What is claimed is:

1. A method of alleviating a symptom of relapsing-remitting multiple sclerosis in a human patient suffering from relapsing-remitting multiple sclerosis or a patient who has experienced a first clinical episode and is determined to be at high risk of developing clinically definite multiple sclerosis comprising administering to the human patient three subcutaneous injections of a therapeutically effective dose of glatiramer acetate over a period of seven days with at least one day between every subcutaneous injection so as to thereby alleviate the symptom of the patient.

2. The method of claim 1, wherein alleviating a symptom comprises reducing the frequency of relapses.

3. The method of claim 1 or 2, wherein alleviating a symptom comprises reducing the mean cumulative number of Gd-enhancing lesions in the brain of the patient.

4. The method of any one of claims 1-3, wherein alleviating a symptom comprises reducing the mean number of new T_2 lesions in the brain of the patient.

5. The method of any one of claims 1-4, wherein alleviating a symptom comprises reducing the cumulative number of enhancing lesions on T_1-weighted images.

6. The method of any one of claims 1-5, wherein alleviating a symptom comprises reducing brain atrophy in the patient.

7. The method of any one of claims 1-6, wherein alleviating a symptom comprises increasing the time to a confirmed relapse in the patient.

8. The method of any one of claims 1-7, wherein alleviating a symptom comprises reducing the total number of confirmed relapses in the patient.

9. The method of any one of claims 1-8, wherein alleviating a symptom comprises reducing the progression of MRI-monitored disease activity in the patient.

10. The method of any one of claims 1-9, wherein alleviating a symptom comprises reducing total volume of T_2 lesions in the patient.

11. The method of any one of claims 1-10, wherein alleviating a symptom comprises reducing the number of new hypointense lesions on enhanced T_1 scans in the patient.

12. The method of any one of claims 1-11, wherein alleviating a symptom comprises reducing the total volume of hypointense lesions on enhanced T_1 scans.

13. The method of any one of claims 1-12, wherein alleviating a symptom comprises reducing the level of disability as measured by EDSS Score in the patient.

14. The method of any one of claims 1-13, wherein alleviating a symptom comprises reducing the change in EDSS Score in the patient.

15. The method of any one of claims 1-14, wherein alleviating a symptom comprises reducing the change in Ambulation Index in the patient.

16. The method of any one of claims 1-15, wherein alleviating a symptom comprises reducing the level of disability as measured by EuroQoL (EQ5D) questionnaire in the patient.

17. The method of any one of claims 1-16, wherein alleviating a symptom comprises reducing the level of disability as

measured by the work productivity and activities impairment - General Health (WPAI-GH) questionnaire in the patient.

18. The method of any one of claims 1-17, wherein the pharmaceutical composition is in a prefilled syringe for self administration by the patient.

19. The method of any one of claims 1-17, wherein the therapeutically effective dose of glatiramer acetate is 40mg.

20. The method of any one of claims 1-19, wherein the patient has not received glatiramer acetate therapy prior to initiation of the subcutaneous injections.

21. The method of any one of claims 1-20, wherein the frequency of an immediate post injection reaction or the frequency of an injection site reaction is reduced relative to daily subcutaneous administration of 20mg glatiramer acetate.

22. A method of increasing the tolerability of GA treatment in a human patient suffering from relapsing-remitting multiple sclerosis or a patient who has experienced a first clinical episode and is determined to be at high risk of developing clinically definite multiple sclerosis which comprises reducing the frequency of subcutaneous injections of a pharmaceutical composition comprising a therapeutically effective dose of glatiramer acetate to three times over a period of seven days with at least one day between every injection.

23. The method of claim 22, wherein increasing the tolerability of glatiramer acetate treatment in the human patient suffering from a relapsing form of multiple sclerosis comprises reducing the frequency of an

immediate post injection reaction.

24. The method of claim 22 or 23, wherein the immediate post injection reaction is palpitations, feeling hot, flushing, hot flushes, tachycardia, dyspnoea, chest discomfort, chest pain, non-cardiac chest , asthenia, back pain, bacterial infection, chills, cyst, face edema, fever, flu syndrome, infection, injection site erythema, injection site hemorrhage, injection site induration, injection site inflammation, injection site mass, injection site pain, injection site pruritus, injection site urticaria, injection site welt, neck pain, pain, migrane, syncope, tachycardia, vasodilatation, anorexia, diarrhea, gastroenteritis, gastrointestinal disorder, nausea, vomiting, ecchymosis, peripheral edema, arthralgia, agitation, anxiety, confusion, foot drop, hypertonia, nervousness, nystagmus, speech disorder, tremor, vertigo, bronchitis, dyspnea, laryngismus, rhinitis, erythema, herpes simplex, pruritus, rash, skin nodule, sweating, urticaria, ear pain, eye disorder, dysmenorrheal, urinary urgency, or vaginal moniliasis.

25. The method of claim 22, wherein increasing the tolerability of glatiramer acetate treatment in the human patient suffering from a relapsing form of multiple sclerosis comprises reducing the frequency of an injection site reaction.

26. The method of claim 22 or 24, wherein the injection site reaction is erythema, hemorrhage, induration, inflammation, mass, pain, pruritus, urticaria, or welt that occurs immediately around the site of injection.

27. Use of glatiramer acetate in the preparation of a medicament for treating relapsing-remitting multiple sclerosis in a human patient suffering from relapsing-

remitting multiple sclerosis or a patient who has experienced a first clinical episode and is determined to be at high risk of developing clinically definite multiple sclerosis wherein the administration pattern of the medicament is three subcutaneous injections of a therapeutically effective dose of glatiramer acetate over a period of seven days with at least one day between every subcutaneous injection.

28. Use of glatiramer acetate in the preparation of a medicament for treating relapsing-remitting multiple sclerosis in a human patient suffering from relapsing-remitting multiple sclerosis or a patient who has experienced a first clinical episode and is determined to be at high risk of developing clinically definite multiple sclerosis wherein the medicament is prepared for an administration pattern of three subcutaneous injections of a therapeutically effective dose of glatiramer acetate over a period of seven days with at least one day between every subcutaneous injection.

29. Use of glatiramer acetate in the preparation of a medicament for increasing the tolerability of GA treatment in a human patient suffering from relapsing-remitting multiple sclerosis or a patient who has experienced a first clinical episode and is determined to be at high risk of developing clinically definite multiple sclerosis wherein the administration pattern of the medicament is three subcutaneous injections of a therapeutically effective dose of glatiramer acetate over a period of seven days with at least one day between every subcutaneous injection.

30. Use of glatiramer acetate in the preparation of a medicament for increasing the tolerability of GA

treatment in a human patient suffering from relapsing-remitting multiple sclerosis or a patient who has experienced a first clinical episode and is determined to be at high risk of developing clinically definite multiple sclerosis wherein the medicament is prepared for an administration pattern of three subcutaneous injections of a therapeutically effective dose of glatiramer acetate over a period of seven days with at least one day between every subcutaneous injection.

31. Glatiramer acetate for use in treating relapsing-remitting multiple sclerosis in a human patient suffering from relapsing-remitting multiple sclerosis or a patient who has experienced a first clinical episode and is determined to be at high risk of developing clinically definite multiple sclerosis by three subcutaneous injections over a period of seven days with at least one day between every subcutaneous injection.

32. Glatiramer acetate for use in increasing the tolerability of GA treatment in a human patient suffering from relapsing-remitting multiple sclerosis or a patient who has experienced a first clinical episode and is determined to be at high risk of developing clinically definite multiple sclerosis by three subcutaneous injections over a period of seven days with at least one day between every subcutaneous injection.

What is claimed is:

1. A medicament comprising glatiramer acetate for use in treating a patient who is suffering from relapsing-remitting multiple sclerosis or who has experienced a first clinical episode and is at high risk of developing clinically definite multiple sclerosis, wherein the medicament is to be administered in a regimen of three subcutaneous injections of a 40mg dose of glatiramer acetate every seven days with at least one day between each subcutaneous injection.

2. Glatiramer acetate for use in a regimen of three subcutaneous injections of a 40mg dose of glatiramer acetate every seven days with at least one day between each subcutaneous injection for uses in treating a patient who is suffering from relapsing-remitting multiple sclerosis or who has experienced a first clinical episode and is at high risk of developing clinically definite multiple sclerosis.

3. The medicament for use according to claim 1 or glatiramer acetate for use according to claim 2, wherein the treating comprises reducing the frequency of relapses, reducing the mean cumulative number of Gd-enhancing lesions in the brain of the patient, reducing the mean number of new T_2 lesions in the brain of the patient, reducing the cumulative number of enhancing lesions on T_1-weighted images, reducing brain atrophy in the patient, increasing the time to a confirmed relapse in the patient, reducing the total number of confirmed relapses in the patient, reducing the progression of MRI-monitored

disease activity in the patient, reducing the total volume of T_2 lesions in the patient, reducing the number of new hypointense lesions on enhanced T_1 scans in the patient, reducing the total volume of hypointense lesions on enhanced T_1 scans, reducing the level of disability as measured by EDSS Score in the patient, reducing the change in EDSS Score in the patient, reducing the change in Ambulation Index in the patient, reducing the level of disability as measured by EuroQoL (EQ5D) questionnaire in the patient, or reducing the level of disability as measured by the work productivity and activities impairment - General Health (WPAI-GH) questionnaire in the patient.

4. The medicament for use according to claim 1, or glatiramer acetate for use according to claim 2, wherein frequency of immediate post injection reaction or of injection site reaction relative to frequency experienced with daily subcutaneous administration of 20mg glatiramer acetate is reduced.

5. The medicament for use according to claim 1 or glatiramer acetate for use according to claim 2, wherein the tolerability in the patient is increased relative to daily subcutaneous administration of a 20mg dose of glatiramer acetate, wherein the increased tolerability comprises reduced frequency of immediate post injection reaction or reduced frequency of injection site reaction, each relative to the frequency experienced with daily subcutaneous administration of 20 mg glatiramer acetate.

6. The medicament or glatiramer acetate, for use according to claim 4 or claim 5, wherein the immediate post injection reaction is palpitations, feeling hot, flushing, hot flushes, tachycardia, dyspnoea, chest discomfort, chest pain, non-cardiac chest, asthenia, back pain, bacterial infection, chills, cyst, face edema, fever, flu syndrome, infection, injection site erythema, injection site hemorrhage, injection site induration, injection site inflammation, injection site mass, injection site pain, injection site pruritus, injection site urticaria, injection site welt, neck pain, pain, migrane, syncope, tachycardia, vasodilatation, anorexia, diarrhea, gastroenteritis, gastrointestinal disorder, nausea, vomiting, ecchymosis, peripheral edema, arthralgia, agitation, anxiety, confusion, foot drop, hypertonia, nervousness, nystagmus, speech disorder, tremor, vertigo, bronchitis, dyspnea, laryngismus, rhinitis, erythema, herpes simplex, pruritus, rash, skin nodule, sweating, urticaria, ear pain, eye disorder, dysmenorrheal, urinary urgency, or vaginal moniliasis.

7. The medicament or glatiramer acetate, for use according to claim 4 or claim 5, wherein the injection site reaction is erythema, hemorrhage, induration, inflammation, mass, pain, pruritus, urticaria, or welt that occurs immediately around the site of injection.

8. The medicament for use according to any one of claim 1 or claims 3-8, wherein the medicament is a pharmaceutical composition comprising 40 mg/ml glatiramer acetate.

9. The medicament for use according to any one of claim 1 or claims 3-8 or glatiramer acetate for use according to any one claims 2-7, wherein the treating comprises reducing the frequency of relapses in the patient.

10. The medicament for use according to any one of claim 1 or claims 3-8 for use in reducing frequency of relapses in a human patient suffering from relapsing-remitting multiple sclerosis.

11. Glatiramer acetate for use according to any one of claims 2-7 for reducing frequency of relapses in a human patient suffering from relapsing-remitting multiple sclerosis.

12. The medicament for use according to any one of claim 1 or claims 3-8 for use in treating a human patient who has experienced a first clinical episode and is at high risk of developing clinically definite multiple sclerosis.

13. Glatiramer acetate for use according to any one of claims 2-7 for treating a human patient who has experienced a first clinical episode and is at high risk of developing clinically definite multiple sclerosis.

14. The medicament for use according to any one of claims 1, 3-9, 10 or 12, or glatiramer acetate for use according to any one of claims 2-7, 9, 11 or 13, wherein the patient has experienced a first clinical episode and is at high risk of developing clinically definite multiple sclerosis, and wherein the patient has at least 1 cerebral lesion

detectable by an MRI scan and suggestive of multiple sclerosis.

15. The medicament for use according to any one of claims 1, 3-10, 12 or 14, or glatiramer acetate for use according to any one of claims 2-7, 9, 11 or 13-14, wherein the glatiramer acetate is administered using a prefilled syringe by self administration.