dystonia Medical Research Foundation (DMRF)***  
***1-312-755-0198 1-800-377-DYST (1-800-377-3978)***  
***[www.dystonia-foundation.org](http://www.dystonia-foundation.org)***



***The National Spasmodic Torticollis Association (NSTA)***  
***1-714-378-9837 1-800-487-8385***  
***[www.torticollis.org](http://www.torticollis.org)***

***ST/Dystonia, Inc.***  
***1-262-560-9534 1-888-445-4588***  
***[www.spasmodictorticollis.org](http://www.spasmodictorticollis.org)***

For more information on BOTOX<sup>®</sup>,  
visit our Web site,

[www.BOTOXMedical.com](http://www.BOTOXMedical.com)

or call 1-800-44-BOTOX.

Full prescribing information has been provided to your doctor.

1. BOTOX<sup>®</sup> Prescribing Information, October 2006. 2. Relja M, Telarovic S. Botulinum toxin type-A and pain responsiveness in cervical dystonia: a dose response study. Presented at: 9th International Congress of Parkinson's Disease and Movement Disorders; March 5-8, 2005; New Orleans, LA. 3. WE MOVE Worldwide Education and Awareness for Movement Disorders. Cervical dystonia information for patients and caregivers: symptoms. WE MOVE Web site. [http://www.wemove.org/dys/cdys\\_sym.html](http://www.wemove.org/dys/cdys_sym.html). Updated September 10, 2007. Accessed October 15, 2007. 4. Galvez-Jimenez N, Lampuri C, Patino-Picirillo R, Hargreave MJA, Hanson MR. Dystonia and headaches: clinical features and response to botulinum toxin therapy. In: Fahn S, Hallett M, DeLong MR, eds. *Dystonia 4: Advances in Neurology*. Philadelphia, PA: Lippincott, Williams & Wilkins; 2004;94:321-328. 5. Dystonia Australia. Frequently asked questions. Dystonia Australia Web site. <http://www.dystoniaaustralia.org.au/faq.htm>. Accessed June 4, 2007. 6. Van Zandijcke M. Cervical dystonia (spasmodic torticollis). Some aspects of the natural history. *Acta Neurol Belg*. 1995;95(4):210-215. 7. Dystonia Medical Research Foundation. Dystonia defined: how is dystonia diagnosed? Dystonia Medical Research Foundation Web site. [http://www.dystonia-foundation.org/pages/how\\_is\\_dystonia\\_diagnosed\\_40.php](http://www.dystonia-foundation.org/pages/how_is_dystonia_diagnosed_40.php). Accessed December 3, 2007. 8. Stacy M. Idiopathic cervical dystonia: an overview. *Neurology*. 2000;55(12 suppl 5):S2-S8. 9. Saunders-Pullman R, Soto-Valencia J, Raymond D, et al. Validation of the Beth Israel Dystonia Screen (BIDS) for the diagnosis of dystonia. Presented at: 8th International Congress of Parkinson's Disease and Movement Disorders; June 13-17, 2004; Rome, Italy. 10. American Academy of Neurology. Dystonia—what is it? The Brain Matters Web site. <http://www.thebrainmatters.org/index/cfm?key=1.16.2>. Published 2005. Accessed December 3, 2007. 11. Jankovic J. Treatment of cervical dystonia. In: Brin MF, Comella CL, Jankovic J, eds. *Dystonia: Etiology, Clinical Features, and Treatment*. Philadelphia, PA: Lippincott, Williams & Wilkins; 2004:159-166. 12. Velickovic M, Benabou R, Brin MF. Cervical dystonia pathophysiology and treatment options. *Drugs*. 2001;61(13):1921-1943. 13. BOTOX<sup>®</sup> Prescribing Information, October 2006. 14. WE MOVE Worldwide Education and Awareness for Movement Disorders. Dystonia information for patients and caregivers: approaches to treatment. WE MOVE Web site. [http://www.wemove.org/dys/dys\\_tre.html](http://www.wemove.org/dys/dys_tre.html). Updated April 15, 2006. Accessed December 3, 2007. 15. Data on file, Allergan, Inc.; Study 140 Final Report. 16. ST/Dystonia. Living with ST: finding your road to happiness! ST/Dystonia Web site. <http://www.spasmodictorticollis.org/livingwithSt.cfm>. Accessed December 3, 2007. 17. Hallett M, Daroff RB. Blepharospasm: report of a workshop. *Neurology*. 1996;46(5):1213-1218. 18. Grandas F, Elston J, Quinn N, Marsden CD. Blepharospasm: a review of 264 patients. *J Neurol Neurosurg Psychiatry*. 1988;51(6):767-772. 19. Malinovsky V. Benign essential blepharospasm. *J Am Optom Assoc*. 1987;58(8):646-651. 20. The Merck Manuals Online Medical Library. Strabismus. The Merck Manuals Online Medical Library Web site. <http://www.merck.com/mmpe/print/sec19/ch293/ch293e.html>. Updated November 2005. Accessed June 4, 2007. 21. Scott AB. Botulinum toxin injection into extraocular muscles as an alternative to strabismus surgery. *Ophthalmology*. 1980;87(10):1044-1049.





