

excessive
sweating?

Now there's
a solution!

 **ALLERGAN**
Our pursuit. Life's potential.™

what is hyperhidrosis?

When even the strongest drug-store antiperspirant still leaves you all wet, it's time to take control.

there's a name for it...
hyperhidrosis

Everyone sweats, but for some people it's way beyond what an antiperspirant can handle. If your excessive sweating has you changing your clothes at work, dreading a handshake or choosing clothes because they won't show sweat stains, it could be a medical condition called hyperhidrosis.

what's hyperhidrosis?

Hyperhidrosis is a disorder that makes you sweat more than you need to. In primary hyperhidrosis, the cause is unknown and can affect specific areas, such as the armpits, hands, feet and/or face. Other factors such as diabetes, menopause, nerve damage and some medications can also cause excessive sweating, called secondary hyperhidrosis. Your doctor will need to do a full exam to arrive at a diagnosis.

your quality of life is important!

Hyperhidrosis is not a life-threatening condition, but it can seriously affect your quality of life. Besides being a big inconvenience and costing you money, hyperhidrosis can cause skin breakouts, unpleasant odours and promote infection. It is estimated that 910,000 Canadians are affected by some form of hyperhidrosis.

excessive sweating can be treated!

Hyperhidrosis is a medical condition that is highly treatable. In fact, getting help is easy.

Check your **health coverage** – you may already be covered for treatment. Many employers offer extended health benefits through their insurance plans.

Learn more about hyperhidrosis at

sweatmanagement.ca

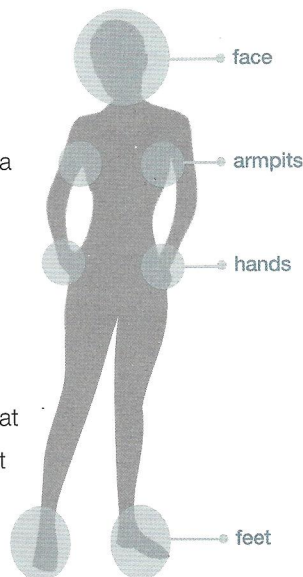


BOTOX® treatment for excessive sweating is often covered by private health plans.

hyperhidrosis is treatable

why me?

Producing some sweat is not a bad thing – in fact, sweat is necessary to keep your body at a healthy temperature. With hyperhidrosis, however, you produce way more sweat than your body needs. The cause of primary hyperhidrosis is still a mystery, but what is known is that the nerves that control the sweat glands become overactive.



taking control of excessive sweating

The good news about hyperhidrosis is that it can be successfully treated. There are a number of options, but there's no single "right" way to treat hyperhidrosis. You have taken the first step by discussing your condition with your doctor.

treatment options

focal injections interrupt the signal from the nerves to the sweat glands

topical treatments such as aluminum chloride hexahydrate, inhibit sweating

oral medications treat the underlying conditions

iontophoresis involves applying a low-intensity electric current to the affected areas

surgery severs the nerves that cause excessive sweating

BOTOX® can help

BOTOX® works!

BOTOX® focal injections are an effective way to treat excessive sweating. In one study of excessive underarm sweating, 95% of patients experienced an average reduction in sweating of 83% in one week.¹ Plus, the effect lasts up to seven months on average.² BOTOX® is the only prescription medication approved for the treatment of hyperhidrosis.

BOTOX® safety

BOTOX® is deemed safe and effective when used correctly by a specially trained doctor. BOTOX® has been used for many years to treat other conditions and has been approved in Canada to treat muscle spasms affecting the eyes, neck and limbs, as well as muscle spasms in children as young as two years of age with cerebral palsy. The long-term safety of the drug is well proven. Please see safety information.

BOTOX® treatment is simple

The procedure for BOTOX® treatment is a simple one. A small amount of the drug is injected intradermally to the affected area using a very fine needle. The needle is placed just under the skin and any discomfort is minimal. You may also choose to have a local anesthetic applied to the area before the injection if you are concerned about needles. You should notice a significant reduction of sweating in the treated areas within a week of treatment.

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safety information*

In general, adverse reactions occur within the first few days following injection and while generally transient may have a duration of several months or, in rare cases, longer.

Local muscle weakness represents the expected pharmacological action of botulinum toxin in muscle tissue. However, weakness of adjacent muscles associated with local diffusion and/or injection technique has been reported. Muscle weakness remote to the site of injection and other serious adverse effects (e.g. dysphagia, aspiration pneumonia) have been rarely reported in both pediatric and adult patients, some associated with a fatal outcome.

As is expected for any injection procedure, localized pain, inflammation, paresthesia, hypoaesthesia, tenderness, swelling/edema, erythema, localized infection, bleeding and/or bruising have been associated with the injection. Needle-related pain and/or anxiety have resulted in vasovagal responses, including transient symptomatic hypotension and syncope.

Primary hyperhidrosis of the axillae – clinical trials

In safety data compiled from double-blind and open-label studies involving 397 patients treated with BOTOX®, the following adverse reactions were reported. Headache, paresthesia, hot flush, nausea, hyperhidrosis, skin odour abnormal, pruritus, subcutaneous nodule, alopecia, pain in extremity, injection site pain, pain, injection site edema, injection site hemorrhage, injection site hypersensitivity, injection site irritation, asthenia.

Note: increase in non-axillary sweating was reported in 4.5% of patients within one month after injection and showed no pattern with respect to anatomical sites affected. Resolution was seen in approximately 30% of the patients within four months.

Post-market adverse drug reactions

BOTOX® and BOTOX COSMETIC® contain the same active ingredient in the same formulation. Therefore, adverse events observed with the use of BOTOX COSMETIC® also have the potential to be associated with the use of BOTOX®. Adverse events after treatment with botulinum toxin include rare spontaneous reports. These reactions are reported voluntarily from a population of uncertain size. The exact relationship of these events to botulinum toxin is unknown. This is not a comprehensive list of the adverse events associated with the use of BOTOX®. Should you have any questions or concerns, please consult with your physician.

For more information about hyperhidrosis
and how to manage your symptoms
go to sweatmanagement.ca



References:

1. Naumann MK, Lowe NJ. Botulinum toxin type A in the treatment of bilateral primary axillary hyperhidrosis: randomized, parallel-group, double-blind, placebo-controlled trial. *British Medical Journal* 2001;323:1-4.

2. Naumann MK, Lowe NJ. Botulinum toxin type A is a safe and effective treatment for axillary hyperhidrosis over 16 months. *Archives of Dermatology* 2003;139:731-6

3. BOTOX® Product Monograph. Allergan, Inc. September 26, 2008.

This booklet is intended for patients who have been recommended or prescribed BOTOX® by a doctor. Do not distribute without the advice of a doctor. If you have any questions or are not sure about any part of your treatment, please ask your doctor or pharmacist.



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